SIDE ONE

API NO. 15- ___

County

-083-00177/

Hodgeman



STATE CORPORATION COMMISSION OF KANSAS OIL & GAS CONSERVATION DIVISION RECOMPLETION FORM ACO-2 AMENDMENT TO WELL HISTORY

ACO-2 AMENDMENT TO WELL HISTORY	SW NE SE Sec. 15 Twp. 22S Rge. 25 X Wes.
Operator: License #4519	1650 Ft. North from Southeast Corner of Section
Chevron U. S. A. Inc.	990 Ft. West from Southeast Corner of Section
P. O. Box 36366	(NOTE: Locate well in section plat below.)
City/State/Zip: Houston, Texas 77236	Lease Name Hallet-Larkin Well # 1
Durchacae	
Texaco	Producing Formation Pennsylvania-Mississippi
Operator Contact Person: Phone:(713) 561-3602	Elevation: Ground 2516 KB
Designate Type of Original Completion X New Well Re-Entry Workover	5280 4950 4620
Date of Original Completion 8/31/56	4290
Name of Original OperatorKewanee Oil	3630
Original Well NameLarkin #1	2970 2640
Date of Recompletion:	2310
8/29/90 9/01/90	1650
Commenced Completed	990
Re-entry Workover X	330
Designate Type of Recompletion/Workover: X Oil SWD Temp. Abd. Gas Inj Delayed Comp. Dry Other (Core, Water Supply, etc.) Deepening X Re-perforation Plug Back PBTD Conversion to Injection/Disposal Is recompleted production: X Commingled Docket No. Other (Disposal or Injection?) Docket No. INSTRUCTIONS: This form shall be completed in triplicate a Derby Building, Wichita, Kansas 67202, within 120 days apply. Information on side two of this form will be held c and submitted with the form. See rule 82-3-107 for confide wireline logs and driller's time logs (not previously submi prior to or with this form for approval of commingling or described to the complete of the com	of the recompletion of any well. Rules 82-3-107 and 82-3-14 onfidential for a period of 12 months if requested in writing entiality in excess of 12 months. One copy of any additional tted) shall be attached with this form. Submit ACO-4 or ACC 5-
All requirements of the statutes, rules and regulations r with and the statements herein are complete and correct to	he best of my knowledge.
- th	e Proration Analyst Date 10-8-99
Subscribed and sworn to before me this day of	Date Commission Expires 2-15-93
	SORM ACO.

			SIDE THO		
perator Name	nevron U.S.A	. Inc.	Lease Name	Hallet-Larkin	Well #1
15 229	₂₅ □	East			
ec. 15 Twp. 22:	3 Rge X	West	County	Hodgeman	
		DECOMBIE:	TION FORMATION DE	erbidiinu	
		RECOPLE	TION FORMATION DE	SCRIPTION	
			Log San	mple	
Name				<u>Top</u>	Bottom
		ADDITIONAL C	EMENTING/SQUEEZE	RECORD	
urpose:	Depth Top Botto	Type of Cement	# Sacks Used	Type and Per	cent Additives
Perforate Protect Casing	100 3000	. Type or odilette	† Jucks Oscu	Type and ren	cent Additives
Plug Back TD Plug Off Zone					
F(dg 011 201e			+		
,			+		
	<u> </u>				· · · · · · · · · · · · · · · · · · ·
Shots Per Foot	Specify Footage	PERFORATION RECOR of Each Interval			t, Cement Squeeze Record d of Material Used)
4" HSC Guns	4632-38			Selectively Acidi	ze w/3500 gallons
120 ⁰ Phasing	4628-30			of 15% HCL-Xylene	blend; Flush
4 SPF & 236 M	4616-22			w/17.5 bbls lse w	tr
charges	4598-4610				
on all	4590-94				
	4576-83				
4658 <u>4658</u>	D	lug Type			
		tug Type		· · · · · · · · · · · · · · · · · · ·	
2-3/8"	Ca+ A+	4647	TUBING RECORD	A una Lina	r Run
ate of Resumed Prod					11
					Gas-Oil Rat o
STEMBLEG PROGUCTION	rer 24 Hours	Gas		BDIS.	uas-Uli Kat o
isposition of Gas:		uas	MCT		
Vented Sold	Used on Le	ase (If vented,	submit ACO-18.)		