FORM MUST BE TYPED

SIDE ONE

ORIGINAL COPY

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

Operator: License # 5952

Name: Amoco Production Company

Address PO Box 800 Room 924

City/State/Zip Denver, CO 80201

Purchaser: Williams Natural Gas

Operator Contact Person: Susan R. Potts

Phone (303) 830-5323

Contractor: Name: Eldredge Well Service

License: 9567

Wellsite Geologist: N/A

Designate Type of Completion
____ New Well X Re-Entry ____ Workover

____ Oil ____ SWD ____ SIOW ____ Temp. Abd.
X Gas ____ ENHR ____ SIGW
____ Dry ____ Other (Core, WSW, Expl., Cathodic, etc)

If Workover:

Operator: Amoco Production Company

Well Name: Kisner Gas Unit #1 181

Comp. Date 3/11/53 Old Total Depth 2760'

____ Deepening ____ Re-perf. ____ Conv. to Inj/SWD
____ Plug Back ____ PBTD
____ Commingled Docket No. ____
____ Dual Completion Docket No. ____
X Other (SWD or Inj?) Docket No. ____
(FRAC Job)

4/16/97 Start Date of Re-Entry ____ Date Reached TD 7/3/97 Completion Date of Re-Entry

API NO. 15- N/A

County Finney

SW - SW - SW - NE Sec. 35 Twp. 26S Rge. 33 E/W

2490 Feet from S/N (circle one) Line of Section

2490 Feet from E/W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)

Lease Name Kisner Gas Unit /B/ Well # 1

Field Name Hugoton

Producing Formation Chase

Elevation: Ground 2921' KB N/A

Total Depth 2760' PBTD 2760'

Amount of Surface Pipe Set and Cemented at 867 Feet

Multiple Stage Cementing Collar Used? ____ Yes X No

If yes, show depth set ____ Feet

If Alternate II completion, cement circulated from ____

feet depth to ____ w/ ____ sx cmt.

Drilling Fluid Management Plan Pit Not needed.
(Data must be collected from the Reserve Pit)

Chloride content ____ ppm Fluid volume ____ bbls

Dewatering method used ____

Location of fluid disposal if hauled offsite:

Operator Name ____

Lease Name ____ License No. ____

____ Quarter Sec. ____ Twp. ____ S Rng. ____ E/W

County ____ Docket No. ____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 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 geologist well report 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.

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 Susan R. Potts

Title Senior Staff Assistant Date 8/7/97

Subscribed and sworn to before me this 7th day of August, 1997.

Notary Public

Date Commission Expires January 4, 2001

RECEIVED
STATE CORPORATION COMMISSION
AUG 08 1997
CONSERVATION DIVISION
WICHITA, KS

K.C.C. OFFICE USE ONLY
F ____ Letter of Confidentiality Attached
C ____ Wireline Log Received
C ____ Geologist Report Received

Distribution
✓ KCC ____ SWD/Rep ____ NGPA
____ KGS ____ Plug ✓ Other (Specify)

Form ACO-1 (7-91)