## SIDE ONE

API NO. 15- 065-21,987 0001

STATE CORPORATION COMMISSION OF KANSAS

OIL & GAS CONSERVATION DIVISION RECOMPLETION FORM	County Graham
ACO-2 AMENDMENT TO WELL HISTORY	East
7 10	SE SE NW Sec. 17 Twp. 9S Rge. 21 X West
Operator: License # 5565 ZAP	$\frac{2416}{2970}$ Ft. North from Southeast Corner of Section
Name: <u>National Cooperative Refinery</u> Association Address: <u>6000 W. 10th</u>	Ft. West from Southeast Corner of Section  (NOTE: Locate well in section plat below.)
City/State/Zip: Great Bend, KS 67530	Lease Name <u>Cooley B</u> Well # <u>14</u> Field Name <u>Morel</u>
Purchaser: Mobil	Producing Formation
Operator Contact Person: Steve Brackeen Phone:( <u>316</u> ) 793-7824	Elevation: Ground <u>2267</u> KB <u>2272</u>
Designate Type of Original Completion $X$ New Well $X$ Re-Entry $X$ Workover	5280 4950 4600
Date of Original Completion 6-21-84	4620 4290 3960
Name of Original OperatorFina	3530 3300
Original Well Name <u>Cooley B-14</u>	2970 2640
Date of Recompletion:	2310
4-24-90 5-01-90 Completed	1650
Re-entry Workover X	990
Re-entry — workover —	330
Conversion to Injection/Disposal CONSERVA	CEIVED  RATION COMMISSION  K.C.C. OFFICE USE ONLY Letter of Confidentiality Attached Wireline Log Received C Drillers Timelog Received  Distribution KCC SWD/Rep NGPA KGS Plug Other (Specify)
prior to or with this form for approval of commingling or c	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 on ACO-5:
and the sabrements herein are complete and correct to t	lgated to regulate the oil and gas industry have been fully complied the best of my knowledge.
m i i i i	le District Foreman Date 120-90
subscribed and sworn to before me this 2040 day of	19 <u>90</u>
lotary Public <u>Khonda McKenzu</u>	Date Commission Expires 7-/8-94
	NOTARY PUBLIC-STATE OF KANSAS  RHONDA MCKENZIE  My Appt. Exp. 18-94

7/89

## SIDE TWO

perator Name <u>Na</u>	tional Cooper	ative Refine	<u>ry</u> Lease Name	Cooley B	Well # _ 14
As: c. <u>17</u> Twp. <u>9</u>	sociation S Rge. 21	East West	County	Graham	
		RECOMPLE	TION FORMATION D	ESCRIPTION	
			Log Sa	mple	
<u>Nam</u>	<u>e</u>		10g - 36	<u>Top</u>	Bottom
LKC "B'	11	•		251A	2514
LKC "K"				35 <u>10</u> 36 <u>5</u> 6	3514 3659
	, , , , , , , , , , , , , , , , , , ,	ADDITIONAL C	EMENTING/SQUEEZE	RECORD	
rpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and	Percent Additives
_ Perforate _ Protect Casing					
_ Plug Back TD _ Plug Off Zone					
•					
Shots Per Foot	P Specify Footage o	<b>ERFORATION RECORD</b> f Each Interval P	) Perforated	Acid, Fracture, S	Shot, Cement Squeeze Record (ind of Material Used)
4	3656-3659	ę		4½ BBL-15% aci	
4	3510-3514			250 GAL-15% ac	
3720	Plug	Type CIBP			
o <u>3720</u>	Plu	Type <u>CIBP</u>	TUBING RECORD		
				Was Li	ner Run y X
2 7/8	Set At36	66'	Packer At	Was Li	ner Run YX
2 7/8 of Resumed Produ	Set At36	66'	Packer At	5-01-90	
2 7/8 of Resumed Produ	Set At36 uction, Disposal or Per 24 Hours Oi	66'	Packer At Bbls. Water _	5-01-90	

INVOICE

HALLIBURTON LOGGING SERVICES,INC. A Halliburton Company HOUSTON, TEXAS 77242-2800

P.O. BOX 351046 DALLAS, TX 75395-1046

INVOICE NO.	* DATE
	04/27/1990

	WELL LEASE NO.		WE	LL LOCATION	STATE	WEL	LOWNER	
COOLEY	B 14	C	GRAHAM		KS	SAME		;
SEA	RVICE LOCATION	CONTRACT	OR		JOB PURPOSE		TICKET	DATE
GREAT B	SEND	i		PERFORATI	(NG		04/27	/1990
ACCT. NO	CUSTOMER AG	<u>ient</u>	VENDOR NO.	CUST	OMER P.O. NUMBER	SHIPPEC	) VIA	FILE NO.
622920	TOM BERGIN					COMPANY	TRUÇK	94342

NATIONAL COOPERATIVE REFINERY ASSOCIATION P. O. BOX 1404 MC PHERSON, KS 67460-1404

DIRECT CORRESPONDENCE TO: HALLIBURTON LOGGING SERVICES LIBERTY TOWER, SUITE 1540 OKLAHOMA CITY, OK 73102-8603

PRICE REF. NO.	DESCRIPTION	QUANTITY U	J/M UNIT PRICE	AMOUNT
	A - HLS LAND			
750-500	SERVICE CHARGE - CASED HOLE	1	EA 865.00	865.00 *
754-800	MSG GAMMA COLLAR CBL	3766 F	FT .42	1,581.72 *
754-801	MSG GAMMA COLLAR CBL OPER	916 F	FT .42	840.00MN*
757-008	PLUGS-SPEED-E-LINE, THRIFTEE	3720 E	FT . 24	892.80
757-012	PLUGS-SPEED-E-LINE OR THRIFTEE	1	IN 670,00	670.00
757-300	PERF CASING GUNS PREMIUM CHG	3659 F	960.00	960.00 *
757-302	PERF CASING GUNS PREMIUM CHG	3514 E		480.00 *
	,		,	:
	INVOICE SUBTOTAL		,	6,289.52
	DISCOUNT-(BID) INVOICE BID AMOUNT			3,197.52-
. '	THAOTOR BIR WWORM!			3,072.00
	*-KANSAS STATE SALES	ጥልህ		86.57
·	*-BARTON COUNTY SALE			20.38
			·	our many west year have many copie and their septy even
,	STATE	RECEIVED	·	
		CORDODATION TOWNS	ION	
	l ,	JUL 2 4 1990		
	,	nor e a 1880		
	·	MNSDILLI.		` `
		Wichita, Kansas 5		
		Talisas 5	8-170	
	·	AFE * 1	-0-162	
-	•	1 3 , 40-		
			·	,
				,
	INVOICE TOTAL - PLEASE PAY THI	== TNUOMA E	- Tag - Cag	\$3,198.95

INVOICE

NATIONAL COOPERATIVE

REFINERY ASSOCIATION

GREAT BEND, KS 67530

6000 W. 10TH

REMIT TO:

## P.O. BOX 951046

INVOICE NO.

DALLAS, TX 75395-1046

## HALLIBURTON SERVICES

			A Halliburton Co	mpany				1	•
***							910606	04/3	0/1990
1,000	WELL LEASE NO./PLANT	NAME	WELL/P	LANT LOC	ATION	STATE	WELL	PLANT OWNE	<b>3</b>
		`		,				( , )	
OOLEY	B-14	,	GRAHAM			KS	SAME	,	
SEI	RVICE LOCATION	CONTR	ACTOR		JOB PURP	OSE	18 1	TICKET	DATE
		·		,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, was the	;		. ,
AYS		HEMBREE		ACID	IZE FORMAT	ION		04/3	0/1990
ACCT, NO.	CUSTOMER A	GENT	VENDOR NO.		CUSTOMER P.O.	NUMBER	SHIPPE	D VIA	FILE NO.
22920	TOM BERGIN						COMPANY	TRUCK	94295
, , , , , , , , , , , , , , , , , , ,	Ş	,		***	,			14	

DIRECT CORRESPONDENCE TO:

SUITE 600 COLORADO DERBY BUILDING WICHITA, KS 67202-0000

PRICE REF. NO.	DESCRIPTION QUANTITY	U/M UNIT PRICE	AMOUNT
RICING ARI 200-006		MI 2.20	99.00
200-024	PUMPING SERVICE FIRST 4 HRS	PMP 472.00 EA	472.00
201-004	HYDROCHLORIC ACID	X .51	255.00
210-011 218-537 218-505	HAI-85 1/2 3N 2 PEN - 88 1	GAL 39.00 GAL 21.50 GAL 41.00	19.50 43.00 41.00
# · · ·	X INVOICE SUBTOTAL		929.50
	DISCOUNT-(BID) INVOICE BID AMOUNT		185.90- 743.60
	*-kansas state sales tax *-hays city sales tax RECEIVED		19.42
;	STATE CONFORMATION COMMISSION		
	CONSERVATION UNATION Wichita, Kansas		
	7/8 260° 5-8-90 5-8-90 162		
	AFE#1-0-162		30,70
. , *	INVOICE TOTAL - PLEASE PAY THIS AMOUNT ===		\$765.31

INVOICES PAYABLE NET BY THE 20TH OF THE FOLLOWING MONTH AFTER DATE OF INVOICE UPON CUSTOMER'S DEFAULT IN PAYMENT OF CUSTOMER'S ACCOUNT BY THE LAST DAY OF THE MONTH FOLLOWING THE MONTH IN WHICH THE INVOICE IS DATED, CUSTOMER AGREES TO PAY INTEREST THEREON AFTER DEFAULT AT THE HIGHEST LAWFUL CONTRACT RATE APPLICABLE BUT NEVER TO EXCEED 18% PER ANNUM. IN THE EVENT IT BECOMES NECESSARY TO EMPLOY AN ATTORNEY TO ENFORCE COLLECTION OF SAID ACCOUNT, CUSTOMER AGREES TO PAY ALL CETTION COSTS AND ATTORNEY FEES IN THE AMOUNT OF THE IMPAIR ACCOUNT.

