

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

Operator: License # 5952

Name: AMOCO PRODUCTION COMPANY

Address P. O. BOX 800 ROOM 925

City/State/Zip DENVER, CO 80201

Purchaser: Williams Natural Gas

Operator Contact Person: ELLEN HARTZLER

Phone (303) 830-5130

Contractor Name: CHEYENNE DRILLING

License: 5382

Wellsite Geologist: _____

Designate Type of Completion
 New Well Re-Entry Workover

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

If Workover:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

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

04/24/93 04/26/93 08/30/93
Spud Date Date Reached TD Completion Date

API NO. 15- 129-21178 _____

County MORTON

NW - NW - SE - SE Sec. 36 Twp. 31 Rge. 41 X W^E

1250 Feet from S/N (circle one) Line of Section

1250 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 DUNN G. U. Well # 2HI

Field Name HUGOTON

Producing Formation CHASE

Elevation: Ground 3317' KB 3328'

Total Depth 2843' PBDT 2795'

Amount of Surface Pipe Set and Cemented at 528 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/ _____ sx cmt.

Drilling Fluid Management Plan ALT 1 8/4 5-28-96
(Data must be collected from the Reserve Pit)

Chloride content 5800 ppm Fluid volume 2140 bbls

Dewatering method used DRIED AND FILLED

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, 200 Colorado
Verby 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.

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 N. E. Odum Hartzler

Title SR. STAFF ASSISTANT _____ Date 2/24/95

Subscribed and sworn to before me this 24th day of February,
19 95.

Notary Public Jessie Callahan

Date Commission Expires 8/4/98

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"/> SWD/Rep
<input type="checkbox"/>	KGS	<input type="checkbox"/> Plug
<input type="checkbox"/>		<input checked="" type="checkbox"/> NGPA
<input type="checkbox"/>		<input type="checkbox"/> Other
(Specify)		

SIDE TWO

Operator Name AMOCO PRODUCTION COMPANY Lease Name DUNN G. U. Well # 4HI

Sec. 36 Twp. 31 Rge. 41 East West County MORTON

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 Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run (Submit Copy.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No List All E.Logs Run: Dual Induction <i>Sonic</i> NGT <i>Nuc mag Resonance</i> Microlog LDT/CNL with alpha Proc.	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datums <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Datum</th> </tr> <tr> <td>HERRINGTON</td> <td>2158</td> <td></td> </tr> <tr> <td>KRIDER</td> <td>2170</td> <td></td> </tr> <tr> <td>WINFEILD</td> <td>2208</td> <td></td> </tr> <tr> <td>TOWANDA</td> <td>2287</td> <td></td> </tr> <tr> <td>FT. RILEY</td> <td>2334</td> <td></td> </tr> <tr> <td>COUNCIL GROVE</td> <td>2441</td> <td></td> </tr> </table>	Name	Top	Datum	HERRINGTON	2158		KRIDER	2170		WINFEILD	2208		TOWANDA	2287		FT. RILEY	2334		COUNCIL GROVE	2441	
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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#	528	Lite/Class C	280	
Production	7 7/8"	5 1/2"	14	2843	Lite/Class C	450	

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
4	2526-2536';2604-2618';2643-2653';2696-2720';	ACIDIZE W/2500 GAL. 15% HCL 2526-2720

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
N/A				

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

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

Disposition of Gas: Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled 2526-2720
 vented, submit ACO-18.) Other (Specify) _____

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

Operator: License # 5952
Name: Amoco Production Company
Address P.O. Box 800,
City/State/Zip Denver, CO 80201

Purchaser: _____
Operator Contact Person: Julie Victor
Phone (303) 830-4009

Contractor: Name: Cheyenne Drilling
License: 5382

Wellsite Geologist: _____

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/Re-entry: old well info as follows:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

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

4/24/93 4/26/93 Delayed

Spud Date Date Reached TD Completion Date

API No. 15 - 129-21178
County Morton
NW . NW . SE . SE Sec. 36 Twp. 31 Rge. 41 X East West
1250 Feet from S (circle one) Line of Section
1250 Feet from E (circle one) Line of Section

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

Lease Name Dunn G.U. Well # 2HI

Field Name Hugoton

Producing Formation Chase

Elevation: Ground 3317' KB 3328'

Total Depth 2843' PBTD 2795'

Amount of Surface Pipe Set and Cemented at 528 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/ _____ sx cmt.

Drilling Fluid Management Plan ALT 1 9/21 11-1-93
(Data must be collected from the Reserve Pit)

Chloride content 5800 ppm Fluid Volume 2140 bbls

Dewatering method used dried and filled

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, 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 CEILING 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 to the best of my knowledge.

Signature Julie Victor

Title Business Analyst Date 9/22/93

Subscribed and sworn to before me this 22 day of September, 1993

Notary Public Susan Callahan

Date Commission Expires _____ My Commission Expires August 02, 1994

K.C.C. OFFICE USE ONLY
F _____ Letter of Confidentiality Attached
C _____ Wireline Log Received
D _____ Drillers Timelog Received
RECEIVED
STATE CORPORATION COMMISSION
09-20-1993
KCC _____ Distribution
KGS _____ Plug _____ NGPA
CONSERVATION DIVISION _____ Other (Specify)
Wichita, Kansas

Operator Name Amoco Production Company

Lease Name Dunn G.U.

Well # 2HI

County Morton

Sec. 36 Twp. 31 Rge. 41 East West

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.)

Log Formation (Top), Depth and Datums Sample

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
(Submit Copy.)

Name	Top	Datum
Herington	2158'	
Krider	2170'	
Winfield	2208'	
Towanda	2287'	
Ft. Riley	2334'	
Council Grove	2441'	

List All E. Logs Run:
DUAL INDUCTION
MINILOG
ACOUSTILOG
EPILOG
PROLOG
CALIPER
COMPENSATED NEUTRON
SPECTRALOG

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"	24#	528'	Class C	280	
Production	7-7/8"	5-1/2"	15.5#	2843'	Class C	450	

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose: <input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	Depth		Type of Cement	# Sacks Used	Type and Percent Additives
	Top	Bottom			

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
	4	2526-2536'; 2604-2618'; 2643-2653'; 2696-2720'		Acidize with 2500 gal. 15% HCL	

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<u>None Yet</u>				

Date of First, Resumed Production, SWD of Inj	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

Disposition of Gas:	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input checked="" type="checkbox"/> ^{KCC} Sold <input type="checkbox"/> Used on Lease	<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> ^{KCC} Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled	<u>2526' - 2720'</u>
(If vented, submit ACO-18)	<input type="checkbox"/> Other (Specify)	