

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

Operator: License # 03170

Name: Shannon Energy Corp.

Address P.O. Box 6026

City/State/Zip Liberal, Kansas 67901

Purchaser: _____

Operator Contact Person: Bruce Shannon

Phone (316) 626-6017

Contractor: Name: Hembree Well Service

License: _____

Wellsite Geologist: None

Designate Type of Completion

☐ New Well ☒ Re-Entry ☐ Workover

☐ Oil ☒ SWD ☐ Temp. Abd.

☐ Gas ☐ Inj ☐ Delayed Comp.

☐ Dry ☐ Other (Core, Water Supply, etc.)

If OMO: old well info as follows:

Operator: Amoco Production Co.

Well Name: J.A. Englert G.U. #1

Comp. Date 5-8-79 Old Total Depth 3005

Drilling Method:

☒ Mud Rotary ☐ Air Rotary ☐ Cable

5-23-90 5-25-90 N/A
Spud Date Date Reached TD Completion Date

API NO. 15- 075-20281-0001

County Hamilton

NO NE SW Sec. 22 Twp. 25S Rge. 39 X East West

1980 Ft. North from Southeast Corner of Section

3300 Ft. West from Southeast Corner of Section
(NOTE: Locate well in section plat below.)

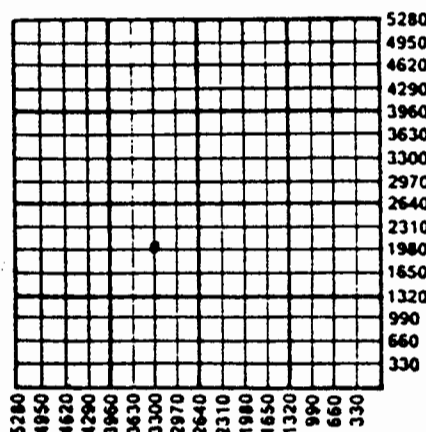
Lease Name J.A. Englert Well # 1

Field Name N/A

Producing Formation N/A

Elevation: Ground 3286 KB 3296

Total Depth 1249 PBDT 1249



Amount of Surface Pipe Set and Cemented at 627 Feet

Multiple Stage Cementing Collar Used? ☐ Yes ☒ No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

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 the 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. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells. Any recompletion, workover or conversion of a well requires filing of ACO-2 within 120 days from commencement date of such work.

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 [Signature]

Title Agent Date 6-4-90

Subscribed and sworn to before me this 4th day of June

Notary Public [Signature]

Sharon E. Freeman

Date Commission Expires 01-04-91

K.C.C. OFFICE USE ONLY

F ☐ Letter of Confidentiality Attached
C ☐ Wireline Log Received
C ☐ Drillers Timelog Received

Distribution

☒ KCC ☐ SWD/Rep ☐ NGPA
☒ KGS ☐ Plug ☒ Other
(Specify)

3646

COPY

SIDE ONE

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
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ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

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Purchaser: _____

Operator Contact Person: Bruce ShannonPhone (316) 626-6017Contractor: Name: Hembree Well Service

License: _____

Wellsite Geologist: None

Designate Type of Completion

☐ New Well ☒ Re-Entry ☐ Workover **NOV**☐ Oil ☒ SWD ☐ Temp. Abd.☐ Gas ☐ Inj ☐ Delayed Comp.☒ Dry ☐ Other (Core, Water Supply, etc.)

If OWM: old well info as follows:

Operator: Amoco Production Co.Well Name: J.A. Englert G.U. #1Comp. Date 5-8-79 Old Total Depth 3005

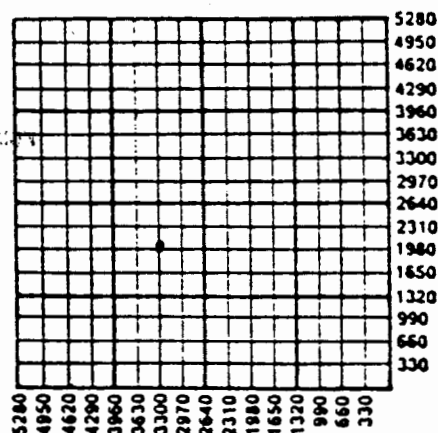
Drilling Method:

☒ Mud Rotary ☐ Air Rotary ☐ Cable5-23-905-25-90N/A

Spud Date Date Reached TD Completion Date

API NO. 15- 075-202810001County HamiltonNE SW Sec. 22 Twp. 25S Rge. 39 X East West1980 Ft. North from Southeast Corner of Section3300 Ft. West from Southeast Corner of Section

(NOTE: Locate well in section plat below.)

Lease Name J.A. Englert Well # 1Field Name N/AProducing Formation N/AElevation: Ground 3286 KB 3296Total Depth 1249 PBD 1249Amount of Surface Pipe Set and Cemented at 627 FeetMultiple Stage Cementing Collar Used? ☐ Yes ☒ No

If yes, show depth set _____ Feet

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feet depth to _____ w/ _____ sx cmt.

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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 [Signature]Title Agent Date 6-4-90Subscribed and sworn to before me this 4th day of JuneNotary Public [Signature]Date Commission Expires 01-04-91

K.C.C. OFFICE USE ONLY

F ☐ Letter of Confidentiality Attached
C ☐ Wireline Log Received
C ☐ Drillers Timelog Received

Distribution

☒ KCC ☐ SWD/Rep ☐ NGPA
☒ KGS ☐ Plug ☐ Other (Specify) IS

SIDE TWO

Operator Name Shanm energy Corp.Lease Name J.A. EnglertWell # 1Sec. 22 Twp. 25S Rge. 39☐ EastCounty Hamilton☒ West

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 ☒ No
(Attach Additional Sheets.)Samples Sent to Geological Survey ☐ Yes ☒ NoCores Taken ☐ Yes ☒ NoElectric Log Run ☐ Yes ☒ No
(Submit Copy.)

Formation Description

☐ Log ☐ Sample

Name Top Bottom

None logged : OWWO/wasdown for SWD

RECEIVED
STATE CORPORATION COMMISSION

NOV 8 1991

CORPORATION DIVISION
WINDING LULUS

CASING RECORD

☐ New ☐ Used

NONE SET

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

| Purpose of String | Size Hole Drilled | Size Casing Set (In O.D.) | Weight Lbs./Ft. | Setting Depth | Type of Cement | # Sacks Used | Type and Percent Additives |
|-------------------|-------------------|---------------------------|-----------------|---------------|----------------|--------------|----------------------------|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

| PERFORATION RECORD | | Acid, Fracture, Shot, Cement Squeeze Record | |
|--------------------|---|---|-------|
| Shots Per Foot | Specify Footage of Each Interval Perforated | (Amount and Kind of Material Used) | Depth |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

| TUBING RECORD | Size | Set At | Packer At | Liner Run | <input type="checkbox"/> Yes <input type="checkbox"/> No |
|---------------|------|--------|-----------|-----------|--|
| | | | | | |

| Date of First Production | Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) | | | | Estimated Production Per 24 Hours | | |
|--------------------------|---|-------|-----|-----|-----------------------------------|-------|-----------------------|
| | Oil | Bbls. | Gas | Mcf | Water | Bbls. | Gas-Oil Ratio Gravity |
| | | | | | | | |

Disposition of Gas:

☐ Vented ☐ Sold ☐ Used on Lease
(If vented, submit ACO-18.)

METHOD OF COMPLETION

☐ Open Hole ☐ Perforation ☐ Dually Completed ☐ Commingled
☐ Other (Specify) _____

Production Interval

copy

** Attempted to re-enter hole. Drilled out cement plugs to 1094, entered 5 1/2" casing, washed to 1249 and tagged junk in hole. Attempted to go in hole with flat bottom mill and drilled off outside 5 1/2" to 1115. Determined uneconomic to continue.

RECEIVED
STATE CORPORATION COMMISSION

NOV 8 1991