SIDE ONE

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

Operator: License # 5952

Name: Amoco Production Company

Address: P.O. Box 800, Rm. 1833

City/State/Zip: Denver, CO 80201

Purchaser:

Operator Contact Person:
Phone: (303) 830-4009

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

Date of Original Completion 10/31/89

Name of Original Operator Amoco Production Co.

Original Well Name Johnson C #3

Date of Recompletion:

10/31/89 Commenced

5/1/90 Completed

Re-entry ☐ Workover XX

Designate Type of Recompletion/Workover:

____ Oil ____ SWD ____ Temp. Abd.
XX Gas ____ Inj ____ Delayed Comp.
____ Dry ____ Other (Core, Water Supply, etc.)

____ Deepening ____ Re-perforation
XX Plug Back 3026' PBTD
____ Conversion to Injection/Disposal

Is recompleted production:

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

API NO. 15- 067-20936

County Grant

C- NE NE Sec. 31 Twp. 29 Rge. 38 ____ East _X_ West

4620 Ft. North from Southeast Corner of Section

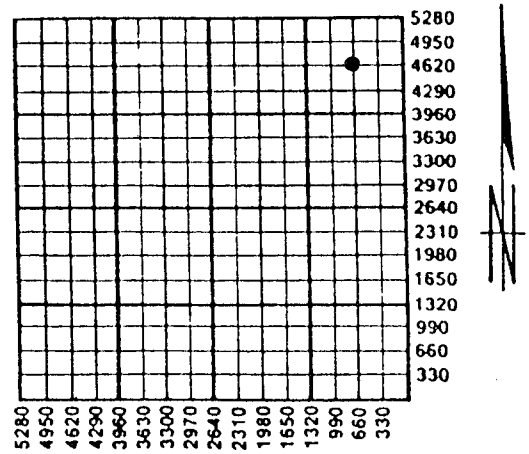
660 Ft. West from Southeast Corner of Section
(NOTE: Locate well in section plat below.)

Lease Name Johnson G.U. "C" Well # 3HI

Field Name Hugoton

Producing Formation Chase

Elevation: Ground 3132' KB 3144'



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)

I06/SOC.

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 J. L. Hampton Title Sr. Staff Admin. Supv. Date 5/16/90

Subscribed and sworn to before me this 16 day of May 19 90

Notary Public Julie A. Victor Date Commission Expires 4/7/94

FORM ACO-2
7/89

SIDE TWO

Operator Name Amoco Production Company Lease Name Johnson G.U. "C" Well # 3HI

☐ East

Sec. 31 Twp. 29 Rge. 38 ☒ West County Grant

RECOMPLETION FORMATION DESCRIPTION

☒ Log ☐ Sample

Name	Top	Bottom
Chase	2314'	2608'

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth Top	Depth Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
___ Perforate ___ Protect Casing X Plug Back TD ___ Plug Off Zone	3100	3300	Class C	40 sx	

Shots Per Foot	PERFORATION RECORD Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)
4 JSPF	2332-2386'	2332-2532' Frac with 15,600 gals.
4 JSPF	2403-2428'	7-1/2" HCL acid
4 JSPF	2432-2450'	Frac with 221,650 gals. crosslink
4 JSPF	2473-2516'	gel and 8/16 sand
4 JSPF	2531-2590'	

PBTD 3026' Plug Type Cement

TUBING RECORD

Size N/A Set At _____ Packer At N/A Was Liner Run _____ Y X N

Date of Resumed Production, Disposal or Injection Shut-In, Waiting on pipeline

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

Gas 1,115 Mcf

Disposition of Gas:

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