

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

Operator: License # 31378
Name: Universal Resources Corp.
Address 2601 N.W. Exp. Suite 700E
Oklahoma City
City/State/Zip Oklahoma 73112
Purchaser: Texaco Trading
Operator Contact Person: James Collings
Phone (405) 840-2761
Contractor: Name: Kincaid Well Service
License: ~~7272~~ 7252
Onsite Geologist: None

Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover:
Operator: Petroleum, Inc.
Well Name: SCHMIDT A-C #1
Comp. Date 9/16/81 Old Total Depth 3613
 Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PBTB
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

8/12/94 8/23/94
Date OF START Date Reached TD Completion Date OF
OF WORKOVER WORKOVER

API NO. 15- 051-22,507-0001 **33-12-170**
County Ellis
-W/2-NE-SE Sec. 33 Twp. 12S Rge. 17 X W
1980 Feet from (S)N (circle one) Line of Section
1140 Feet from (E)W (circle one) Line of Section
1160-KCC Records
Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)
Lease Name SCHMIDT A-C Well # 1
Field Name Schmidler
Producing Formation Arbuckle
Elevation: Ground 2051 KB 2056
Total Depth 3613 PBTB _____
Amount of Surface Pipe Set and Cemented at 248' 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.
Drilling Fluid Management Plan REWORK JH 5-9-95
(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. Rules 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 James R. Collings
Title Reservoir Engineer Date 11/02/94
Subscribed and sworn to before me this 2nd day of November, 1994.
Notary Public Ave Emusa
Date Commission Expires August 7, 1997

K.C.C. OFFICE USE ONLY		
F	<input type="checkbox"/>	Letter of Confidentiality Attached
C	<input type="checkbox"/>	Wireline Log Received
C	<input type="checkbox"/>	Geologist Report Received
Distribution		
<input checked="" type="checkbox"/>	KCC	<input type="checkbox"/> SWD/Rep
<input checked="" type="checkbox"/>	KGS	<input type="checkbox"/> Plug
		<input checked="" type="checkbox"/> NGPA
		<input type="checkbox"/> Other
		(Specify)

FS

SIDE TWO

Operator Name Universal Resources Corp.

Lease Name SCHMIDT A-C Well # 1

Sec. 33 Twp. 12S Rge. 17

East
 West

County Ellis

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 No

Cores Taken Yes No

Electric Log Run Yes No
(Submit Copy.)

List All E.Logs Run:

Name	Top	Datum
Heebner	3266	-1210
Lansing	3311	-1255
B/Kansas City	3549	-1493
Arbuckle	3586	-1530

CASING RECORD

New Used

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
Surface		8 5/8	20	248		175	2% GEL 3% CC
Production		5 1/2	14	3612	50/50 POZ	150	

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
Old ₂ perfs	3594'-3598'	600 Gal. acid	
New ₂ perfs	3581'-87'	100 gal 15% w/RBP @ 3591'	

TUBING RECORD	Size 2 3/8"	Set At 3595	Packer At None	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or Inj. 8/23/94	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls. 20	Gas Mcf 0	Water Bbls. 65	Gas-Oil Ratio	Gravity 28
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Disposition of Gas: METHOD OF COMPLETION

Production Interval

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

Open Hole Perf. Dually Comp. Commingled 3581'-3598'
 Other (Specify) _____