

CONFIDENTIAL

SIDE ONE

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

COPY*and*ator: License # 3871Name: Hugoton Energy CorporationAddress: 301 N. Main, Suite 1900City/State/Zip Wichita, Kansas 67202Purchaser: SEP 16 1998Operator Contact Person: Earl RingeisenPhone (316) 262-1522Contractor: Name: Murfin Drilling Rig #20License: 30606Wellsite Geologist: Joe Brouger

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/Re-Entry: old well info as follows:

Operator: _____

Well Name: _____

Comp Date _____ Old Total Depth: _____

☐ Deepening ☐ Re-perf. ☐ Conv. to Inj/SWD☐ Plug Back _____ PBTD☐ Commingled _____ Docket No. _____☐ Dual Completion _____ Docket No. _____☐ Other (SWD or Inj?) _____ Docket No. _____

2/12/96 2/14/96 3/22/96
 Spud Date Date Reached TD Completion Date

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market, Finney State Office Building, 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 Earl RingeisenTitle Production Manager Date: 05/16/96Subscribed and sworn to before me this 16th day of May 1996
Notary Public Arlene Valliquette

Date Commission Expires

NOTARY PUBLIC - STATE OF KANSAS

ARLENE VALLIQUETTE

My Appt. Exp. 7-21-99RECEIVED
KANSAS CORPORATION COMMISSIONAPI NO. 15- 075-20577County Hamilton

70' S&E - C - SE S 18 T 23 R 40 W

1250 Feet from S Line of Section1250 Feet from E Line of Section

Footages Calculated From Nearest Outside Section Corner:

NE, SE, NW, or SW (circle one)

Lease Name Wolf Well # 2-18Field Name HugotonProducing Formation ChaseElevation: Ground 3390 KB MAY 20Total Depth 2545' PBTD CONFIDENTIALAmount of Surface Pipe Set and Cemented at 322' Feet.Multiple State Cementing Collar Used? ☐ Yes ☒ No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 2545'feet depth to surface w/ 650 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content 69,000 ppm Fluid volume 450 bbls

Dewatering method used _____

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

____ Quarter Sec Twp _____ R _____ E/W

County _____ Docket No. _____

K.C.C. OFFICE USE ONLY

F ☒ Letter of Confidentiality AttachedC ☒ Wireline Log ReceivedC ☒ Geologist Report Received

Distribution

KCC ☒ SWD/Rep ☒ NGPAPlug ☒ Other (Specify) IS

MAY 21 1996

SIDE TWO

Operator Name Hugoton Energy Corporation Lease Name Wolf Well # 2-18
 Sec 18 Twp 23S Rge 40 West County Hamilton

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 | <input checked="" type="checkbox"/> Log | Formation (Top), Depth and Datums | <input type="checkbox"/> Sample |
| Samples Sent to Geological Survey | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Name | Top | Datum |
| Cores Taken | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Base Anhydrite | 2020' | +1378 |
| Electric Log Run (Submit Copy) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Winfield | 2493' | +905 |
| List All E. Logs run: | Cement Bond Log | | | |

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 | 12-1/4" | 8-5/8" | 25# | 322' | 35/65 Poz Class C | 80 90 | 6% D20 + 3% SI + 1/4#/sk D29 3% SI |
| Production | 7-7/8" | 4-1/2" | 9.5# | 2545' | 35/65 Poz C Class C | 500 150 | 5% D20 + 2% SI + 1/4#/sk D29 2% SI + .5% D60 + 1/4#/sk D29 |
| | | | | | | | |

ADDITIONAL CEMENTING/SQUEEZE RECORD

| Purpose: | Top | Depth 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 |
|----------------|---|--|-----------|
| 3 | 2504-2514' Fracture | 500 gal 15% FE acid 24,300# 12/20 Ottawa Sand & 2000# of 16/30 resin coated sand & 143 bbls 30# slick water gel | 2504-2514 |

| TUBING RECORD | | Size | Set At | Packer at | Liner Run | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|--|----------|---------|------------------|--|-----------------------------------|---|
| Date of First, Resumed Production, SWD or Inj. | | 4/11/96 | 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 | |
| | | 564 | 5 | | | |

Disposition of Gas: METHOD OF COMPLETION

Production Interval

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

Form ACO-1 (7/91)