



WELL COMPLETION OR RECOMPLETION REPORT AND WELL LOG

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

Owner *EW STALLINGS / WET* Address *9300 Shelbyville Rd Suite 1300 Louisville KY*

Lease Name *BELTON UNIT* Well Number *AD 15 9 46 N 33 W*

Location: *1100 FSC 1540 FEL* Sec. -- TWP-Range or Block & Survey

County *CASS* Permit number (OGC3 number) *20505*

Date spudded *8/87* Date total depth reached *8/87* Date completed, ready to produce *9/87* Elevation (DF, RKB, RT or Gr.) feet

Total depth *680* P. B. T. D.

Producing interval (s) for this completion Rotary tools used (interval) From *0* to *680* Drilling Fluid used *AIR* Cable tools used (interval) From *-* to *-*

Was this well directionally drilled? *NO* Was directional survey made? *NO* Was copy of directional survey filed? *-* Date filed *-*

Type of electrical or other logs run (list logs filed with the State Geologist) *GMH / CCL* Date filed *11/87*

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>Surface</i>	<i>9 1/4</i>	<i>6 5/8</i>	<i>-</i>	<i>20</i>	<i>3</i>	<i>-</i>
<i>CASING</i>	<i>6 1/4</i>	<i>4 1/2</i>	<i>10 1/2</i>	<i>467</i>	<i>Approx 70</i>	<i>-</i>

TUBING RECORD

LINER RECORD

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

ACID, SHOT, FRACTURE, CEMENT SQUEEZE RECORD

Number per ft.	Size & type	Depth Interval	Am't. & kind of material used	Depth Interval
<i>OPEN</i>	<i>Hole</i>			

INITIAL PRODUCTION

Date of first production *PLUGGED* Producing method (indicate if flowing, gas lift or pumping—if pumping, show size & type of pump:) *LEAK IN CASING*

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)

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

Method of disposal of mud pit contents: *dried up*

CERTIFICATE: I, the undersigned, state that I am the *Geologist* of the *WESTERN Eng* (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.

**RECEIVED**  
APR 01 1988

*Jerry A Taylor*  
Signature

DETAIL OF FORMATIONS PENETRATED

Formation	Top	Bottom	Description*
KC line		221	LS e SH
Pleasanton	222	354	SH occ w/ sand
Apanoose	355	400	SH SNA
FT Scott	401	450	LS SH occ sand
Squirrel	451	630	SNA, SH, LS
Wheeler	631	634	SH BIK
ARD MORE	635	648	LS HD
CATTLEMAN	649	680 TD	SH

\*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.

PLUGGING RECORD

Owner <i>FW STALLINGS / Western Eng</i>		Address <i>Route 1 Highway 58 Belton MO 64012</i>			
Name of Lease <i>Belton Unit</i>		Well No. <i>AD-15</i>	Permit Number (OGC-3 or OGC-3I number) <i>20505</i>		
Location of Well <i>1100 FT FSL 1540 FEL</i>		Sec-Twp-Rng or Block & Survey <i>9 46N 33W</i>		County <i>CASS</i>	
Application to drill this well was filed in name of <i>FW STALLINGS</i>		Has this well ever produced oil or gas? <i>NO</i>	Character of well at completion (initial production) Oil (bbls/day) <i>0</i> Gas (MCF/day) <i>0</i>		Dry? <i>0</i>
Date Abandoned <i>7/23/87</i>	Total depth <i>680'</i>	Amount well producing prior to abandonment Oil (bbls/day) <i>0</i> Gas (MCF/day) <i>0</i>		Water (bbls/day) <i>0</i>	
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	
<i>Squirrel</i>		<i>GA/OIL/WATER</i>		<i>455-630'</i>	
				<i>Plug Bottom To Top with 99 sacks Portland A OWC</i>	
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
<i>7"</i>	<i>20'</i>		<i>20'</i>		<i>Surface casing</i>
<i>4 1/2"</i>	<i>467'</i>		<i>467'</i>	<i>OPEN Hk complete</i>	<i>Type A Drill-Set Cement PACKER Set at 467'</i>
Was well filled with mud-laden fluid? <i>IT WAS WASHED WITH Gel water</i>			Indicate deepest formation containing fresh water. ?		
NAMES AND ADDRESSES OF ADJACENT LEASE OPERATORS OR OWNERS OF THE SURFACE					
Name		Address		Direction from this well:	
<i>Effects Bros Inc</i>		<i>RR 1 Box 10</i>		<i>South</i>	
<i>Effects Bros Inc</i>		<i>165 TH &amp; Holmes</i>		<i>North</i>	
<i>Effects Bros Inc</i>		<i>Belton MO 64012</i>		<i>EAST</i>	
Method of disposal of mud pit contents: <i>The oil and water were Pumped out and separated by W-1</i>					
Use reverse side for additional detail.					
File this form in duplicate with					
MO Oil & Gas Council					
Economic Geology					
CERTIFICATE: I, the undersigned, state that I am the <u><i>Geologist</i></u> of the <u><i>Western Engineering Inc</i></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><i>Jeff Taylor</i></u>					

**RECEIVED**  
DEC 11 1989

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

One will be returned.

**DETAIL OF FORMATIONS PENETRATED**

Formation	Top	Bottom	Description (See * below)
Kansas City		223	
Pleasanton	224	350	
Appanoose	351	400	
FT Scott	401	451	
Excellio e. Kelly St	451	454	
Squirrel	454	630	
Cattlemen	631	680 TD	

\*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 driller's 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.

JOHN ASHCROFT  
Governor



Division of Energy  
Division of Environmental Quality  
Division of Geology and Land Survey  
Division of Management Services  
Division of Parks, Recreation,  
and Historic Preservation

G. TRACY MEHAN III  
Director

STATE OF MISSOURI  
DEPARTMENT OF NATURAL RESOURCES

DIVISION OF GEOLOGY AND LAND SURVEY  
P.O. Box 250, 111 Fairgrounds Road  
Rolla, MO 65401  
314-364-1752

August 8, 1989

Mr. Jeff Taylor  
Western Engineering Inc.  
Route 1  
Belton, MO 64012

Dear Mr. Taylor:

Enclosed is a copy of a completion report for the AD-15 well which is located in Sec. 9, T.46N., R.33W, Cass County, Missouri.

On this completion report, you have noted that this well is plugged because there is a leak in the casing. If this well has indeed been plugged, would you please fill out a plugging report detailing how you plugged this well, etc., and return the form so we can update our files?

If you have any questions, please give me a call.

Sincerely,

ECONOMIC GEOLOGY

Bruce W. Netzler  
Geologist, Oil and Gas

BWN:rcb

Enclosure:

Permit #: 20505

Date Issued: 7-31-87

County: Cass

Date Cancelled: \_\_\_\_\_

CONFIDENTIAL UNTIL: \_\_\_\_\_

Date Plugged: 9-23-87

OGC FORMS	Date Received
1	
2	
3	<u>7-31-87</u>
3i	
4	<u>7-31-87</u>
4i	
5	<u>4-1-88</u>
6	
7	<u>9-23-87</u>
8	
11	
12	
Misc. Form 2	

COMMENTS:

	TYPE	ID #	Date Received
Logs			
Samples	chip		
	core		
Analyses	water		
	core		
Additional Submitted Data:			