

SIDE ONE

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

Operator: License # 5285

Name: The Dane G. Hansen Trust

Address: P. O. Box 187

City/State/Zip: Logan, Kansas 67646

Purchaser: Farmland Industries

Operator Contact Person:
Phone: (913) 689-4816

Designate Type of Original Completion
 New Well Re-Entry Workover

Date of Original Completion 1/30/91

Name of Original Operator _____

Original Well Name _____

Date of Recompletion: _____

Commenced 5/20/91 Completed 6/3/91

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 4180 PBD
 Conversion to Injection/Disposal

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

API NO. 15- 193-20,538-00-01

County Thomas

SW NE SW Sec. 28 Twp. 8 Rge. 32 East West

1650 Ft. North from Southeast Corner of Section

3630 Ft. West from Southeast Corner of Section

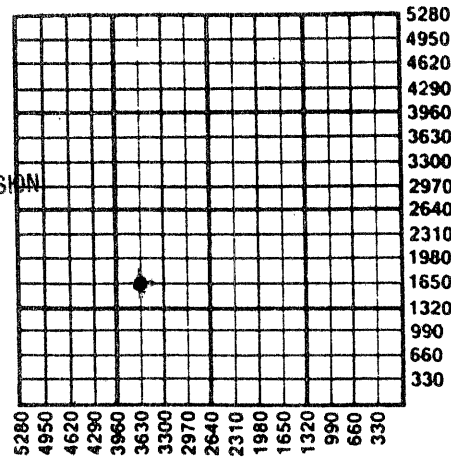
(NOTE: Locate well in section plat below.)

Lease Name Weyand Well # 2

Field Name North Randall

Producing Formation Lansing/KC

Elevation: Ground 3105 KB 3110



RECEIVED
STATE CORPORATION COMMISSION
7/15/91
CONSERVATION DIVISION
Wichita, Kansas

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 Dane G. Bales Title Manager Date 7/12/91

Subscribed and sworn to before me this 17 day of July 19 91

Notary Public Betty Jane Bittel Date Commission Expires 7/17/92
Betty Jane Bittel



SIDE TWO

Operator Name The Dane G. Hansen Trust Lease Name Weyand Well # 2

Sec. 28 Twp. 8 Rge. 32 East
 West County Thomas

RECOMPLETION FORMATION DESCRIPTION

Log Sample

Name Top Bottom

ADDITIONAL CEMENTING/SQUEEZE RECORD					
Purpose:	Depth		Type of Cement	# Sacks Used	Type and Percent Additives
	Top	Bottom			
<input 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 Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)
4	4072-74½	
4	4089-92	500 gal. 15% Reg.

PBTD 4180 Plug Type Cement

TUBING RECORD

Size 2 7/8" Set At 4147 Packer At 4085 Was Liner Run Y N

Date of Resumed Production, Disposal or Injection June 11, 1991

Estimated Production Per 24 Hours Oil 3 Bbls. Water 25 Bbls. Gas-Oil-Ratio
 Gas _____ Mcf

Disposition of Gas:

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

[Faint stamp or signature]