ORIGINAL SIDE ONE

CORFIDENTIAL IDE ONE APR 0 9 1992 4-9-92 API NO. 15- 065-22,358 FOOD FROM CONFIDENTIAL

STATE CORPORATION COMMISSION OF KANSAS

OIL & GAS CONSERVATION DIVISION RECOMPLETION FORM	county Graham
ACO-2 AMENDMENT TO WELL HISTORY	SE NE SE sec. 1 Twp. 7S Rge 21 X West
Operator: License #	1650 Ft. North from Southeast Corner of Section
Name: Ritchie Exploration, Inc.	330 Ft. West from Southeast Corner of Section (NOTE: Locate well in section plat below.)
Address: 125 N. Market, Suite 1000	
City/State/Zip: Wichita, Ks 67202	Lease Name Trexier Well # 1
Purchaser:	Field Name Lesage Northwest
Koch Oil Company	Producing Formation
Operator Contact Person: Phone:(_316)267-4375	Elevation: Ground 2158 KB 2163
Designate T ype of Original Completion New Well Re-Entry Workover	5280 4950 4620
Date of Original Completion $5-15-87$	4290 3960
Name of Original Operator Ritchie Exploration, Inc	3630
Original Well NameTrexler #1	2970 2640 N
Date of Recompletion:	2310
$ \frac{11/05/90}{\text{Commenced}} \qquad \frac{11/06/90}{\text{Completed}} \qquad \frac{\text{RECE}}{2} $	VED 1650 1
Completed Completed	N COMMISSION 1320
Re-entry Workover MAR 13	1991
Designate Type of Recompletion/Workover: X oil SWD Temp. Abd. Wichita k	33000 132000 13200
X Oil SWD Temp. Abd. CONSERVATIO Gas Inj Delayed Comp. Vichita, K Dry Other (Core, Water Supply, etc.)	Ansas
	F Letter of Confidentiality Attached
Deepening $\frac{X}{X}$ Re-perforation Plug Back $\frac{3531}{1}$ PBTD	C Wireline Log Received C Drillers Timelog Received
Conversion to Injection/Disposal	
Is recompleted production:	Distribution KCC SWD/RepNGPA
Commingled Docket No.	KGS Plug Other (Specify)
Dual Completion Docket No.	
Other (Disposal or Injection?) Docket No	
wireline logs and driller's time logs (not previously submit prior to or with this form for approval of commingling or cCP-111 with all temporarily abandoned wells. NOTE: Convapproval before use; submit form U-1.	s of the recompletion of any well. Rules 82-3-107 and 82-3-141 confidential for a period of 12 months if requested in writing entiality in excess of 12 months. One copy of any additional itted) shall be attached with this form. Submit ACO-4 or ACO-5 dual completions. Submit CP-1 with all plugged wells. Submit version of wells to either disposal or injection must receive
with and the statements herein are complete and correct to t	
Signature Titl	
Subscribed and sworn to before me this 12th day of	March 19 91

n Expires <u>9/20/94</u>

DANNA McKAIG NOTARY PUBLIC STATE OF KANSAS

-My Appt. Exp.

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SIDE THO

rator Name		East	Lease Name	TT EXTER	Well #1
. <u>1</u> тыр. <u>7S</u>	nee 21	West	CountyG	raham	
		RECOMPLET	ION FORMATION DES	SCRIPTION	
		Ì	Log Sam	ple	
<u>Name</u>				Тор	<u>Bottom</u>
Toronto				3381'	3394'
		ADDITIONAL C	EMENTING/SQUEEZE	RECORD	
vurpose:	Depth Top Bottom	Type of Cement	# Sacks Used	туре а	and Percent Additives
Protect Casing Plug Back TD Plug Off Zone			·		
•					
Shots Per Foot		PERFORATION RECOR		Acid, Fractur (Amount a	re, Shot, Cement Squeeze Record and Kind of Material Used)
3	3382.31-33	384.3'		None	
вто3531'	Pl	ug Type <u>CIBP</u>			
			TUBING RECORD	W	as Liner Run Y
ize2 3/8"	Set At3	504'	TUBING RECORD		as Liner Run Y
Size 2 3/8"	Set At 3	504'	TUBING RECORD Packer At 11/06/90 Bbls. Water		