

5-31s-33w

CONFIDENTIAL

FORM MUST BE TYPED

SIDE ONE

COPY

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

Operator: License # 3871

Name: Hugoton Energy Corporation

Address: 301 N. Main, Suite 1900

City/State/Zip: Wichita, KS 67202

Purchaser: KOCH-oil, Cibola - Gas

Operator Contact Person: Jim Gowens

Phone: (316) 262-1522

Contractor Name: Murfin Drilling Co., Inc.

License: 30606

Wellsite Geologist: Curtis Covey

Designate Type of Completion
 New Well Re-Entry Workover

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

Workover/Re-Entry: old well info as follows:

Operator: HUGOTON ENERGY CORPORATION

Well Name: GASKILL #3-5

Comp. Date 5/12/95 Old Total Depth 5640'

CEMENT SQUEEZE
 Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PBTB
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

8/3/95 8/5/95
Spud Date Date Reached TD Completion Date

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. The statements herein are complete and correct to the best of my knowledge.

Signature: [Signature]

Title: Jim Gowens, V.P. Exploration Date: 9-20-95

Subscribed and sworn to before me this 20th day of SEPT. 1995.

Notary Public: Arlene Valliquette

Date Commission Expires: July 31, 1999

NOTARY PUBLIC - STATE OF KANSAS
ARLENE VALLIQUETTE

My Appt. REC'D. OFFICE USE ONLY

API NO. 15- 175-21464-0001

County: SEWARD

NW - NW - NE - Sec. 5 Twp. 31S Rge. 33 X W

330 Feet from S (circle one) Line of Section

2310 Feet from E (circle one) Line of Section

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

Lease Name: GASKILL Well #: 3-5

Field Name: VICTORY

Producing Formation: KANSAS CITY 'A'/MARMATON

Elevation: Ground 2932' KB 2941'

Total Depth: 5640' PBTB

Amount of Surface Pipe Set and Cemented at: 1860 Feet.

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: 2866 Feet

If Alternate II completion, cement circulated from: NA

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan REWORK 9/2 5-1-96
(Data must be collected from the Reserve Pit)

Chloride content: 1100 mg/l ppm Fluid volume: 844 bbls

Dewatering method used: EVAPORATION NO

Location of fluid disposal if hauled offsite: SEP 20

RELEASED

Operator Name: CONFIDENTIAL

Lease Name: NOV 1 1996 License No. _____

County: SEWARD Docket No. _____

Spud Date: _____ Date Reached TD: _____ Completion Date: _____

RECEIVED
STATE CORPORATION COMMISSION

F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other (Specify)

SEP 21 1995

CONSERVATION DIVISION
Wichita, Kansas

Form ACO-1 (7-91)

SIDE TWO

Operator Name Hugoton Energy Corporation Lease Name GASKILL Well # 3-5

East
c. 5 Twp. 31S Rge. 33
 West

CONFIDENTIAL

SEWARD

COPY

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 (Attach Additional Sheets)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datums	<input type="checkbox"/> Sample.
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	RELEASED	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		NOV 1 1996	
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		FROM CONFIDENTIAL	

List All E. Logs Run: DIL, BHC, ML, LDL/CNL(Original drilling only)

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"		1860'	Paceset Lite Class C	550 150	3% Cacl2 + 1/4 #/sk Cello-seal 3% Cacl2
production	7-7/8"	5-1/2"	15.5#	5620'	Class H	300	10% Thixad + 10% salt + 4% CF-2 + 2 PPS Hi-Seal
port collar				2866	35/65 Poz Class 'C'	400 150	6%D20 + 2%SI + 1/4 #/sk D29 2% SI + 1/4 #/sk D29

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth Top	Depth Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
Perforate					
<input checked="" type="checkbox"/> Protect Casing	4657	4784	Class H	100	.5% D65
<input type="checkbox"/> Plug Back TD			Class H	50	
<input type="checkbox"/> Plug Off Zone					

REC
SEP 20
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Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	Depth
2	4777' - 4784' (7') (squeezed when cmt retainer set)		1000 Gal 15% NE-FE Acid	4777' - 4784'
2	4778' - 4788' (10')		600 Gal 15% NE-FE Acid	4778' - 4788'
2	4588' - 4592' (4')		1000 Gal 15% NE-FE acid	4588' - 4592'

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TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		2-7/8"	4806'	NA		
Date of First, Resumed Production, SWD or Inj.				Producing Method		
8/6/95				<input type="checkbox"/> Flowing	<input checked="" type="checkbox"/> Pumping	<input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
Estimated Production Per 24 Hours	Oil	Bbbs.	Gas	Mcf	Water	Bbbs.
	154		53		0	
				Gas-Oil Ratio Gravity		

Position of Gas: **METHOD OF COMPLETION**

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

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

Production Interval 4778' - 4788'
4588' - 4592'