

15-147-20169-00-01

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

Operator: License # 4742
Name Texaco Producing Inc.
Address Box 2420
City/State/Zip Tulsa, Ok 74102

Purchaser Kaw Pipeline

Operator Contact Person T. C. Williams
Phone 316-792-2193

Designate Type of Original Completion
☐ New Well ☐ Re-Entry ☒ Workover

☒ Oil ☐ SWD ☐ Temp Abd
☐ Gas ☐ Inj ☐ Delayed Comp
☐ Dry ☐ Other (Core, Water Supply, etc.)

Date of Original Completion: 1-9-74

DATE OF RECOMPLETION:
3-23-89 4-15-89
Commenced Completed

Designate Type of Recompletion/Workover:
☐ Clean Out and test
☐ Deepening ☐ Delayed Completion
☐ Plug Back ☐ Re-perforation
☐ Conversion to Injection/Disposal

Is recompleted production:
☒ Commingled; Docket No. _____
☐ Dual Completion; Docket No. _____
☐ Other (Disposal or Injection)? _____

API NO. 15- 15147-20615-00-01

County Phillips
NW NE SW NW Sec 23 Twp 5S Rge 20 X East West

4950 Ft North from Southeast Corner of Section
3630 Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)

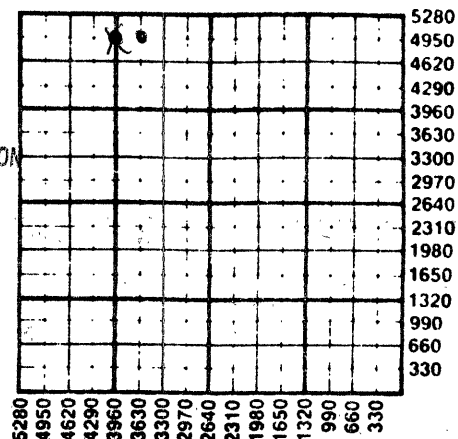
Lease Name B. O. Graham Well # 13

Field Name Hansen

Name of New Formation Arbuckle/Lans KC

Elevation: Ground 2143' KB 2148'

Section Plat



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)

6-19-89

X/4

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 CP-4 with all plugged wells. Submit CP-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 John K. Hamby Title Dist. Comm. Engineer Date 6/15/89

Subscribed and sworn to before me this 16th day of June 19 89

Notary Public Deborah M. Coburn Date Commission Expires 8-3-92

Operator Name Texaco Producing Inc. Lease Name B. O. Graham Well # 13

Sec 23 Twp 5S Rge 20 ☒ East ☐ West County Phillips

RECOMPLETED FORMATION DESCRIPTION:

 Log Sample

Name	Top	Bottom
Arbuckle	3501'	3574'
Lans KC	3244'	3412'

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth		Type of Cement	# Sacks Used	Type & Percent Additives
	Top	Bottom			
<input type="checkbox"/> Perforate					
<input type="checkbox"/> Protect Casing					
<input checked="" type="checkbox"/> Plug Back TD	3589	3606	Class	1	
<input type="checkbox"/> Plug Off Zone					

Shots Per Foot	PERFORATION RECORD	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)
	Specify Footage of Each Interval Perforated	
2	3566-3574	1500 gal 15% NEA
	Existing Perfs:	
	3244-3253; 3277-85;)
	3300-06; 3312-18;) 2200 gals 15% NEA
	3332-3338)

PBTD 3598 Plug Type CIBP

TUBING RECORD:

Size 2-3/8 Set At 3593 Packer At Was Liner Run? Y N

Date of Resumed Production, Disposal or Injection 4/15/89

Estimated Production Per 24 Hours 36 bbl/oil 242 bbl/water
0 MCF gas gas-oil ratio

