

COPY *and*

1162

SIDE ONE

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

Operator: License # 07344
Name: Clyde M. Becker
Address 212 First National Bldg.
Ponca City, OK 74601
Purchaser: Associated Natural Gas
Operator Contact Person: Clyde M. Becker
Phone (405) 765-8788

Contractor: Name: Cheyenne Drilling Co.
License: 5382
Wellsite Geologist: Clyde M. Becker, Jr.

Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD Temp. Abd.
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply, etc.)

AMO: old well info as follows:
Operator: _____
Well Name: _____
Comp. Date _____ Old Total Depth _____

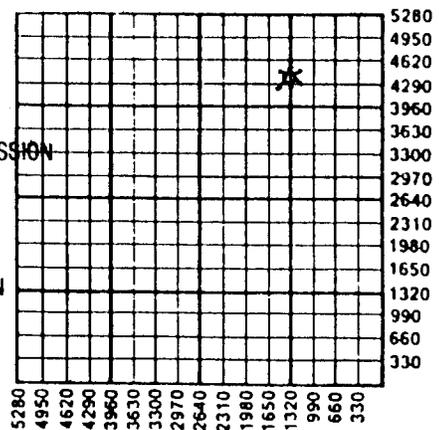
Drilling Method:
 Mud Rotary Air Rotary Cable
5-18-91
5-18-91 5-21-91 6-12-91
Spud Date Date Reached TD Completion Date

API NO. 15- 175-21,179
County Seward
S/2 N/2 NE Sec. 36 Twp. 32 Rge. 32 East West
4430 Ft. North from Southeast Corner of Section
1320 Ft. West from Southeast Corner of Section
(NOTE: Locate well in section plat below.)
Lease Name Irwin Well # 2
Field Name NW Massoni
Producing Formation Chase
Elevation: Ground 2777 KB 2788
Total Depth 3315 PBTD _____

RECEIVED
STATE CORPORATION COMMISSION

AUG 16 1991

CONSERVATION DIVISION
Wichita, Kansas



Amount of Surface Pipe Set and Cemented at 527 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.

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date of any well. Rule 82-3-130, 82-3-107 and 82-3-106 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 drillers time log 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. Any recompletion, workover or conversion of a well requires filing of ACO-2 within 120 days from commencement date of such work.

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 Clyde M. Becker
Title Operator Date 8-12-91

Subscribed and sworn to before me this 12th day of August, 1991.

Notary Public Maxine Holmes
MAXINE HOLMES
Date Commission Expires 11-14-92

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Drillers Timelog Received
Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other (Specify)

SIDE TWO

Operator Name Clyde M. Becker Lease Name Irwin Well # 2
 Sec. 36 Twp. 32 Rge. 32 East County Seward
 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets.) 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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy.)	<p style="text-align: center;">Formation Description</p> <p style="text-align: center;"><input checked="" type="checkbox"/> Log <input type="checkbox"/> Sample</p> <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:60%;">Name</th> <th style="width:20%;">Top</th> <th style="width:20%;">Bottom</th> </tr> </thead> <tbody> <tr> <td>Chase Group</td> <td>2568</td> <td></td> </tr> <tr> <td>Council Grove</td> <td>2902</td> <td></td> </tr> </tbody> </table>	Name	Top	Bottom	Chase Group	2568		Council Grove	2902	
Name	Top	Bottom								
Chase Group	2568									
Council Grove	2902									

CASING RECORD <input 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	527	Posmix&lite	260	
Production	7 7/8	4 1/2	10.5	3306		595	10% Salt
PERFORATION RECORD				Acid, Fracture, Shot, Cement Squeeze Record			
Shots Per Foot	Specify Footage of Each Interval Perforated			(Amount and Kind of Material Used)			Depth
2	2654-60, 2635-47, 2597-609, 2570-78			Acid w/3000 gal 15% HCL FE			
TUBING RECORD				Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Size 2 3/8		Set At 2525		Packer At			
Date of First Production	Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)						
6-8-91							
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity		
	0	234	2.32				

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

METHOD OF COMPLETION

Open Hole Perforation Dually Completed Commingled

Other (Specify) _____

Production Interval 2570-2660