

28-29-33 W

FORM MUST BE TYPED

SIDE ONE

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

Operator: License # 5952Name: Amoco Production CompanyAddress PO Box 800 Room 924City/State/Zip Denver, CO 80201Purchaser: N/AOperator Contact Persons: Susan R. PottsPhone (303) 830-5323Contractor: Name: Halliburton

License: \_\_\_\_\_

Wellsite Geologist: N/A

Designate Type of Completion

\_\_\_\_\_ New Well X Re-Entry \_\_\_\_\_ Workover

\_\_\_\_\_ Oil \_\_\_\_\_ SWD \_\_\_\_\_ SLOW \_\_\_\_\_ Temp. Abd.  
\_\_\_\_\_ Gas \_\_\_\_\_ ENHR X SIGW  
\_\_\_\_\_ Dry \_\_\_\_\_ Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-Entry:

Operator: Harris Oil and GasWell Name: Mull 2-28Comp. Date 1-30-95 Old Total Depth 5650'

\_\_\_\_\_ Deepening X Re-perf. \_\_\_\_\_ Conv. to Inj/SWD  
X Plug Back 3160' PBDT  
\_\_\_\_\_ Commingled \_\_\_\_\_ Docket No. \_\_\_\_\_  
\_\_\_\_\_ Dual Completion \_\_\_\_\_ Docket No. \_\_\_\_\_  
\_\_\_\_\_ Other (SWD or Inj?) Docket No. \_\_\_\_\_

9-15-95 9-29-95  
 Date of Start of Re-Entry Date Reached TD Completion Date of Re-Entry

API NO. 15- 081-20889-0001County Haskell\_\_\_\_\_ - C - SW - NE Sec. 28 Twp. 29S Rge. 33 X W1975 Feet from S/N (circle one) Line of Section1998 Feet from E/W (circle one) Line of SectionFootages Calculated from Nearest Outside Section Corner:  
NE SE, NW or SW (circle one)Lease Name Elliott Gas Unit Well # 2H1Field Name HugotonProducing Formation ChaseElevation: Ground 2944.09' KB 2957'Total Depth 5650' PBDT 3160'Amount of Surface Pipe Set and Cemented at 1635 FeetMultiple Stage Cementing Collar Used? X Yes \_\_\_\_\_ NoIf yes, show depth set 3197 Feet

If Alternate II completion, cement circulated from \_\_\_\_\_

feet depth to \_\_\_\_\_ w/ \_\_\_\_\_ sx cmt.

Drilling Fluid Management Plan REENTRY JK 3-20-96  
(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. 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 Susan R. PottsTitle Senior Staff Assistant Date 2-16-96Subscribed and sworn to before me this 16 day of February 19 96Notary Public [Signature]Date Commission Expires February 4 1997

K.C.C. OFFICE USE ONLY  
 F \_\_\_\_\_ Letter of Confidentiality Attached  
 C \_\_\_\_\_ Wireline Log Received  
 C \_\_\_\_\_ Geologist Report Received

Distribution  
✓ KCC \_\_\_\_\_ SWD/Rep \_\_\_\_\_ NGPA  
\_\_\_\_\_ KGS \_\_\_\_\_ Plug \_\_\_\_\_ Other (Specify) IS

100 BROADWAY  
 DENVER, CO 80201

RECEIVED  
 KANSAS CORPORATION COMMISSION Form ACO-1 (7-91)

FEB 19 1996

CONSERVATION DIVISION  
 WICHITA, KS

WEE-PS-82

SIDE TWO

Operator Name Amoco Production Company Lease Name Elliott Gas Unit Well # 2HISec. 28 Twp. 29S Rge. 33 ☐ EastCounty Haskell☒ West

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 ☒ NoCores Taken ☐ Yes ☒ NoElectric Log Run ☐ Yes ☒ No  
(Submit Copy.)

List All E.Logs Run: None

☒ Log Formation (Top), Depth and Datum ☐ Sample

Name	Top	Datum
Chase Top	2534'	KB
Herrington	2605'	
Krider	2625'	
Winfield	2656'	
Towanda	2705'	
Fort Riley	2734'	
Council Grove	2790'	

## 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"	24	1635'	Premium Plus Lite	535	1/4# Flocele
					Premium Plus	150	2%CC
1st Stage	7.875"	4 1/2"	10.5	5511'	Premium	460	5%KCL .6% Halad-322
					Premium Plus Lite	200	
2nd Stage	7.875"	4 1/2"	10.5	3197'	Premium	50	

## 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	5374-5382'; 5336-5340'; 5314-5318'; 4671-4680' Set CIBP at 5220'		
2	2734-2750'; 2686-2706'; 2656-2670'; 2798-2814' Set CIBP at 3160'	FRAC w/ 57,500 lbs. 12/20 sand and	2656-2750'
		505 bbls. x-link gelled fresh water.	

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2.375" 4.7# J-55 EUE T&C		2780'	2780'		
Date of First, Resumed Production, SMD or Inj. Shut In	Producing Method <input type="checkbox"/> Flowing <input 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

## Dispositi METHOD OF COMPLETION

Production Interval

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

☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled 2656'-2814' O.A.  
☐ Other (Specify) \_\_\_\_\_