

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

Operator: License # 5293
Name Helmerich & Payne, Inc
Address P O Box 558

City/State/Zip Garden City, Kansas 67846

Purchaser Derby

Operator Contact Person Millard L. Lindsay
Phone 316-276-3693

Designate Type of Original Completion
 New Well Re-Entry Workover
 Oil SWD Temp Abd
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply etc.)

Date of Original Completion: 4-4-78
(Marmaton)

DATE OF RECOMPLETION:
9-26-88 10-4-88
Commenced Completed

Designate Type of Recompletion/Workover:
 Deepening Delayed Completion
 Plug Back Re-perforation
 Conversion to Injection/Disposal

recompleted production:
 No Commingled; Docket No. _____
 No Dual Completion; Docket No. _____
 No Other (Disposal or Injection)?

API NO. 15- 081 - 2013 - 0001

County Haskell

C SE NW Sec 28 Twp 29 Rge 33 East West

3300 Ft North from Southeast Corner of Section
3300 Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)

Lease Name Elliott I Well # 2

Field Name Lemon North

Name of New Formation Kansas City B

Elevation: Ground 2947 KB 2952
Section Plat

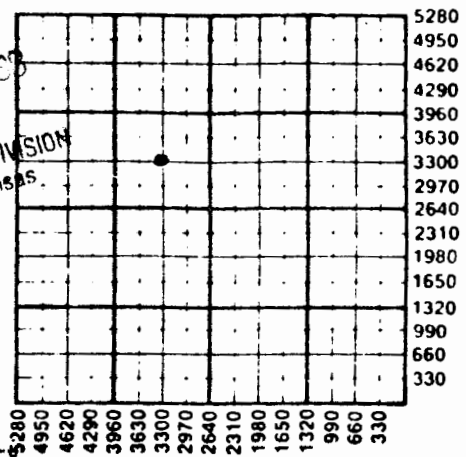
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STATE CORPORATION COMMISSION

NOV 1 1988

CONSERVATION DIVISION
Wichita, Kansas

NOV 0 1 1988

KANSAS GEOLOGICAL SURVEY
WICHITA BRANCH



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 prior to or with this form for approval of commingling or dual completions. Submit CP-4 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 Millard Lindsay Title District Prod Manager Date 10-25-88

Subscribed and sworn to before me this 25th day of October 19 88

Notary Public Judy J. Richner Date Commission Expires Aug 15, 1992

KJ



SIDE TWO

Operator Name Helmerich & Payne, Inc Lease Name Elliott I Well # 2

Sec 28 Twp 29 Rge 33 East
X West County Haskell

RECOMPLETED FORMATION DESCRIPTION:

X Log Sample

<u>Name</u>	<u>Top</u>	<u>Bottom</u>
Kansas City B	4645	4661

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth		Type of Cement	# Sacks Used	Type & Percent Additives
	Top	Bottom			
<u> </u> Perforate	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u> </u> Protect Casing	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u> </u> Plug Back TD	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u> </u> Plug Off Zone	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>

Shots Per Foot	PERFORATION RECORD	Acid, Fracture, Shot, Cement Squeeze Record
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)
<u>2</u>	<u>4646 - 4654</u>	<u>1500gal 15% HCl</u>
<u> </u>	<u> </u>	<u> </u>
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PBTD 4695 Plug Type Baker retrievable bridge plug

TUBING RECORD:

Size 2-3/8 Set At 4635 Packer At 4584 Was Liner Run? Y No N

Date of Resumed Production, Disposal or Injection 9-30-88

Estimated Production Per 24 Hours 95 bbl/oil 2 bbl/water

TSTM MCF gas gas-oil ratio

