**State Corporation Commission of Kansas**

**Oil & Gas Conservation Division**

**Recollection Form**

**ACO-2 Amendment to Well History**

**Operator**: License # 3929  
**Name**: Wildhorse Oil Company  
**Address**: Box 187  
**City/State/Zip**: Bogue, Kansas 67625  
**Purchaser**: Clear Creek  
**Operator Contact Person**: Phone: (913) 674-2476  
**Designate Type of Original Completion**: X New Well  
**Date of Original Completion**: 5-1-90  
**Name of Original Operator**: Wildhorse Oil Comp.  
**Original Well Name**: Pakkeibier #1  
**Date of Recompletion**: 8-10-90  
**Commenced**: 8-15-90  
**Re-entry**: Workover  
**Designate Type of Recompletion/Workover**: X Oil  
**Is recompleted production**:  
- Commingled  
- Dual Completion  
- Other (Disposal or Injection)  
**Date**: NOV 8 1990  
**Elevation**: Ground 2235  
**K.C.C. Office Use Only**

**Letter of Confidentiality Attached**
**Wireline Log Received**
**Driller's Time Log Received**
**Distribution**: SWD/Rep  
**KCC**: KGS  
**Plug**: Other (Specified)**  

**INSTRUCTIONS**: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the recompletion of any well. Rules 82.3-107 and 82.3-141 apply. Information on side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form. See rule 82.3-107 for confidentiality in excess of 12 months. One copy of any additional wireline logs and driller's time logs (not previously submitted) shall be attached with this form. Submit ACO-4 or ACO-5 prior to or with this form for approval of commingling or dual completions. Submit CP-11 with all plugged wells. Submit CP-111 with all temporarily abandoned wells. NOTE: Conversion of wells to either disposal or injection must receive approval before use; submit form U-1.

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

**Signature**: /s/ David C. Brown  
**Title**: Partner  
**Date**: 9-29-90  
**Subscribed and sworn to before me this 16th day of November 1990**

**Notary Public**: Jean Freeman  
**Date Commission Expires**: 2-21-93  

**Form ACO-2**

7/89
### Recompletion Formation Description

<table>
<thead>
<tr>
<th>Name</th>
<th>Top</th>
<th>Bottom</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anhydrite</td>
<td>1916</td>
<td>1948</td>
</tr>
<tr>
<td>Topeka</td>
<td>3309</td>
<td></td>
</tr>
<tr>
<td>Heebner</td>
<td>3453</td>
<td></td>
</tr>
<tr>
<td>Lansing</td>
<td>3495</td>
<td></td>
</tr>
<tr>
<td>BKHC</td>
<td>3686</td>
<td></td>
</tr>
<tr>
<td>Arbuckle</td>
<td>3801</td>
<td></td>
</tr>
</tbody>
</table>

### Additional Cementing/Squeeze Record

<table>
<thead>
<tr>
<th>Purpose:</th>
<th>Depth</th>
<th>Type of Cement</th>
<th># Sacks Used</th>
<th>Type and Percent Additives</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perforate</td>
<td>Top</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Protect Casing</td>
<td>Bottom</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Plug Back TD</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Plug Off Zone</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Perforation Record

<table>
<thead>
<tr>
<th>Shots Per Foot</th>
<th>Specify Footage of Each Interval Perforated</th>
<th>Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>3478–81</td>
<td>500gals. Mud acid (15% NE)</td>
</tr>
</tbody>
</table>

PBTD 3717 Plug Type Cast Iron Plug

### Tubing Record

- **Size**: 5¼
- **Set At**: 3798′
- **Packer At**: 3717′
- **Was Liner Run**: Y
- **Date of Resumed Production, Disposal or Injection**: 8-15-90
- **Estimated Production Per 24 Hours**: Oil 58 Bbls. Water Trace Bbls.
- **Gas Disposition**: Gas Mcf

Disposition of Gas: [X] Vented [ ] Sold [ ] Used on Lease (If vented, submit ACO-18.)