

ORIGINAL

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

Operator: License # 9953

Name: Harris Oil and Gas Company

Address 1125 Seventeenth Street
Suite 2290

City/State/Zip Denver, CO 80202

Purchaser: N/A

Operator Contact Person: Doug Hoisington

Phone (303) 293-8838

Contractor: Name: Gonzales Well Service

License: 31985

Wellsite Geologist: N/A

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:

Operator: Harris Oil and Gas Company

Well Name: Julian #1-27

Comp. Date 12/31/92 Old Total Depth 5800'

Deepening Re-perf. Conv. to Inj/SWD

Plug Back PBSD

Commingled Docket No. _____

Dual Completion Docket No. _____

Other (SWD or Inj?) Docket No. E-27.203

10/14/96 10/18/96 10/23/96
Spud Date Date Reached TD Completion Date

API NO. 15- 187-20,654-00-01

County Stanton

NE - SW Sec. 27 Twp. 29S Rge. 39 ^E ^W

1980 Feet from ^N (circle one) Line of Section

1980 Feet from ^W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or ^{SW} (circle one)

Lease Name Julian Well # 1-27

Field Name Big Bow (West Extension)

Producing Formation N/A

Elevation: Ground 3197' KB 3208'

Total Depth 5800' PBSD 4143'

Amount of Surface Pipe Set and Cemented at 1718 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set 3093' Feet

If Alternate II completion, cement circulated from N/A

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(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 Doug Hoisington

Title Operations Manager Date 6/2/00

Subscribed and sworn to before me this 2 day of June, 2000

Notary Public Sammy G. Herman

Date Commission Expires March 31, 2001

K.C.C. OFFICE USE ONLY		
F	<input type="checkbox"/>	Letter of Confidentiality Attached
C	<input type="checkbox"/>	Wireline Log Received
C	<input type="checkbox"/>	Geologist Report Received
Distribution		
<input type="checkbox"/>	KCC	<input type="checkbox"/> SWD/Rep <input type="checkbox"/> NGPA
<input type="checkbox"/>	KGS	<input type="checkbox"/> Plug <input type="checkbox"/> Other (Specify)

58417

SIDE TWO

Operator Name Harris Oil and Gas Company Lease Name Julian Well # 1-27
Sec. 27 Twp. 29S Rge. 39 East West
County Stanton

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 No
Cores Taken Yes No
Electric Log Run Yes No
(Submit Copy.)
List All E.Logs Run:

Log Formation (Top), Depth and Datums Sample
Name Top Datum

CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> 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	1718	Class C Lite	150 600	1/4# Flocele
Production	7 7/8"	4 1/2"	10.5	5800	Class H	200	.6% Halad 322

ADDITIONAL CEMENTING/SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input checked="" type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	2400- 3085	Class C & H	200	N/A
	3841- 4148	Class H	50	N/A

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	
		CIBP		
	Cement Retainer (Not drilled out)			4143'
4	4044'-4060'		2000 gal 15% FE	
4	4088'-4122'		2000 gal 15% FE	

TUBING RECORD		Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		2 3/8"	4015'	4015'	
Date of First, Resumed Production, <u>SUC</u> or Inj. N/A			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
	N/A				

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) _____