

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 P.O. Box 3092, Rm 3.329
City/State/Zip Houston, TX 77253-3092
Purchaser: WILLIAMS NATURAL GAS
Operator Contact Person: Sue Sellers
Phone (281) 366-2052
Contractor: Name: Cheyenne Drilling
License: 5382
Wellsite Geologist: _____

Designate Type of Completion
 New Well _____ Re-Entry _____ Workover _____
_____ Oil _____ SWD _____ SIOW _____ Temp. Abd.
 Gas _____ ENHR _____ SIGW _____
_____ Dry _____ Other (Core, WSW, Expl., Cathodic, etc.) _____
If Workover/Reentry: Old Well Info as follows:
Operator: _____
Well Name: _____
Comp. Date _____ Old Total Depth _____
_____ Deepening _____ Re-perf. _____ Conv. to Inj/SWD _____
_____ Plug Back _____ PBSD _____
_____ Commingled _____ Docket No. _____
_____ Dual Completion _____ Docket No. _____
_____ Other (SWD or Inj?) _____ Docket No. _____
06/25/01 06/27/01 08/01/01
Spud Date Date Reached TD Completion Date

API NO. 15- 093-21671-0000
County Kearny
_____ - NW - SE - SE Sec. 25 Twp. 22S Rge. 36 X E W
1250 S Feet from (S)N (circle one) Line of Section
1250 E 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 Doyle Gas Unit Well # 2HI
Producing Formation Chase
Elevation: Ground 3126' KB 3131'
Total Depth 2825' PBSD 2814'
Amount of Surface Pipe Set and Cemented at 952' 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 ALT 1 gk 11/30/01
(Data must be collected from the Reserve Pit)
Chloride content 32,000 ppm Fluid volume 750 bbls
Dewatering method used dried and filled
Location of fluid disposal if hauled offsite: _____
Operator Name _____
Lease Name _____ License No. _____
_____ Quarter Sec. _____ Twp. _____ S Rge. _____ EW
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 [Signature]
Title Staff Assistant Date 10/15/01
Subscribed and sworn to before me this 15th day of October, 20 01.
Notary Public [Signature]
Date Commission Expires 05/15/02

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
IDG (Specify)

SIDE TWO

Operator Name Amoco Production Company Lease Name Doyle Gas Unit Well # 2HI
 East
 Sec. 25 Twp. 22S Rge. 36 West County Kearny

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 (Attach Additional Sheets.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run (Submit Copy.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No List All E.Logs Run: Compensated Spectral Natural Gamma Log	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datums <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Chase</td> <td>2582'</td> <td>3131'-KB</td> </tr> </table>	Name	Top	Datum	Chase	2582'	3131'-KB
Name	Top	Datum					
Chase	2582'	3131'-KB					

CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> 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	12 1/4"	8 5/8"	24#	952'	Prem+Lite	300	2%cc; 1/4#floc
					Prem+	150	2%cc; 1/4#floc
Production	7 7/8"	4 1/2"	10.5#	2814'	65/35pw/6%g	600	1/4#floc

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
4	2574' - 2594'	Acid-w/500 gals 15% HCL	2574-2648
4	2604' - 2614'	Frac-w/86,000# 16/30 Brady Sand	2574-2648
4	2638' - 2648'	& 323 bbls 70Q N2 foam	
4	2700' - 2710'	Acid-w/1000 gals 15% HCL	2700-2710

TUBING RECORD		Size 2 3/8"	Set At 2725'	Packer At N/A	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj. 08/01/01			Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)		
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	0	85	0		

Disposition of Gas: **METHOD OF COMPLETION** **Production Interval**

Vented Sold Used on Lease Open Hole Perforation Dually Comp. Commingled
 (If vented, submit ACO-18.) Other (Specify) _____

DRILLER'S LOG

AMOCO PRODUCTION
DOYLE GU 2 HI
SECTION 25-T22S-R36W
KEARNY COUNTY, KANSAS

COMMENCED: 06-25-01
COMPLETED: 06-28-01

SURFACE CASING: 952' OF 8 5/8" CMTD
W/300 SKS 65:35 POZ C + 2% CC + 6% GEL +
1/4#/SK FLOCELE. TAILED W/150 SKS
CLASS C + 2% CC + 1/4#/SK FLOCELE.

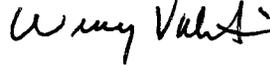
FORMATION

DEPTH

SURFACE HOLE	0 - 952
SANDSTONE & CLAY	952 - 1360
RED BED	1360 - 2825 RTD

I DO HEREBY CERTIFY THAT THE FOREGOING STATEMENTS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

CHEYENNE DRILLING, INC.

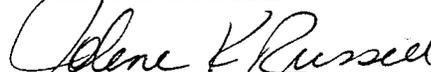


WRAY VALENTINE

STATE OF KANSAS: ss:

SUBSCRIBED AND SWORN TO BEFORE ME THIS 29TH DAY OF JUNE, 2001.

JOLENE K. RUSSELL



NOTARY PUBLIC