

26-3137
COPY

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

Operator: License # 5208

Name: Mobil Oil Corporation

Address P.O. Box 2173

2319 North Kansas Avenue

City/State/Zip Liberal, KS 67905-2173

Purchaser: Spot Market

Operator Contact Person: Sharon Cook

Phone (316) 626-1142

Contractor: Name: Cheyenne Drilling

License: 5382

Wellsite Geologist: W. H. Jamieson

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: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Deepening Re-perf. Conv. to Inj/SWD

Plug Back PBTB

Commingled Docket No. _____

Dual Completion Docket No. _____

Other (SWD or Inj?) Docket No. _____

4-10-94 4-13-94 5-6-94
Spud Date Date Reached TD Completion Date

API NO. 15- 189-21618

County Stevens

 - NW - SW - NE Sec. 26 Twp. 31S Rge. 37W E

3912.5 FSL Feet from SW (circle one) Line of Section

2615.5 FEL Feet from EW (circle one) Line of Section

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

Lease Name Brewer Unit Well # 3

Field Name Hugoton

Producing Formation Chase

Elevation: Ground 3081.21 KB 3092

Total Depth 2835 PBTB 2825

Amount of Surface Pipe Set and Cemented at 683 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set NA Feet

If Alternate II completion, cement circulated from NA

feet depth to NA w/ NA sx cmt.

Drilling Fluid Management Plan ALT 1 29 11-1-94
(Data must be collected from the Reserve Pit)

Chloride content 4,600 ppm Fluid volume 1,500 bbls

Dewatering method used Evaporation

Location of fluid disposal if hauled offsite: _____

Operator Name NA

Lease Name NA License No. NA

NA Quarter Sec. NA Twp. NA S Rng. NA E/W

County NA Docket No. NA

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 Sharon A. Cook Sharon A. Cook

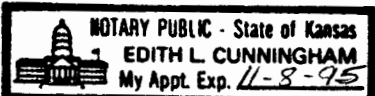
Title Regulatory Assistant Date 6-30-94

Subscribed and sworn to before me this 30 day of June, 1994.

Notary Public Edith L. Cunningham

Date Commission Expires November 8, 1995

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



SIDE TWO

Operator Name Mobil Oil Corporation Lease Name Brewer Unit Well # 3
 Sec. 26 Twp. 31S Rge. 37W East West
 County Stevens

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Glorietta	1265	1430
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Stone Corral	1705	1770
List All E.Logs Run:		Chase	2538	--
Dual Induction Focused Log - Gamma Ray				
Compensated Dual Neutron Spectralog				

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 Casing	12.250	8.625	24#	683' 688'	Howco Lite Prem. Plus	225 sxs 175 sxs	3% CaCL2 3% CaCL2
Production Casing	7.875	5.500	14#	2835	Prem. Plus Prem. Plus	325 sxs 150 sxs	3% Econolite 2% CaCL2

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				
<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
1 SPF	2744-2750 2566-2572	Acid: 1,500 gal 7.5% HCL	
	2688-2732	Frac'd: 31,000 gal Crosslink gel 53,000 gal 12/20 Brady Sand	
	2630-2660		
	2594-2614		

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SMD or Inj. 5-7-94		Producing Method <input checked="" 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	
		180				

Disposition of Gas: METHOD OF COMPLETION Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled 2566

(If vented, submit ACO-18.) Other (Specify) _____ 2750