

COPY

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

Operator License # 06417  
Name: Union Pacific Resources Company  
Address: P. O. Box 7  
M.S. 2901  
City/State/Zip Fort Worth, Texas 76101-0007

Purchaser: CIG  
Operator Contact Person: Ann Weatherford  
Phone: (817)321-7578  
Contractor Name: Post & Martin  
License: 8438  
Wellsite Geologist: \_\_\_\_\_

Designate Type of Completion  
 New Well  Re-Entry  Workover  
 Oil  SWD  SLOW  Temp. Abd  
 Gas  ENHR  SIGW  
 Dry  Other (Core, WSW, Expl, Cathodic, etc)

If Workover:  
Operator: Union Pacific Resources Company  
Well Name: Hatfield #3-15  
Comp. Date: 11-1-88 Old Total Depth 5300  
 Deepening  Re-perf.  Conv. to Inj/SWD  
 Plug Back  PBTB 3072  
 Commingled  Docket No. \_\_\_\_\_  
 Dual Completion  Docket No. \_\_\_\_\_  
 Other (SWD or Inj?)  Docket No. \_\_\_\_\_

6-1-89 6-26-89  
Spud Date Date Reached TD Completion Date

API NO. 15-055-20, 821-0001  
County Finney  
80' E OF  
S2 SW SE  
KCC WITH  
Sec. 15 Twp. 26S Rge. 34  E  W

330 Feet from S / N (circle one) Line of Section  
3380 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 Hatfield Well # 3-15  
Field Name Hugoton  
Producing Formation Chase  
Elevation: Ground 2950 KB 2960  
Total Depth: 5300 PBTB 3675  
Amount of Surface Pipe Set and Cemented at 928  
Multiple State Cementing Collar Used  Yes  No  
If yes, show depth set \_\_\_\_\_ Feet

If Alternate II completion, cement circulated from \_\_\_\_\_ 924  
feet depth to Surface w/ 425 924 sx cmt.

As I want LP-13-06 RECEIVED  
Re-work, 12-21-99 etc.  
Drilling Fluid Management Plan  
(Data must be collected from the Reserve Pit) SEP 30 1999

Chloride content \_\_\_\_\_ ppm Fluid volume \_\_\_\_\_ bbls  
Dewatering method used \_\_\_\_\_  
CONSERVATION DIVISION  
WICHITA, KS

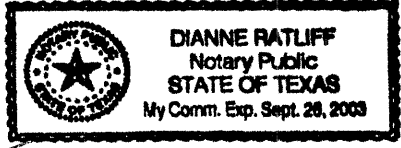
Location of fluid disposal if hauled offsite:  
Operator Name \_\_\_\_\_  
Lease Name \_\_\_\_\_ License No. \_\_\_\_\_  
Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ Rng. \_\_\_\_\_ E/W  
County \_\_\_\_\_ Docket No. \_\_\_\_\_

of rework start.  
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.

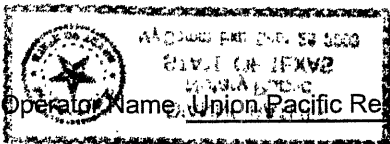
All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature Ann Weatherford Ann Weatherford  
Title Regulatory Analyst Date 29th  
Subscribed and sworn to before me this 29th day of Sept. 1999

Notary Public Dianne Ratliff  
Date Commission Expires 9-26-2003



K.C.C. OFFICE USE ONLY  
F NO Letter of Confidentiality Attached  
C NO Wireline Log Received  
C NO Geologist Report Received  
Distribution  
 KCC  SWD/Rep  NGPA  
 KGS  Plug  Other (Specify) Jerry



SIDE TWO

Operator Name Union Pacific Resources Company  
 Sec. 15 Twp 26S Rge 34  East  West

Lease Name Hatfield Well # 3-15  
 County Finney

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, bottomhole temperature, fluid recovery, and flow rates if gas to surface during test. Attach extra sheet if more space if needed. Attach copy of log.

Drill Stem Tests Taken (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Formation (Top), Depth and Datums	
Cores Taken	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top Bottom Datum
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Chase	2503 Atoka 4814
List All E.Logs Run: <i>Z-Densilog, Gamma Ray Neutron.</i>		Council Grove	2780 Morrow 4866
		Heebner	3846 Mississi 4980
		Toronto	3860
		Lansing/KC	3894
		Marmaton	4466
		Pawnee	4549
		Ft. Scott	4591
		Cherokee	4607

CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing	Weight Lbs/Ft	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	12 1/4"	8 5/8	24#	924	Commons	425	2% CACL 2
Production	7 7/8"	5 1/2	14.5#	3134	50:50 Poz	465	1# 1sx Tuff

ADDITIONAL CEMENTING/SQUEEZE RECORD					
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives	
<input checked="" 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	Acid, Fracture, Shot, Cement Squeeze Record			
	Specify Footage of Each Interval Perforated	(Amount and kind of Material Used)	Depth		
2	Chase 2670-2690, 2630-2652, 2568-2586, 2532-2548, 2508-2526 <i>CIBP-3072</i>	Acid: 1500 gal 15% HCl Frac: 70 quality foam at 14 BPM Acid: 2000 gal 71/2% HCL Frac: 225,000 12/20 Brady Sand & 100,000 gal mini-max gel			
TUBING RECORD		Liner Run	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	Size 2 3/8" Set At 2500 Packer At				
Date of First, Resumed Production, SWD or Inj.		Producing Method			
<i>10-31-89</i>		<input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Established Production Per 24 hours	Oil Bbls	Gas Mcf	Water Bbls	Gas-Oil Ratio	Gravity
	0	1433 CP 121.6#			

Disposition of Gas:  Vented  Sold  Used on Lease  Open Hole  Perf  Dually Comp.  Commingled

METHOD OF COMPLETION: \_\_\_\_\_ Production Interval: \_\_\_\_\_