

RELEASED

ORIGINAL

JUL 18

SIDE ONE

15-163-30213000-01

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

API NO. 15- None

County Rooks

W/2 SW SE Sec. 15 Twp. 7 Rge. 19 XX East
4620 FNL

1320' Ft. North from Southeast Corner of Section

2310 FEL
4620' Ft. West from Southeast Corner of Section

(NOTE: Locate well in section plat below.)

Lease Name Holsman Well # 2

Field Name Grover

Producing Formation L/KC

Elevation: Ground 1921 KB 1928

Operator: License # 9957

Name: Producers Equipment Sales

Address: Inc. Box 875

City/State/Zip: Hays, Kansas 67601

Purchaser: Farmland Industries

Operator Contact Person:
Phone: (913) 625-9045

Designate Type of Original Completion
XX New Well Re-Entry Workover

Date of Original Completion 8/20/66

Name of Original Operator Aylward drilling

Original Well Name Holsman A 2

Date of Recompletion:

5/20/91 5/24/91
Commenced Completed

Re-entry Workover

Designate Type of Recompletion/Workover:
XX Oil SWD Temp. Abd.
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply, etc.)

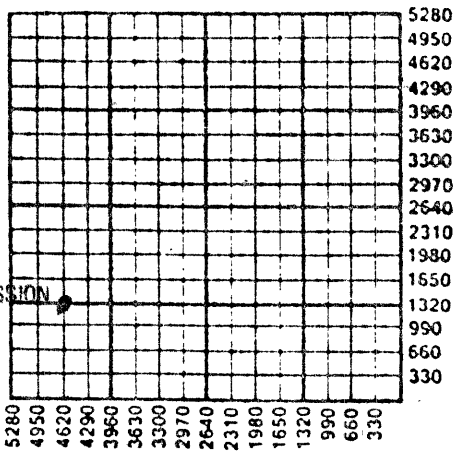
 Deepening XX Re-perforation
 Plug Back PBTD
 Conversion to Injection/Disposal

Is recompleted production:

XX Commingled Docket No.
 Dual Completion Docket No.
 Other (Disposal or Injection?)
Docket No.

RECEIVED

7/19/91
JUL 19 1991



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)

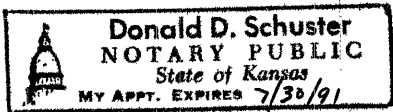
INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the recompletion of any well. Rules 82-3-107 and 82-3-141 apply. Information on side two of this form will be held confidential 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 or ACO-5 prior to or with this form for approval of commingling or dual completions. Submit CP-1 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 Steven L. Schuman Title President Date 7/18/91

Subscribed and sworn to before me this 18th day of July 19 91

Notary Public Donald D. Schuster Date Commission Expires 7/30/91



SIDE TWO

Operator Name Producers Equipment Sales Lease Name Holsman Well # 2

Sec. 15 Twp. 7 Rge. 19 East
 West

County _____ Rooks _____

RECOMPLETION FORMATION DESCRIPTION

Log Sample

Name	Top	Bottom
L/KC	3316'	3318'
L/KC	3253, 1/2'	3255, 1/2'
L/KC	3206'	3208'
L/KC	3120'	3124

ADDITIONAL CEMENTING/SQUEEZE RECORD

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

Shots Per Foot	PERFORATION RECORD Specify Footage of Each Interval Perforated		Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)
	Top	Bottom	
5	3316-18	2 holes per.	500 gal 15%
5	3253, 1/2-55, 1/2	2 holes per	500 gal 15%
5	3206-08	2 holes per	500 gal 15%
9	3120-24	4 holes per	1500 Gal 15%

PBTD none Plug Type none

TUBING RECORD

Size 2 3/8 Set At 3340' Packer At none Was Liner Run Y no N

Date of Resumed Production, Disposal or Injection _____

Estimated Production Per 24 Hours Oil 5 Bbls. Water 50 Bbls. _____ Gas-Oil-Ratio
 Gas _____ Mcf

Disposition of Gas:

Vented Sold Used on Lease (if vented, submit ACO-18.)