

ORIGINAL

SIDE ONE

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

Operator: License # 4952
Name: Starr F. Schlobohm
Address: P. O. Box 184
City/State/Zip: Durham, NH 03824-0184
Purchaser: NCRA Lease No. 17751

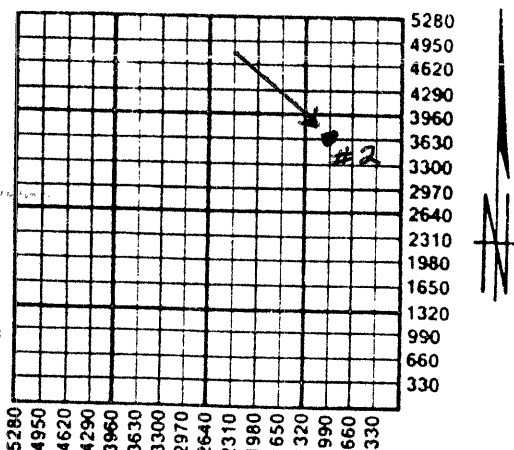
Operator Contact Person:
Phone: (913) 483-5255 - Mobile
(913) 483-6116 - Home
Designate Type of Original Completion
 New Well Re-Entry Workover
Date of Original Completion 3/7/85 6/14/85 KCC ZAP
Name of Original Operator Yost Oil Operations
Original Well Name DeYoung No. 2

Date of Recompletion: 8/9/90
May 24, 1990 June 21, 1990 AUG - 9 1990
Commenced Completed

Re-entry Workover
Designate Type of Recompletion/Workover:
 Oil SWD Temp. Abd.
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply, etc.)
 Deepening Re-perforation
 Plug Back PBTD
 Conversion to Injection/Disposal

Is recompleted production:
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (Disposal or Injection?) Docket No. _____

API NO. 15- 065-22,150000
County Graham
NW SE NE Sec. 35 Twp. 9S Rge. 21 XXX East West
3630 Ft. North from Southeast Corner of Section
990 Ft. West from Southeast Corner of Section
(NOTE: Locate well in section plat below.)
Lease Name DeYoung Well # 2
Field Name Cooper North
Producing Formation Lansing/Kansas City
Elevation: Ground 2284 KB 2289



K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Drillers Timelog Received
Distribution
 KCC SWD/Rep NPGA
 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 Starr F. Schlobohm Title Owner/Operator Date August 6, 1990
Subscribed and sworn to before me this 6th day of August 19 90
Notary Public Jane Olson Santos Date Commission Expires _____ MY COMMISSION EXPIRES APRIL 27, 1995

SIDE TWO

Operator Name Starr F. Schlobohm Lease Name DeYoung Well # 2
 Sec. 35 Twp. 9S Rge. 21 East West
 County Graham

RECOMPLETION FORMATION DESCRIPTION

Log Sample

Name	Top	Bottom
<u>Original 1985 Completion:</u>		
Lansing/Kansas City	3727'	3733'
<u>1990 Recompletion:</u>		
Lansing/Kansas City - K	3745'	3750'
Lansing/Kansas City	3708'	3712'
Lansing/Kansas City	3686'	3690'

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		Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)
	Specify Footage of Each Interval Perforated		
2 SPF	3745' - 3750'	(10 shots)	} ← { 250 gals. 15% Mud Acid; and 750 gals. 15% HCL Acid.
	3727' - 3733'	Old perms.	
2 SPF	3708' - 3712'	(8 shots)	} → 500 gals. 15% HCL Acid.
2 SPF	3686' - 3690'	(8 shots)	

PBTD _____ Plug Type _____

TUBING RECORD

Size 2 3/8" Set At 3745' Packer At _____ Was Liner Run Y X N

Date of Resumed Production, Disposal or Injection _____

Estimated Production Per 24 Hours Oil 3 Bbls. Water 32 Bbls. Gas-Oil-Ratio _____

Gas - 0 - Mcf

Disposition of Gas: Not applicable

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