SIDE ONE

ORIGINAL API NO. 15- 193-20,410-00-01

STATE CORPORATION COMMISSION OF KANSAS	API NO. 15- 193-20,410-00-01
OIL & GAS CONSERVATION DIVISION RECOMPLETION FORM	County Thomas
ACO-2 AMENDMENT TO WELL HISTORY	SW SW SW Sec. 20 Twp. $10S$ Rge. 32 x West
Operator: License # 5558	
	4950 Ft. West from Southeast Corner of Section
Name: <u>Dawson-Markwell Expl. Co.</u> 3620 N. W. 58 Address:	(NOTE: Locate well in section plat below.)
	Lease Name Bell Well # 1
City/State/Zip: Okla. City, OK 73112	Field Name Riverford
Purchaser:	Producing Formation Lansing - Kansas City
	Elevation: Ground 3083' KB 3088'
Operator Contact Person: Phone: (405) 947-2587	Elevation: Ground Ko Ko
Designate Type of Original Completion X New Well Re-Entry Workover	5280 4950 4620
Date of Original Completion 6/20/86	4290 3960
Name of Original Operator Energy Expl., Inc.	3630 3300
Original Well Name Bell #1 STATE GORPORATE	G COMMISSION 2970 2640 2310
Date of Recompletion:	1 1000 I I I I I I I I I I I I I I I I I
$\frac{4/17/90}{4/20/90} \frac{4/20/90}{0} \frac{0}{12}$	1990
Commenced Completed CONSERVATION Wichita, Ka	nsac 660
Re-entry Workover K	
Designate Type of Recompletion/Workover: X	K.C.C. OFFICE USE ONLY
Deepening X Re-perforation	F Letter of Confidentiality Attached C Wireline Log Received
Plug Back PBTD	C Drillers Timelog Received
Conversion to Injection/Disposal	Distribution
Is recompleted production:	KCC SWD/Rep NGPA KGS Plug Other
Commingled Docket No Dual Completion Docket No	(Specify)
Other (Disposal or Injection?) Docket No.	
INSTRUCTIONS: This form shall be completed in triplicate at Derby Building, Wichita, Kansas 67202, within 120 days apply. Information on side two of this form will be held and submitted with the form. See rule 82-3-107 for confide wireline logs and driller's time logs (not previously submitted or with this form for approval of commingling or CP-111 with all temporarily abandoned wells. NOTE: Compapproval before use; submit form U-1.	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.
with and the statements herein are complete and correct to	
	le President Date 7/9/90
Subscribed and sworn to before me this 9th day o	f July 19 90
Notary Public White Have	Date Commission Expires 11/19/90
	FORM ACO-

perator Name <u>Da</u>	wson-Markwe	11 Expl. Co	SIDE TWO	Bell	Well #1	
с	S Rge. 32	East	т	'homae		
	.	West	County	Homas	<u> </u>	
		RECOMPLET	ION FORMATION DE	SCRIPTION		
<u>.</u>			Log XX Sa	mple		
Name	2			Тор	Bottom	
nsing - Kan nsing - Kan	sas City - sas City -	"K" "L"		4270' 4296'	4275 ' 4306 '	
	* :		*** .			
	<u> </u>	ADDITIONAL C	EMENTING/SQUEEZE	RECORD		
Purpose:	Depth					
Perforate	Top Bottom	Type of Cement	# Sacks Used	Type a	nd Percent Additives	
Protect Casing Plug Back TD						
Plug Off Zone						
•						
Shots Per Foot	l	PERFORATION RECOR		Acid, Fracture	e, Shot, Cement Squeeze Recornd Kind of Material Used)	d
4		new perfs)	i de		SGA-l Acid	
4	4296-98 (r	new perfs)		1	SGA-1 Acid	
2		old perfs)			SGA-1 Acid	
		- 1/				
					·	
BTD	PI	ug Type				
		- / · · ·	TUBING RECORD			
ize 2"EUE	Set At 43	02'			s Liger/RunY	
ate of Resumed Pro	oduction, Disposal	or Injection	6/14/90	nana.		
stimated Production	on Per 24 Hours	oil2	_ Bbls. Water	15 Bbls	. Gas-Oil-Ra	tic
		Gas				
Disposition of Gas:	+		_			