

FORM MUST BE TYPED

SIDE ONE

31-32-40W
COPY

John

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

KCC

MAY 20

Operator: License # 3871

Name: Hugoton Energy Company

Address 229 E. William, Suite 500

City/State/Zip Wichita, KS 67202

Purchaser: NA

Operator Contact Person: Jim Gowens

Phone (316) 262-1522

Contractor: Name: MURFIN DRILLING COMPANY

License: 30606

Wellsite Geologist: KARL OSTERBUHR

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 PBDT

Commingled Docket No. _____

Dual Completion Docket No. _____

Other (SWD or Inj?) Docket No. _____

03-26-93 04-08-93 04-25-93

Spud Date Date Reached TD Completion Date

API NO. 15- 129-21185

County MORTON

E2 - NE - _____ Sec. 31 Twp. 32S Rge. 40 XX W

1320 Feet from SYN (circle one) Line of Section

660 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 LEMON TRUST Well # 1-31

Field Name WILDCAT

Producing Formation MORROW

Elevation: Ground 3377' KB 3384'

Total Depth 5915' PBDT 5700'

Amount of Surface Pipe Set and Cemented at 1626 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 5-28-93
(Data must be collected from the Reserve Pit)

Chloride content 1100 ppm Fluid volume 200 bbls

Dewatering method used _____

Location of fluid disposal if hauled offsite: _____

Operator Name RELEASED

Lease Name _____ License No. _____

APR 1 1996
Quarter Sec. Twp. S Rng. E/W

County 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 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 [Signature]

Title Jim Gowens, Exploration Manager Date 5-20-93

Subscribed and sworn to before me this 20 day of May, 1993.

Notary Public Sarah E. Reynolds

Date Commission Expires 9-22-96

K.C.C. OFFICE USE ONLY	
F	<input checked="" type="checkbox"/> Letter of Confidentiality Attached
C	<input checked="" type="checkbox"/> Wireline Log Received
C	<input checked="" type="checkbox"/> Geologist Report Received
STATE CORPORATION COMMISSION	
Distribution	
<input checked="" type="checkbox"/> KCC	<input checked="" type="checkbox"/> SWD/Rep
<input checked="" type="checkbox"/> KGS	<input checked="" type="checkbox"/> NGPA
MAY 21 1993	
Plus _____ Other (Specify)	
CONSERVATION DIVISION	
Wichita, Kansas	

SARAH E. REYNOLDS
NOTARY PUBLIC
STATE OF KANSAS
My Appl. Exp. 7/22/96

Form ACO-1 (7-91)

W 04 - 58 - 1E

SIDE TWO

Operator Name Hugoton Energy Corporation Lease Name LEMON TRUST Well # 1-31

Sec. 31 Twp. 32S Rge. 40 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 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:

DIL, CND, MICRO

Name	Top	Datum
HEEBNER	3735	-351
MARMATON	4395	-1011
MORROW SH	5105	-1721
MORROW E SAND	5295	-1911
MORROW F SAND	5422	-2038
KEYES	5568	-2184
CHESTER	5646	-2262
ST LOUIS POR	5865	-2481

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	25#	1626	LITE	725	
PRODUCTION	7 7/8	4 1/2	10.5	5750	CLASS C	150	

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	5325-5333		
2	5304-5310	ACIDIZE W/500 GAL. 15% MSR	

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		2 3/8	5310	NA			
Date of First, Resumed Production, SWD or Inj. SI				Producing Method <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	Bbls.	Gas	Mcf	Water	Bbls.	Gas-Oil Ratio Gravity
	75		0		150		

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.) METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled 5304-5333 OA Other (Specify) _____