

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

Operator: License # 5663

Name: Hess Oil Company

Address P. O. Box 1009

City/State/Zip McPherson, KS 67460

Purchaser: N/A

Operator Contact Person: Bryan Hess

Phone (316) 241-4640 772-5015

Contractor: Name: Mallard JV, Inc.

License: 4958

Wellsite Geologist: James C. Hess

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD SLOW Temp. Abd.

Gas ENHR SIGW

Dry Other (Core, WSW, Expt., Cathodic, etc)

If Workover:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Deepening Re-perf. Conv. to Inj/SWD

Plug Back PBSD

Commingled Docket No. _____

Dual Completion Docket No. _____

Other (SWD or Inj?) Docket No. _____

10-2-95 10-9-95 10-9-95
Spud Date Date Reached TD Completion Date

API NO. 15- 179-21,077-00-00

County Sheridan

Approx E2 - W2 - NE Sec. 7 Twp. 6 Rge. 26 E W

1400 Feet from S(N) (circle one) Line of Section

1750 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 Stephenson Well # 1

Field Name _____

Producing Formation None

Elevation: Ground 2633' KB 2638'

Total Depth 3962' PBSD _____

Amount of Surface Pipe Set and Cemented at 229 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 D&A JK 11-13-96
(Data must be collected from the Reserve Pit) Alt 2

Chloride content 2,000 ppm Fluid volume 300 bbls

Dewatering method used Evaporation

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

_____ Quarter Sec. _____ Twp. _____ S Rng. _____ E/W

County _____ Docket No. _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, 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.

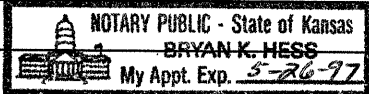
Signature Dick Hess

Title Dick Hess, Vice-President Date 11-30-95

Subscribed and sworn to before me this 11th day of November, 19 95.

Notary Public Bryan J. Hess

Date Commission Expires _____



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)

Operator Name Hess Oil Company Lease Name White STEPHENSON Well # 1
 Sec. 7 Twp. 6 Rge. 26 East West
 County Sheridan

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: Radiation Guard

<input type="checkbox"/> Log	Formation (Top), Depth and Datums	<input checked="" type="checkbox"/> Sample Datum
	Name Top	
	Anhydrite 2264'	(+374)
	Base Anhydrite 2297'	(+341)
	Neva 3094'	(-456)
	Wabaunsee 3195'	(-557)
	Tarkio 3385'	(-747)
	Howard 3474'	(-836)
	Topeka 3536'	(-898)
	Heebner 3687'	(-1049)
	Toronto 3715'	(-1077)
	Lansing 3730'	(-1092)
	Stark Shale 3838'	(-1200)
	Base Kansas City 3938'	(-1300)
	RTD 3960'	(-1322)
	LTD 3962'	(-1324)

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#	229'	60/40 Pozmix	140	2% gel, 3% cc

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

TUBING RECORD Size Set At Packer At Liner Run Yes No

Date of First, Resumed Production, SWD or Inj. D&A Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours Oil N/A Bbls. Gas N/A Mcf Water N/A Bbls. Gas-Oil Ratio Gravity

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

ORIGINAL

HESS OIL COMPANY

P.O. BOX 1009
McPHERSON, KANSAS 67460-1009
(316) 241-4640

ACO-1 Completion Form Attachment

STEPHENSON #1

Approx. E2 W2 NE, Section 7-6-26W, Sheridan County, KS
API #15-179-21,077-00-00

DST #1 Interval: 3740'-3845'
Times: 60-45-30-45
Initial Flow: Weak blow, building to 2"
Final Flow: Very weak surface blow after 28 min
Recovery: 240' Mud
Pressures: IH 2078#, IF 86-121#, ISI 612#, FF 148-148#, FSI 604#, FH 1993#
Temp: 110F

DST #2 Interval: 3860'-3950'
Times: 30-30-0-0
Initial Flow: Weak blow, died in 10 min
Recovery: 10' Mud
Pressures: IH 2058#, IF 30-30#, ISI 678#, FF ---, FSI ---, FH 1008#
Temp: 112F

RECEIVED
STATE CORPORATION COMMISSION
DEC -5 1995
CONSERVATION DIVISION
Wichita, Kansas

ALLIED CEMENTING CO., INC. 3350

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT: _____

DATE <u>10-2-76</u>	SEC <u>7</u>	TWP <u>6</u>	RANGE <u>26</u>	CALLED OUT <u>3:30 PM</u>	ON LOCATION <u>10:00 AM</u>	JOB START	JOB FINISH <u>1:45 AM</u>
LEASE _____		WELL # <u>1</u>		LOCATION <u>1/4 NW 13N 31W 26E</u>		COUNTY <u>Sh</u>	STATE <u>Ka</u>

OLD OR (NEW) (Circle one)

CONTRACTOR <u>Mallard Dr/g</u>	OWNER <u>[Signature]</u>
TYPE OF JOB <u>SURFACE</u>	CEMENT
HOLE SIZE <u>12 1/2</u> T.D. <u>230'</u>	
CASING SIZE _____ DEPTH _____	
TUBING SIZE _____ DEPTH _____	
DRILL PIPE <u>4 1/2</u> DEPTH _____	
TOOL _____ DEPTH _____	
PRES. MAX _____ MINIMUM _____	
MEAS. LINE _____ SHOE JOINT _____	
CEMENT LEFT IN CSG. <u>15</u>	
PERFS. _____	

AMOUNT ORDERED 140 lbs 60/40 3% CC 2% Gel

COMMON _____ @ _____
POZMIX _____ @ _____
GEL _____ @ _____
CHLORIDE _____ @ _____
_____ @ _____
_____ @ _____
_____ @ _____
_____ @ _____
_____ @ _____
HANDLING _____ @ _____
MILEAGE _____ @ _____

ORIGINAL

EQUIPMENT

PUMP TRUCK CEMENTER <u>Bill</u>
<u>197</u> HELPER <u>Will</u>
BULK TRUCK
_____ DRIVER _____
BULK TRUCK
<u>213</u> DRIVER <u>[Signature]</u>

TOTAL _____

REMARKS:

SERVICE

Run 5' Sta of PS det C 224
Cement w/ 140 lb 60/40 3-2
pump plug w/ 13' bbls water
Cement did Cip

DEPTH OF JOB <u>229</u>	
PUMP TRUCK CHARGE _____	
EXTRA FOOTAGE _____ @ _____	
MILEAGE _____ @ _____	
PLUG <u>1-wood 8.5</u> @ _____	
_____ @ _____	
_____ @ _____	

TOTAL _____

CHARGE TO: Hess Oil Co
STREET P.O. Box 1009
CITY McPherson STATE Ka ZIP 67460

FLOAT EQUIPMENT

_____ @ _____
_____ @ _____
_____ @ _____
_____ @ _____
_____ @ _____

TOTAL _____

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____
TOTAL CHARGE _____
DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE [Signature]

Phone 913-483-2627, Russell, Kansas
 Phone 316-793-5861, Great Bend, Kansas

ORIGINAL

Phone Plainville 913-434-2812
 Phone Ness City 913-798-3843

ALLIED CEMENTING CO., INC.

Home Office P. O. Box 31

Russell, Kansas 67665

4320

New

Date	10-9-95	Sec.	7	Twp.	6	Range	26	Called Out		On Location	10:20pm	Job Start	11:00pm	Finish	12:30AM
Lease	Stephenson	Well No.	1	Location	Studley 9N5W			County	Shawnee	State	KS				
Contractor	Mallard JV Inc														
Type Job	plug														
Hole Size	4 1/8		T.D.	3960											
Csg.			Depth												
Tbg. Size			Depth												
Drill Pipe			Depth												
Tool			Depth												
Cement Left in Csg.			Shoe Joint												
Press Max.			Minimum												
Meas Line			Displace												
Perf.															

Owner *4N 4W 4S*

To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.

Charge To *Hess Oil Co.*

Street

City

State

The above was done to satisfaction and supervision of owner agent or contractor.

Purchase Order No. *[Signature]*

CEMENT

EQUIPMENT

No.	Cementer	<i>Dave</i>
Pumptrk 153	Helper	<i>Mark</i>
No.	Cementer	
Pumptrk	Helper	
	Driver	<i>Steve</i>
Bulktrk 160	Driver	

Amount Ordered *300 @ 6/90 4 1/8 Houseal*

Consisting of

Common

Poz. Mix

Gel.

Chloride

Quickset

Sales Tax

Handling

Mileage

Sub Total

Total

RECEIVED
 STATE CORPORATION COMMISSION
 DEC 24 1995
 CONSTRUCTION DIVISION

DEPTH of Job

Reference:	<i>Pump trk chg 2 3/8 Per wire plug.</i>	
		Sub Total
		Tax
		Total

Remarks:

25 sk @ 2270

100 @ 1440

40 @ 270

10 @ 40 w/ plug

15 Ratihole 10 mouse hole