

STATE CORPORATION COMMISSION OF KANSAS  
OIL & GAS CONSERVATION DIVISION  
RECOMPLETION FORM  
ACO-2 AMENDMENT TO WELL HISTORY

API NO. 15- 153-20,156X-00-02  
County Rawlins  
Approx \_\_\_\_\_ East  
C SE SE Sec 4 Twp 1 Rge 33 X West

Operator: License # 5011  
Name Viking Resources  
Address 120 S. Market, Suite 518  
Wichita, KS 67202-3819  
City/State/Zip \_\_\_\_\_

440 Ft North from Southeast Corner of Section  
440 Ft West from Southeast Corner of Section  
(Note: Locate well in section plat below)

Purchaser Koch Oil Company

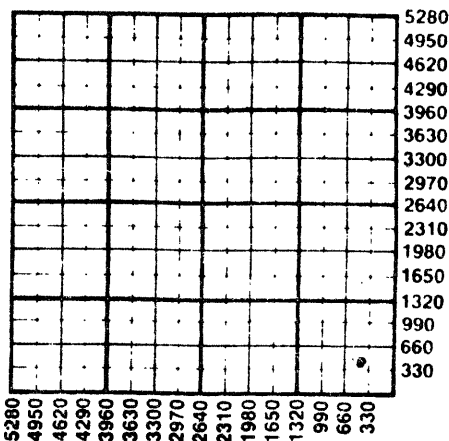
Lease Name Vap Well # 2  
Field Name Horinek West

Operator Contact Person Jim Devlin  
Phone (316) 262-2502

Name of New Formation \_\_\_\_\_

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

Elevation: Ground 2950 KB 2955  
Section Plat



Date of Original Completion: 12-9-82

DATE OF RECOMPLETION:  
8-15-88 8-21-88  
Commenced Completed

Designate Type of Recompletion/Workover:  
 Deepening  Delayed Completion  
 Plug Back  Re-perforation  
 Conversion to Injection/Disposal

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)  
8-26-88

Is recompleted production:  
 Commingled; Docket No. \_\_\_\_\_  
 Dual Completion; Docket No. \_\_\_\_\_  
 Other (Disposal or Injection)?

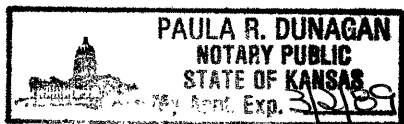
INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the recompletion of any well. Rules 82-3-107 and 82-3-141 apply. Information on side two of this form will be held confidential 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 any additional wireline logs and driller's time logs (not previously submitted) shall be attached with this form. Submit ACO-4 prior to or with this form for approval of commingling or dual completions. Submit OP-4 with all plugged wells. Submit OP-111 with all temporarily abandoned wells. NOTE: Conversion of wells to either disposal or injection must receive approval before use; submit form U-1.

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 James R. Devlin Title Operator Date 8-26-88

Subscribed and sworn to before me this 26th day of August 19 88

Notary Public Paula R. Dunagan Date Commission Expires 2 March 1989



RECEIVED  
STATE CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
Wichita, Kansas  
AUG 26 1988  
08-26-88

FORM ACO-2  
5/88

SIDE TWO

Operator Name Viking Resources Lease Name Vap Well # 2  
 Sec 4 Twp 1 Rge 33  East  West County Rawlins

RECOMPLETED FORMATION DESCRIPTION:

Log  Sample

Name	Top	Bottom
Lansing "J" zone	Old perms 4044 to be used for an injection well	4049

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth		Type of Cement	# Sacks Used	Type & Percent Additives
	Top	Bottom			
<input type="checkbox"/> Perforate	0	2150	60/40 poz, 6% gel	300	Salt 2% + flowseal
<input checked="" type="checkbox"/> Protect Casing					
<input type="checkbox"/> Plug Back TD					
<input type="checkbox"/> Plug Off Zone					

Shots Per Foot	PERFORATION RECORD Specify Footage of Each Interval Perforated	Acid, Fracture, Shof, Cement Squeeze Record (Amount and Kind of Material Used)
4	4044-4049 (old)	1500 gal 15% NE (old)

PBTD 4102 Plug Type Cement

TUBING RECORD:

Size 2-3/8 Set At 4020 Packer At 4020 Was Liner Run?  Y  X  N

Date of Resumed Production, Disposal or Injection - to be deteremined by KCC

Estimated Production Per 24 Hours 0 bbl/oil 0 bbl/water  
0 MCF gas 0 gas-oil ratio

