

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

Operator: License # 5398
Name: ARCO Oil & Gas Company
Address: Box 1610
City/State/Zip Midland, TX 79702

Purchaser: _____
Operator Contact Person: Ken W. Gosnell
Phone (915) 688-5672

Contractor: Name: _____
License: _____
Wellsite Geologist: _____

Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, MSW, Expl., Cathodic, etc)

If Workover/Re-Entry: old well info as follows:
Operator: ARCO Oil & Gas Co.
Well Name: Paul Plummer #2
Comp. Date 12-22-88 Old Total Depth 5800
 Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PSTD
 Commingled Decklet No. _____
 Dual Completion Decklet No. _____
 Other (SWD or Inj?) Decklet No. _____

Spud Date _____ Date Reached TD _____ Completion Date _____

API NO. 15- 187-20444
County Stanton
C-SW-NW Sec. 25 Twp. 29 Rng. 39 X E V

3301.1 Feet from (S)N (circle one) Line of Section
4637.6 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 Paul E. Plummer Well# 2
Field Name Big Bow

Producing Formation St. Louis
Elevation: Ground 3164 KB 3174
Total Depth 5800 PSTD _____

Amount of Surface Pipe Set and Cemented at 1800 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/ _____ sz cat.

Drilling Fluid Management Plan 5-24-93
(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. Rng. E/V
County _____ Docket No. _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby 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 Ken W Gosnell
Title Regulatory Coordinator Date 4-6-93
scribed and sworn to before me this 6th day of April, 1993.

Notary Public Lisa A GORDY
Date Commission Expires _____
Notary Public, State of Texas
My Comm. Expires: 0-0-96

RECEIVED
STATE CORPORATION COMMISSION
K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received APR 12 1993
C Geologist Report Received
Distribution
KCC SWD/Rep
KGS Plug
Other (Specify) _____
CONSERVATION DIVISION
WICHITA, KANSAS

Operator Name ARCO Oil & Gas Company Lease Name Paul E. Plummer Well# 2
 Sec. 25 Twp. 29 Rge. 39 East County Stanton
 West

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests given 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.) Log Formation (Top), Depth and Datum Sample Name Top Datum

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No (Submit Copy.)

List All E.Logs Run:

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
	12-1/4	8-5/8	24	1800			
	7-7/8	5-1/2	15.5	5800			

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	5687-5699	H	100 sx	
<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
	5701-5704 Swab test. Set CIBP at 5682		
	5671-5673 Swab test. Set CIBP at 5619		

TUBING RECORD Size None Set At _____ Packer At _____ Liner Run Yes No

Date of First, Resumed Production, SVD or Inj. _____ Producing Method Flowing Pumping Gas Lift Other (Explain) _____

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

Disposition of Gas: Vented Sold Used on Lease (if vented, submit ACO-18.)

METHOD OF COMPLETION

Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval _____