STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION OR RECOMPLETION FORM
AGO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

Operator: License # J5993
Name: CONTRA OIL & GAS CORPORATION
Address: 221 N. Robinson, Suite 1700, Wichita, Kansas 67202
City/State/Zip: Wichita, KS 67202

Purchaser: 

Operator Contact Person: Brad Croom
Phone: 316-271-7031

Contractor: License # 567101
Name: PAVOLIN ARTIFICIAL LIFTING, Box 293, Russell, Kansas 67665

Wellsite Geologist: Richard Orsak
Phone: (316) 232-7031

Designate Type of Completion
New Well
Re-Entry
Workover

Oil
SMD
Temp Abd
Gas
Inj
Delayed Comp.
K-Dry
Other (Core, Water Supply etc.)

IF OWNED: old well Info as follows:
Operator
Well Name
Comp. Date
Old Total Depth

WELL HISTORY
Drilling Method: \(\text{\(\checkmark\)}}\) Mud Rotary \(\text{\(\checkmark\)}}\) Air Rotary \(\text{\(\checkmark\)}}\) Cable

9-12-86
9-20-86
9-21-86
Spud Date

Date Reached TD
Completion Date

4200
875
Total Depth PTD

Amount of Surface Pipe Set and Cemented at 822 feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set feet
If alternate 2 completion, cement circulated from:
feet depth to:

\(\text{\(\checkmark\)}}\) Cement Company Name
Office # 321631

\(\text{\(\checkmark\)}}\) Invoice #

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 spud date of any well. Rule 82-3-130, 82-3-107 and 82-3-106 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 this form. See rule 82-3-107 for confidentiality in excess of 12 months.

One copy of all wireline logs and drillers time log shall be attached with this form. Submit CP-4 form with all plugged wells. Submit CP-11 form with all temporarily abandoned wells.

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

District Operations Superintendent

Title

Date Commission Expires 1-14-87

Subscribed and sworn to before me this 30th day of September 1986.

Notary Public

Date Commission Expires 1-14-87

API No. 15-089-20,003 CO-00-00

County: 

SK. SK. Sec. 30. Twp. A. Rge. JA. 

East West

660

660

\(\text{\(\checkmark\)}}\) Ft North from Southeast Corner of Section
\(\text{\(\checkmark\)}}\) Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)

Lease Name: ACHMIST
WELL #: 1-30

Field Name: 

Producing Formation: 

Elevation: Ground 1525 ft NBL 1530 ft

Section Plat

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WATER SUPPLY INFORMATION
Disposition of Produced Water: \(\text{\(\checkmark\)}}\) Disposal

Repressuring

Questions on this portion of the ADO-1 call:
Water Resources Board (913) 296-3717
Source of Water:
Division of Water Resources Permit #.

Groundwater
\(\text{\(\checkmark\)}}\) Ft North from Southeast Corner

Well
\(\text{\(\checkmark\)}}\) Ft West from Southeast Corner of
Sec Twp Rge East West

Surface Water
\(\text{\(\checkmark\)}}\) Ft North from Southeast Corner

(stream, pond etc.)\(\text{\(\checkmark\)}}\) Ft West from Southeast Corner

Sec Twp Rge. East West

Pumpers Pond

\(\text{\(\checkmark\)}}\) Other (explain)

(purchased from city, R.W.D. #)

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Notary Public

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KCC: OFFICE USE ONLY

Distribution

\(\text{\(\checkmark\)}}\) KCC녕

\(\text{\(\checkmark\)}}\) SM/Rep

\(\text{\(\checkmark\)}}\) NEPA

\(\text{\(\checkmark\)}}\) Other (Specify)

\(\text{\(\checkmark\)}}\) Drillers Time Log Received

\(\text{\(\checkmark\)}}\) Letter of Confidentiality Attached

\(\text{\(\checkmark\)}}\) Wireline Log Received

\(\text{\(\checkmark\)}}\) Other

Form ADO-1 (5-86)
WELL LOG

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken

Yes  X  No

Samples Sent to Geological Survey

X  Yes  No

Cores Taken

Yes  X  No

Formation Description

X  Log  No Sample

Name  Top  Bottom

Topeka  2269  2528
Beeber  2528  2615
Lansing  2615  2911
B/KC  2911  3214
Miss  3214  3278
Hunton  3278  3398
Viola  3398  3647
Simpson  3647  3726
Arbuckle  3726  4152
Reagan  4152  4173
PreCambrian  4173

CASING RECORD

Report all strings set-conductor, surface, Intermediate, production, etc.

Purpose of String  Size Hole  Size Casing  Weight, Drilled  Set (in O.d.)  Lbs/ft.

Surface  .72 1/8  .8 1/8  .04
Production  Dry Hole

PERFORATION RECORD

Shots Per Foot  Specify footage of each interval perforated

Acid, Fracture, Shot, Cement Squeeze Record

(Amount and Kind of Material Used)  Depth

TUBING RECORD  Size  Set At  Packer at  Liner Run

Date of First Production  Producing Method

Flowing  Pumping  Gas Lift  Other (explain)

Estimated Production

Per 24 Hours

Oil  Gas  Water  Gas-Oil Ratio  Gravity

BBs  MCF  BBs  CFBP

METHOD OF COMPLETION  Production Interval

Disposition of gas

Vented  Sold  Open Hole  Other (Specify)

Used on Lease  Perforation

Dually Completed  Commingled

RELEASED

NOV 7 1987