

APPLICATION FOR PERMIT TO DRILL, DEEPEN OR PLUG BACK

APPLICATION TO DRILL DEEPEN PLUG BACK

NAME OF COMPANY OR OPERATOR MAINLINE USA INC DATE DEC 19/80
227 1/2 SOUTH MAIN ST OTTAWA KANSAS
 Address City State

DESCRIPTION OF WELL AND LEASE			
Name of lease <u>J.W. SMITH</u>	Well number <u>2</u>	Elevation (ground) <u>860' (TM)</u>	
WELL LOCATION (give footage from section lines) <u>1981</u> ft. from (N) (S) sec. line <u>1499</u> ft. from (E) (W) sec. line			
WELL LOCATION Section <u>34</u> Township <u>44</u> Range <u>33</u>		County <u>CASS</u>	
Nearest distance from proposed location to property or lease line: <u>165</u> feet		Distance from proposed location to nearest drilling, completed or applied - for well on the same lease: <u>489</u> feet	
Proposed depth: <u>200'</u>	Rotary or Cable tools <u>ROTARY</u>	Approx. date work will start <u>DEC 21 1980</u>	
Number of acres in lease: <u>25</u>	Number of wells on lease, including this well, completed in or drilling to this reservoir: <u>4</u> Number of abandoned wells on lease: <u>NONE</u>		
If lease, purchased with one or more wells drilled, from whom purchased: Name _____ Address _____		No. of Wells: producing _____ inactive _____ abandoned _____	
Status of Bond Single Well <input type="checkbox"/> Amt. _____ Blanket Bond <input checked="" type="checkbox"/> Amt. <u>20,000</u> <input checked="" type="checkbox"/> ON FILE <input type="checkbox"/> ATTACHED			
Remarks: (If this is an application to deepen or plug back, briefly describe work to be done, giving present producing zone and expected new producing zone) use back of form if needed.			
Proposed casing program:		Approved casing - To be filled in by State Geologist	
amt. <u>25'</u>	size <u>7"</u>	wt./ft. <u>27</u>	cem. <u>YES</u>
<u>200'</u>	<u>2"</u>	<u>3.75</u>	<u>TD to 0'</u>
I, the undersigned, state that I am the <u>PRODUCTION MANAGER</u> of the <u>MAINLINE USA INC</u> (company), and that I am authorized by said company to make this report; and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct and complete to the best of my knowledge.			
Signature: <u>Phillip J. Kuback</u>			

Permit Number 20132
 Approval Date: 1-2-81
 Approved By: Wallace B. Howe JAN 2 1981
IRS

SAMPLES REQUIRED
 SAMPLES NOT REQUIRED
 WATER SAMPLES REQUIRED @:

Remit two copies to: Missouri Oil and Gas Council
 P.O. Box 250 Rolla, Mo. 65401
 One will be returned for driller's signature

MO. OIL & GAS COUNCIL

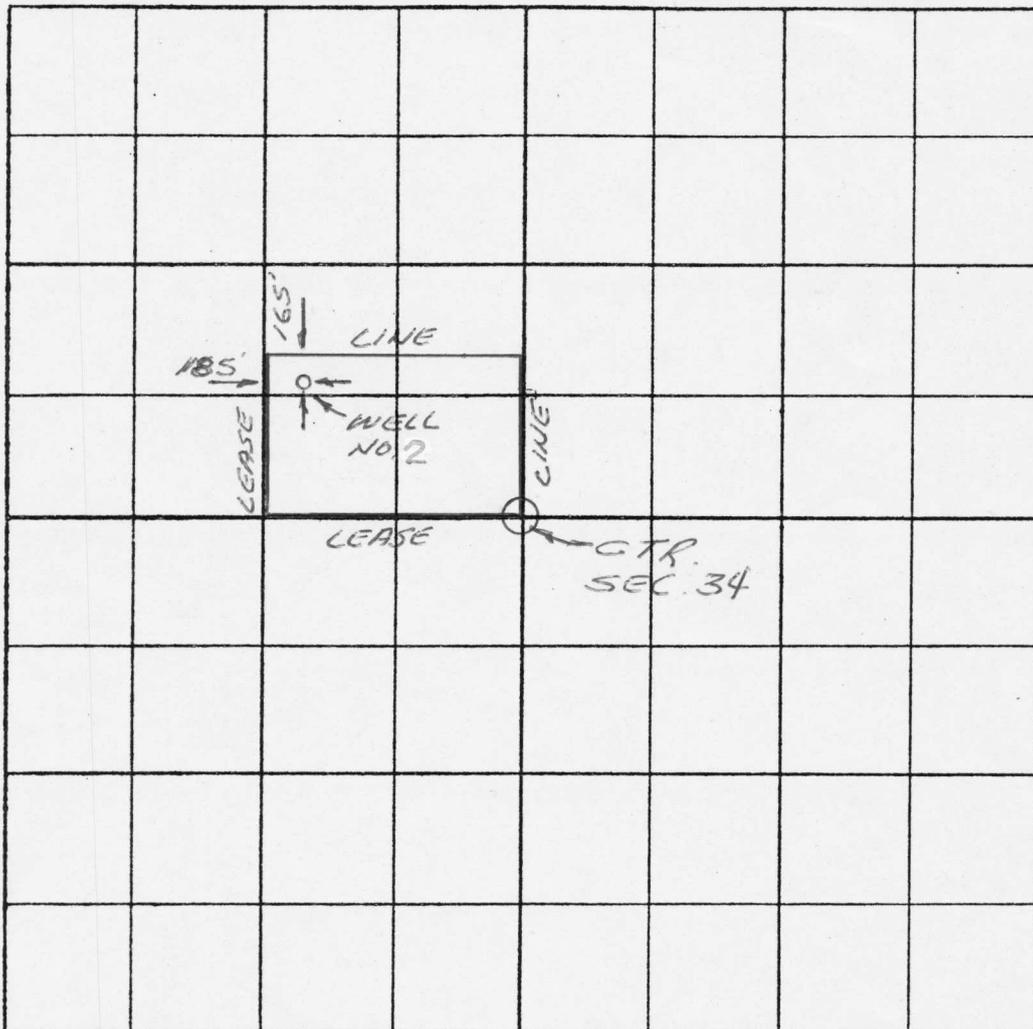
Approval of this permit by the Oil and Gas Council does not constitute endorsement of the geologic merits of the proposed well nor endorsement of the qualifications of the permittee.

WELL LOCATION PLAT

Owner: J. W. Smith, Jr. & Kathryn F. Smith

Lease Name: J. W. Smith, Jr. & Kathryn F. Smith County, Cass

1981' feet from (N) (S) line and 1499' feet from (E) (W) line of Sec. 34 Twp. 44 Range 33



SCALE
1" = 1000'

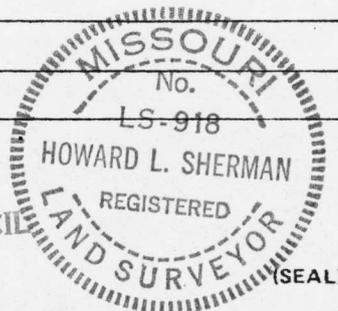
REMARKS: Lessee: Mainline U.S.A. Inc.
227½ South Main Street
Ottawa, Kansas 66067
Well No. 2

INSTRUCTIONS

On the above plat, show distance of the proposed well from the two nearest lease and section lines, and from the nearest well on the same lease completed in or drilling to the same reservoir. If the location requested is not in conformance with the applicable well-spacing rules, show all off-setting wells to the proposed well. Do not confuse survey lines with lease lines. See rule 7 - 3 (b) for survey requirements.

Remit two copies to: Missouri Oil and Gas Council
 P.O. Box 250 Rolla, Mo. 65401
 One will be returned.

JAN 2 1981



Howard L. Sherman
 Registered Land Surveyor

MISSOURI OIL AND GAS COUNCIL

Form OGC-5

WELL COMPLETION OR RECOMPLETION REPORT AND WELL LOG

New Well Work-Over Deepen Plug Back Same Reservoir Different Reservoir Oil Gas Dry

Owner <i>Mainline USA Inc.</i>		Address <i>227 1/2 S. Main Ottawa, Ks.</i>			
Lease Name <i>Smith</i>		Well Number <i>2</i>			
Location <i>1981' FNL 1499 FNL Sec 34 Twp 44 R 33</i>					Sec. — TWP-Range or Block & Survey
County <i>CASS</i>	Permit number (OGC3 number) <i>20132</i>				
Date spudded	Date total depth reached	Date completed, ready to produce	Elevation (DF, RKB, RT or (Gr) feet) <i>860</i>	Elevation of casing hd. flange <i>860</i> feet	
Total depth <i>148'</i>	P. B. T. D. <i>148'</i>				
Producing interval (s) for this completion			Rotary tools used (interval) From <i>0</i> to <i>70</i>	Cable tools used (interval) From <i>n/a</i> to	
Was this well directionally drilled? <i>NO</i>		Was directional survey made? <i>NO</i>		Date filed <i>n/a</i>	
Type of electrical or other logs run (list logs filed with the State Geologist)					Date filed

CASING RECORD

Casing (report all strings set in well—conductor, surface, intermediate, producing, etc.)

Purpose	Size hole drilled	Size casing set	Weight (lb ft.)	Depth set	Sacks cement	Amt pulled
<i>Surf. Csg.</i>	<i>8 7/8"</i>	<i>7"</i>	<i>23.0</i>	<i>0-25'</i>	<i>4</i>	

TUBING RECORD

LINER RECORD

Size in.	Depth set ft.	Packer set at ft.	Size in.	Top ft.	Bottom ft.	Sacks cement	Screen (ft.)
<i>2-7/8</i>	<i>148</i>						

PERFORATION RECORD

ACID, SHOT, FRACTURE, CEMENT SQUEEZE RECORD

Number per ft.	Size & type	Depth Interval	Am't. & kind of material used	Depth Interval
<i>1.4 SPF</i>	<i>1 1/16 Glass &</i>	<i>107' - 114'</i>		
<i>(Total 10)</i>	<i>Al. Jets</i>			

INITIAL PRODUCTION

Date of first production		Producing method (indicate if flowing, gas lift or pumping—if pumping, show size & type of pump): <i>1 1/4" insert Pump</i>					
Date of test	Hrs. tested	Choke size	Oil prod. during test bbls.	Gas prod. during test MCF	Water prod. during test bbls.	Oil gravity API (Corr.)	
Tubing pressure	Casing pressure	Cal'ed rate of Production per 24 hrs.	Oil bbls.	Gas MCF	Water bbls.	Gas-oil ratio	

Disposition of gas (state whether vented, used for fuel or sold):

Method of disposal of mud pit contents:

Evaporation & pit covered

CERTIFICATE: I, the undersigned, state that I am the *Engineering Assistant* of the *Mainline USA Inc.* (company), and that I am authorized by said company to make this report; and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct and complete to the best of my knowledge.

David J. Myle
Signature

JUL 31 1981

Remit two copies: one will be returned.

MO. OIL & GAS COUNCIL

PLUGGING RECORD

Owner KANSAS PETROLEUM PROPERTIES INC		Address Box 145 Chanote, KS 66720			
Name of Lease J.W. SMITH		Well No. 2	Permit Number (OGC-3 or OGC-3I number) 20132		
Location of Well 1981'ENL 1499'FWL		Sec-Twp-Rng or Block & Survey 534-44-33		County CASS	
Application to drill this well was filed in name of MAINLINE USA INC		Has this well ever produced oil or gas? NO	Character of well at completion (initial production) Oil (bbls/day) 0 Gas (MCF/day) 0		Dry? YES
Date Abandoned 7-13-83 10:45 AM	Total depth 137	Amount well producing prior to abandonment Oil (bbls/day) 0 Gas (MCF/day) 0		Water (bbls/day) 0	
Name of each formation containing oil or gas. Indicate which formation open to well bore at time of abandonment.		Fluid content of each formation	Depth interval of each formation	Size, kind, & depth of plugs used. Indicate zones squeeze cemented, giving amount cement.	
NOT KNOWN		NOT KNOWN	NOT KNOWN		
WELL HAD BEEN FRACED. HOOKED UP TO 2" AND BROKE PRODUCTION ESTABLISHED FEED RATE W/ WATER. CEMENTED DOWN 2" w/ 14 SX.					
Size pipe	Put in well (ft)	Pulled out (ft)	Left in well (ft)	Give depth and method of parting casing (shot, ripped, etc.)	Packers and shoes
2"	137	3	134	CUTOFF	
Was well filled with mud-laden fluid?		Indicate deepest formation containing fresh water.			
NAMES AND ADDRESSES OF ADJACENT LEASE OPERATORS OR OWNERS OF THE SURFACE					
Name		Address		Direction from this well:	
ALBERT LONG (SURFACE)		RR#1 CLEVELAND MO		NORTH	
ERNEST PARK (")		"		SOUTH	
TOMMIE BAILEY (")		"		WEST	
EDWARD LEWIS (")		"		EAST	
Method of disposal of mud pit contents:					
Use reverse side for additional detail.					
File this form in duplicate with					
<p>CERTIFICATE: I, the undersigned, state that I am the <u>CONSULTING ENGINEER</u> of the <u>KANSAS PETROLEUM PROPERTIES INC</u> (Company), and that I am authorized by said company to make this report; and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct, and complete to the best of my knowledge.</p> <p style="text-align: right;">Signature <u>K. Byram</u></p>					

RECEIVED

OCT 11 1983

Plugging Release

For valuable consideration the receipt and sufficiency of which is hereby acknowledged, I, J.W. SMITH., owner of the real property subject to the oil and gas lease described as follows:

COMMENCING @ ~~SE~~ SE C OF THE E $\frac{1}{2}$ NW $\frac{1}{4}$ S39-44-33
THEN N 89° 46' 30 SEC WEST 1307.1' N 819.2'
S 89° 46' 30 SEC EAST 1307.1' THEN S 819.2'
TO BEGIN EXCEPT CEMETARY

have inspected my property and to the best of my knowledge all holes drilled for the purpose of oil and/or gas have been properly plugged.

Dated July 13, 1983

Signed J.W. Smith

RECEIVED

OCT 11 1983

MO. OIL & GAS COUNCIL

Date 7-13-83	Customer's Acct. No. 2563	Sec. 34	Twp. 44	Range 33	Well No. & Farm #1,2,3,4 Smith	Place or Destination Freemont
Charge To Elkhound Resources				Owner		County Coiss
Mailing Address Rt 1 - Box 219B				Contractor		State Mo
City & State Wellsville, Ks. 66092				Well Owner Operator Contractor		

CEMENTING SERVICE DATA

TYPE OF JOB	CASING	HOLE DATA	PLUGS AND HEAD	PRESSURE	CEMENT LEFT IN CASING
Surface	New	Bore Size	Bottom	Circulating	Requested
Production	Used	Total Depth	Top	Minimum	Necessity
Squeeze	Size 2"	136	Head	Maximum	Measured
Pumping	Weight	Cable Tool	FLOAT EQUIPMENT	Sacks Cement	
Other Plug	Depth	Rotary		70	
	Type			Type & Brand	
				50/50 Az Mix	
				Admixes	

FRACTURING - ACIDIZING SERVICE DATA

Type of Job	At intervals of				
Bbls Fracturing Fluid	Breakdown Pressure from	psi to	psi		
Treating Pressures: Maximum	psi	Minimum	psi	Avg. Pump Rate	GPM/BPM Close In psi
Sand	Gals. Treating Acid	Type		Open Hole Diameter	
Well Treating Through: Tubing	Casing	Annulus	Size	Weight	
Remarks:					
No. Perforations	Pay Formation Name	Depth of Job	Ft.		

CEMENTING				INVOICE SECTION				FRACTURING - ACIDIZING			
Pumping Charge		Office Use	\$	Pumping Charge		Office Use	\$	Pumping Charge		Office Use	\$
70 Sacks Bulk Cement	@ 5.00	1101	350.00	12x30 Sand	@			10x20 Sand	@		
Ton Mileage on Bulk Cement 60	@	6401	147.10	x Sand	@			Ton Mileage	@		
Premium Gel	@			Gals., Acid	@			Chemicals	@		
Flo-Seal	@				@				@		
Calcium Chloride	@				@				@		
Plug	@				@				@		
Equipment	@				@				@		
1 2 106 to top 155x	@				@				@		
2 2 136 " " 145x	@				@				@		
3 5 109 " " 265x	@				@				@		
4 2 111 " " 155x	@			Potassium Chloride	@				@		
	@			Rock Salt	@				@		
Granulated Salt	@			Water Gel	@				@		
Transport Truck (Hrs.)	@			Transport Truck (Hrs.)	@				@		
Vac Truck (2 1/2 Hrs.)	@ 44.00	6201	110.00	Vac Truck (Hrs.)	@				@		
Fuel Surcharge	@			Fuel Surcharge	@				@		
		Tax	11.00							Tax	

RECEIVED
OCT 1 1983
MO. OIL & GAS COUNCIL

A Finance Charge computed at 1 1/4% per month (annual percentage rate of 21%) will be added to balance over 30 days.

Total \$ **1223.10** *8 stage total* Total \$

Consolidated Oil Well Services, Inc.

211 West 14th Street
 P.O. Box 884 Chanute, Kansas 66720
 Phone: (316) 431-7690 (Office)
 (316) 431-9210 (Shop)

RECEIVED
 OCT 11 1983
 MO. OIL & GAS COUNCIL

INVOICE DATE	INVOICE NO.
7/19/83	7109



TERMS: Net 30 Days
 A Finance Charge computed at 1 3/4 % per month (annual percentage rate of 21 %) will be added to balances over 30 days.

PLEASE REFER TO THIS ACCOUNT NUMBER WHEN MAKING INQUIRIES

ACCOUNT NO.	LOCATION	LEASE AND WELL NO.	DESCRIPTION	UNITS	UNIT PRICE	UNIT MEAS	EXTENDED PRICE
2563	3	# 1,2,3,4 SMITH		7/13/83	424.58	0000000000	
ITEM NUMBER							
401			PUMPING CHARGE--CEMENTING	4	150.00	EA	600.
101			BULK CEMENT	70	5.00	SK	350.
401			TON MILEAGE	1	149.10	CHG	149.
201			TRUCKING--VACUUM	2.50	44.00	HR	110.

Approved 7-31
POSTERD
 C/O

SS INVOICE TAX 1,209.10 14.00
 PLEASE PAY 1,223.
 Thank You!

Permit #: 20132

Date Issued: 1-2-81

County: Cass

Date Cancelled:

CONFIDENTIAL UNTIL:

Date Plugged: 7-13-83

COMMENTS:

OCC FORMS	Date Received
1	
2	
3	1-2-81
3i	
4	1-2-81
4i	
5	7-31-81
6	
7	10-11-83
8	
11	
12	
Misc. Form 2	

	TYPE	ID #	Date Received
Logs			
Samples	chip core		
	core		
Analyses	water		
	core		

Additional Submitted Data: