

APPLICATION FOR PERMIT TO DRILL, DEEPEN OR PLUG BACK

APPLICATION TO DRILL DEEPEN PLUG BACK

NAME OF COMPANY OR OPERATOR Prairie Energy Corporation DATE December 11, 1981
8600 West 110th Street STE 202 Overland Park Kansas 66210
 Address City State

DESCRIPTION OF WELL AND LEASE			
Name of lease <u>MacLaughlin</u>		Well number <u>5-J</u>	Elevation (ground) <u>1023</u>
WELL LOCATION (give footage from section lines) <u>2473</u> ft. from (N) <input checked="" type="radio"/> sec. line <u>2518</u> ft. from (E) <input checked="" type="radio"/> sec. line			
WELL LOCATION Section <u>4</u> Township <u>46</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>1500</u> feet	
Proposed depth <u>700'</u>	Rotary or Cable tools <u>Rotary</u>	Approx. date work will start <u>January 1, 1982</u>	
Number of acres in lease:		Number of wells on lease, including this well, completed in or drilling to this reservoir: <u>2</u> Number of abandoned wells on lease: <u>0</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.	size	wt./ft.	cem.
<u>25'</u>	<u>7"</u>	<u>26.6</u>	<u>6 sacks</u>
<u>650'</u>	<u>4 1/2"</u>	<u>10.5</u>	<u>90 sacks</u>
I, the undersigned, state that I am the <u>President</u> of the <u>Prairie Energy Corporation</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>Nicholas F. Powell</u>			

Permit Number: 20237
 Approval Date: 12/15/81
 Approved By: Wallace B. Hunt
 125

SAMPLES REQUIRED
 SAMPLES NOT REQUIRED
RECEIVED
 DEC 14 1981

Note: This Permit not transferable to any other person or to any other location.

WATER SAMPLES REQUIRED @:
 MO. OIL & GAS COUNCIL

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

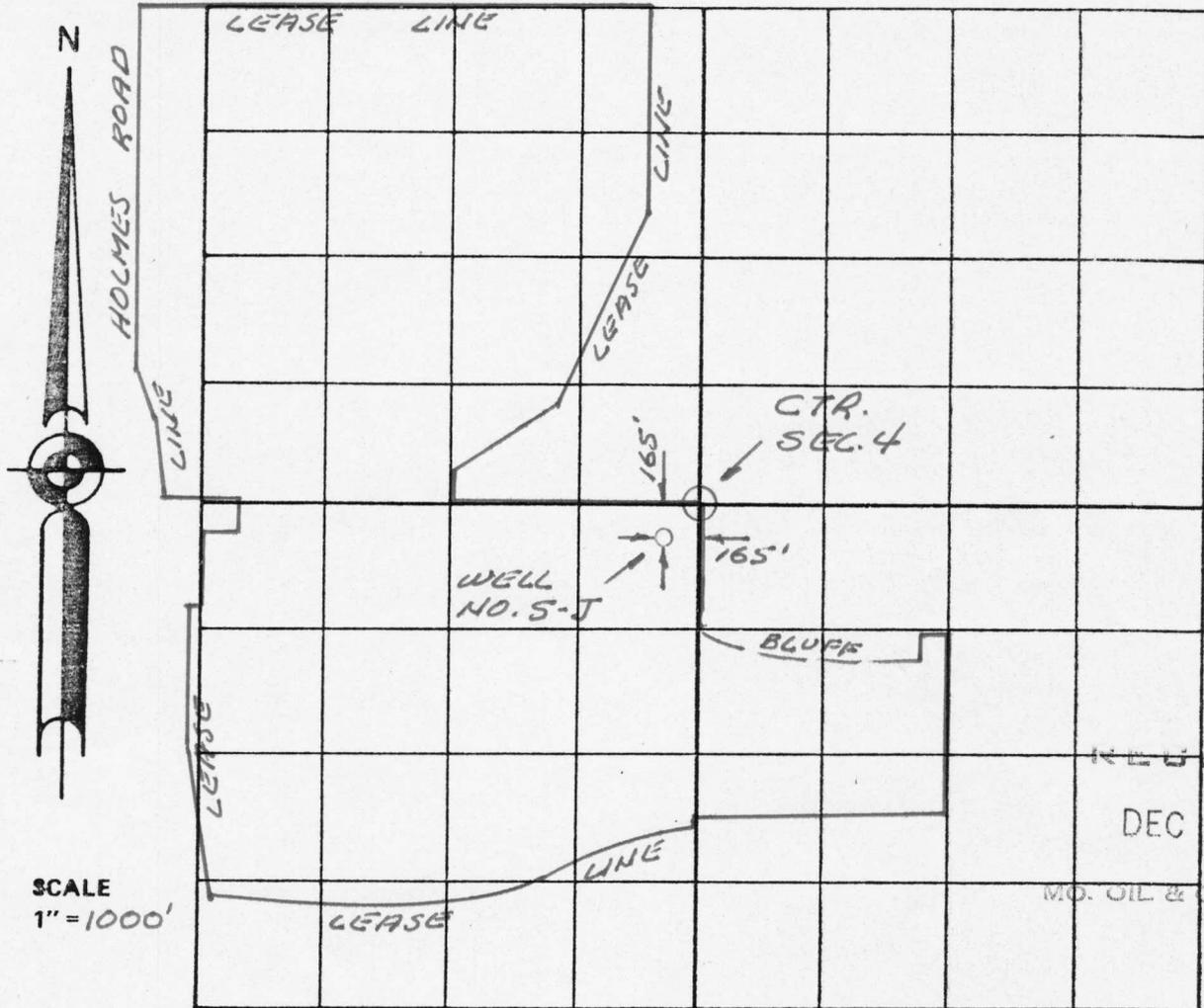
One will be returned.
 Approval of this permit by the Oil and Gas Council does not constitute endorsement of the geologic merits of the proposed well nor endorsement of the qualifications of the permittee.

MISSOURI OIL AND GAS COUNCIL
WELL LOCATION PLAT

Form OGC-4

Owner: Prairie Energy Corp.

Lease Name: MacLaughlin County: Cass
2473 feet from South line and 2518 feet from West line
 (N) - (S) (E) - (W) of Sec. 4, Twp. 46 N, Range 33



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MO. OIL & GAS COUNCIL

REMARKS: _____

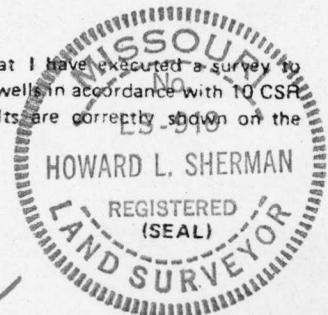
Well No. 5-J

Elevation 1023

INSTRUCTIONS

On the above plat, show distance of the proposed well from the two nearest section lines, the nearest lease line, and from the nearest well on the same lease completed in or drilling to the same reservoir. Do not confuse survey lines with lease lines. See rule 10 CSR 50-2.030 for survey requirements.

This is to Certify that I have executed a survey to accurately locate oil and gas wells in accordance with 10 CSR 50-2.030 and that the results are correctly shown on the above plat.



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

Howard L. Sherman
 Registered Land Surveyor Number 918

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 **Prairie Energy Corporation** Address **8600 West 110th Street Suite 202 Overland Park, Kansas 66210**

Lease Name **MacLaughlin** Well Number **5-J**

Location **2473 ft. FSL, 2518 FWL** Sec. — TWP-Range or Block & Survey **4 T-46 R-33**

County **Cass** Permit number (OGC3 number) **20237**

Date spudded **1-5-82** Date total depth reached **1-8-82** Date completed, ready to produce **2/15/82** Elevation (DF, RKB, RT or Gr.) feet **546** Elevation of casing hd. flange feet

Total depth **546** P. B. T. D.

Producing interval (s) for this completion Rotary tools used (interval) From **0** to **546** Cable tools used (interval) From to Drilling Fluid used **water**

Was this well directionally drilled? **NO** Was directional survey made? **NO** Was copy of directional survey filed? **N/A** Date filed **N/A**

Type of electrical or other logs run (list logs filed with the State Geologist) **Gamma Ray Neutron** Date filed **with report**

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
surface	12"	7"	26.6	25'	6	
casing	6 1/4"	4"	10.5	534'	70	

TUBING RECORD

LINER RECORD

Size in.	Depth set ft.	Packer set at ft.	Size in.	Top ft.	Bottom ft.	Sacks cement	Screen (ft.)

PERFORATION RECORD

ACID, SHOT, FRACTURE, CEMENT SQUEEZE RECORD

Number per ft.	Size & type	Depth Interval	Am't. & kind of material used		Depth Interval
2	3 1/8 Dens Jet	506-520	25s 20-40	15s 8-12	506-520

INITIAL PRODUCTION

Date of first production **2/15/82** Producing method (indicate if flowing, gas lift or pumping—if pumping, show size & type of pump:) **Pumping 1" insert pump**

Date of test	Hrs. tested	Choke size	Oil prod. during test	Gas prod. during test	Water prod. during test	Oil gravity
2/15/82	24	1"	10 bbls.	0 MCF	30 bbls.	24 API (Corr)
Tubing pressure	Casing pressure	Cal'ed rate of Production per 24 hr.	Oil	Gas	Water	Gas-oil ratio
			10 bbls.	0 MCF	30 bbls.	-

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

Method of disposal of mud pit contents: **buried**

CERTIFICATE: I, the undersigned, state that I am the **President** of the **Prairie Energy Corporation** (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.

Nicholas K Powell
Signature **Nicholas K. Powell**

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Remit two copies: one will be returned

APR 12 1982

MO. OIL & GAS COUNCIL

DETAIL OF FORMATIONS PENETRATED

Formation	Top	Bottom	Description*
		5.0'	Brown silty clay
		12.0'	Olive brown clayey shale
		17.5'	Gray shale
		23.5'	Brown gray limestone
		51.0'	Gray shale
		54.0'	Maroon shale
		59.0'	Light brown limestone
		102.0'	Gray shale
		104.0'	Gray limestone
		111.5'	Gray shale
		113.0'	Gray limestone
		116.0'	Gray shale
		121.0'	Gray limestone w/shale seams
		126.0'	Gray shale
		143.0'	Gray limestone
		147.0'	Gray shale
		165.0'	Gray limestone
		169.0'	Black shale
		172.0'	Gray limestone
		174.0'	Gray shale
		182.0'	Gray limestone
		294.0'	Gray shale
		303.0'	Gray shale, w/gray sandstone seams (0.3'-0.5' seams)
		315.0'	Gray shale
		322.0'	Gray limestone
		326.0'	Gray sandstone
		352.0'	Gray shale w/sandstone seams
		360.0'	Gray sandy shale
		366.0'	Gray limestone
		381.0'	Gray shale
		399.0'	Gray limestone
		411.0'	Dark gray limy shale
		416.0'	Brown limestone
		421.0'	Black shale
		444.0'	Gray shale w/trace sand
		488.0'	Gray limy shale
		504.4'	Gray sandy shale
		504.9'	Gray shaley sandstone
		514.1'	Gray sandstone w/oil
		514.4'	Gray sandstone w/trace oil
		514.9'	Limy sandstone
		524.4'	Gray sandstone w/oil
		534.4'	Same
		535.4'	Gray sandstone w/trace oil
		541.2'	Gray sandstone
		544.4'	Gray shaley limy sandstone
		545.9'	Same
		545.9'	Total depth

*Show all important zones of porosity, detail of all cores, and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries.

INSTRUCTIONS:

Attach drillers log or other acceptable log of well if available.

This Well Completion or Recompletion report and well log shall be filed with the Missouri State Geologist not later than 30 days after project completion.

