1609

COPY

SIDE ONE

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

Operator: License # 4519

Name: Chevron U.S.A. Inc.

Address: P.O. Box 36366

City/State/Zip: Houston, TX 77236

Purchaser:

Operator Contact Person:
Phone: (713) 561-3602 SHARON L. HOUK

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

Date of Original Completion 11-15-75

Name of Original Operator KEWANEE OIL COMPANY

Original Well Name RED #4

Date of Recompletion:

9-10-91 Commenced

8-15-91 Completed

Re-entry ☐ Workover ☒

RECEIVED
STATE CORPORATION COMMISSION
SEP 23 1991
CONSERVATION DIVISION
Wichita, Kansas

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 4670' PBTD
____ Conversion to Injection/Disposal

Is recompleted production:

X Commingled Docket No. CO 4916
____ Dual Completion Docket No. ____
____ Other (Disposal or Injection?)
Docket No. ____

API NO. 15- 083-20436-0001

County HODGEMAN

SE c SE/ NE/ Sec. 22 Twp. 22S Rge. 25 X West ____ East

4290 Ft. North from Southeast Corner of Section

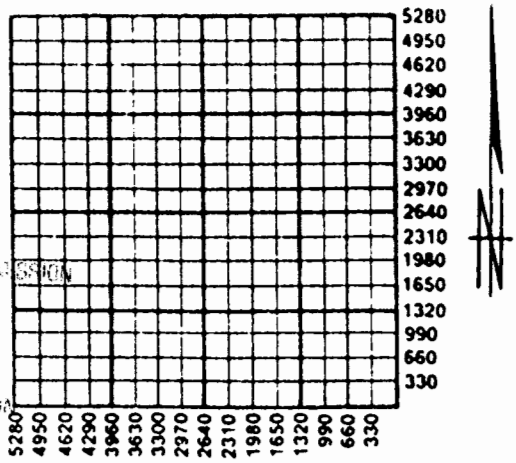
330 Ft. West from Southeast Corner of Section
(NOTE: Locate well in section plat below.)

Lease Name RED Well # 4

Field Name HALLET

Producing Formation MISSISSIPPI & PENNSYLVANIA

Elevation: Ground 2515' KB ____



K.C.C. OFFICE USE ONLY
F ____ Letter of Confidentiality Attached
C ____ Wireline Log Received
C ____ Drillers Timelog Received

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

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the recompletion of any well. Rules 82-3-107 and 82-3-141 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 any additional wireline logs and driller's time logs (not previously submitted) shall be attached with this form. Submit ACO-4 or ACO-5 prior to or with this form for approval of commingling or dual completions. Submit CP-1 with all plugged wells. Submit CP-111 with all temporarily abandoned wells. **NOTE: Conversion of wells to either disposal or injection must receive approval before use; submit form U-1.**

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 Sharon L. Houk SHARON L. HOUK Title PRORATION ANALYST Date 9-19-91

Subscribed and sworn to before me this 19TH day of SEPTEMBER 19 91

Notary Public Sharon A. Sweeney Date Commission Expires NOVEMBER 2, 1994

SHARON A. SWEENEY NOTARY PUBLIC STATE OF TEXAS EXPIRES 11-2-94

FORM ACO-2
7/89

SIDE TWO

Operator Name Chevron U.S.A. Inc. Lease Name RED Well # 4

Sec. 22 Twp. 22S Rge. 25 ☐ East ☒ West County HODGEMAN

RECOMPLETION FORMATION DESCRIPTION

☐ Log ☐ Sample

Name	Top	Bottom

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth Top	Depth Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
X Perforate					
___ Protect Casing					
___ Plug Back TD					
___ Plug Off Zone					

Shots Per Foot	PERFORATION RECORD Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)
4 SPF	4568 – 4575; 4598 – 4606; 4610 –4626;	STIMULATE PERFS W/3600 GALS.15% NEFE ACID
120 DEGREES	4626 – 4633; 4646 – 4662	PLUS 900 GALS. XYLENE WITH 216 FRAC. BALLS.
PHASING		

PBTD 4670' Plug Type FLOAT COLLAR

TUBING RECORD

Size 2-7/8" Set At 4536' Packer At NONE Was Liner Run ___ Y X N

Date of Resumed Production, Disposal or Injection ___

Estimated Production Per 24 Hours Oil 8 Bbls. Water 162 Bbls. --- Gas-Oil-Ratio

Gas --- Mcf

Disposition of Gas:

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