

COPY *Handwritten initials*

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

API NO. 15- 175214980000
County Seward
CSE/4-SE/4-NW/4 Sec. 17 Twp. 32S Rge. 33 X W

Operator: License # 6120

Name: Cabot Oil & Gas Corporation

Address 9400 N. Broadway, Suite 608

City/State/Zip Oklahoma City, OK 73114

Purchaser: Cabot Oil & Gas Marketing

Operator Contact Person: Steve Turk

Phone (405) 478-6501

Contractor: Name: BEREDCO Drilling

License: 5147

Wellsite Geologist: CONFIDENTIAL

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD SIOW 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 PSTD

Commingled Docket No. _____

Dual Completion Docket No. _____

Other (SWD or Inj?) Docket No. _____

11-8-95 11-15-95 12-1-95

Spud Date Date Reached TD Completion Date

2310 Feet from S/W (circle one) Line of Section

2310 Feet from L/W (circle one) Line of Section

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

Lease Name Johnson Well # 5-17

Field Name Angman

Producing Formation St. Louis

Elevation: Ground 2760 KB 2770

Total Depth 5825 PSTD 5782

Amount of Surface Pipe Set and Cemented at 1525 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/ _____ sz cnt.

Drilling Fluid Management Plan ALT 4-12-96
(Data must be collected from the Reserve Pit) LU

Chloride content 4000 ppm Fluid volume 10,000 bbls

Dewatering method used Dryout - Backfill

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

Quarter JUL 21 1997 JAN Inj _____ E/W

County _____ Docket No. _____

FROM CONFIDENTIAL

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 2 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.

I, _____, certify that the statements herein are complete and correct to the best of my knowledge.



Operations Manager _____ Date 1-12-96

Subscribed and sworn to before me this 12th day of January, 19 96.

Notary Public _____

Date Commission Expires 1-26-97

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

Operator Name Cabot Oil & Gas Corporation Lease Name Johnson Well # 5-17

East County Seward

Sec. 17 Twp. 32S Rge. 33 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.)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No (Submit Copy.)

List All E.Logs Run:

Dual Induction Laterolog
Spectral Density Dual Spaced Neutron II Log
Microlog

| Name | Top | Datum |
|---------------|------|-------|
| Herrington | 2472 | |
| Krider | 2500 | |
| Winfield | 2583 | |
| Ft. Riley | 2632 | |
| Council Grove | 2786 | |
| B/Heebner | 4016 | |
| Toronto | 4024 | |
| Lansing | 4134 | |
| Checkerboard | 4468 | |
| Marmaton | 4776 | |
| Cherokee | 4952 | |
| Atoka | 5188 | |
| Morrow | 5323 | |
| Chester | 5436 | |
| St. Gen | 5585 | |
| St. Louis | 5688 | |

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" | 25# | 1525 | Midcon Lite Prem Plus | 380 340 125 | 2% CaCl + 1/2#/sk flocele |
| Production | 7-7/8" | 5-1/2" | 14.0# & 15.5# | 5829.63 | 50/50 POZ "H" | 135 | 2% gel, 10% salt, 0.2% CD-31, 0.2% AF-11, 12 1/2#/sk gilsonite |

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 |
|----------------|--|--|---------|
| 2 | St. Louis 5726-5740, 5694-5718 | Acidize w/ 1000 gal 15% NE/FE HCl | 5650-57 |
| 1 | St. Louis 5650-5660 | Frac w/ 9500 gal 20% NE/FE HCl acid | |

TUBING RECORD Size 2-3/8" Set At 5776.45' Packer At _____ Liner Run Yes No

Date of First, Resumed Production, SWD or Inj. 12-10-95 Producing Method Flowing Pumping Gas Lift Other (Explain)

| Estimated Production Per 24 Hours | Oil Bbls. | Gas Mcf | Water Bbls. | Gas-Oil Ratio | Gravity |
|-----------------------------------|-----------|---------|-------------|---------------|---------|
| | 43 | 5 | 127 | 116 scf/bbl | N/A |

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

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval 5650-5740