

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 5208
Name: ExxonMobil Corporation
Address: P.O. Box 4358
City/State/Zip: Houston, Texas 77210
Purchaser: Spot Market
Operator Contact Person: Linda Koch
Phone: (281) 654-1021
Contractor: Name: Schlumberger & Weatherford
License: _____
Wellsite Geologist: _____

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

If Workover/Re-entry: Old Well Info as follows:
Operator: ExxonMobil Corporation
Well Name: Alderman Unit #3

Original Comp. Date: 11/19/97 Original Total Depth: 2954'
____ Deepening Re-perf. ____ Conv. to Enhr./SWD
____ Plug Back 2916' Plug Back Total Depth _____
____ Commingled Docket No. _____
____ Dual Completion Docket No. _____
____ Other (SWD or Enhr.?) Docket No. _____
4-4-2005 10/30/97 05/11/05
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 189-2220700
County: Stevens
NE-NE-SW-SW Sec. 11 Twp. 33 S. R. 35 East West
1250 feet from S / N (circle one) Line of Section
1250 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Alderman Unit Well #: 3
Field Name: Hugoton
Producing Formation: Chase
Elevation: Ground: 2943' Kelly Bushing: 2952'
Total Depth: 2954' Plug Back Total Depth: 2916'
Amount of Surface Pipe Set and Cemented at 660 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.

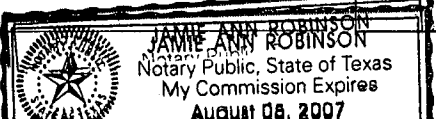
Drilling Fluid Management Plan Workover Alt 1 ncr
(Data must be collected from the Reserve Pit) 8-19-08
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: **RECEIVED**
KANSAS CORPORATION COMMISSION
Operator Name: _____ **SEP 15 2005**
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. **CONSERVATION DIVISION**
WICHITA, KS East West
County: _____ Docket No.: _____

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 of 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: Linda Koch
Title: Contract Staff Office Assistant Date: 09/14/05
Subscribed and sworn to before me this 14 day of September
2005
Notary Public: Jamie Ann Robinson
Date Commission Expires: 08-05-07

KCC Office Use ONLY
NO Letter of Confidentiality Received
If Denied, Yes Date: _____
____ Wireline Log Received
____ Geologist Report Received
____ UIC Distribution



X

Operator Name: ExxonMobil Corporation Lease Name: Alderman Unit Well #: 3
 Sec. 11 Twp. 33 S. R. 35 East West County: Stevens

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Ran GR/CBL log on 04/06/05.	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Current producing perms: 2710-2725; 2760-2778; 2810-2847; 2860-2910
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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 Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	12.250	8.625	24#	660'	Class C	375	50:50 C/poz
Production	7.875	5.5	14#	2944'	Class C	200	3% D79
					Class C	100	2% B28

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<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 - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
4 spf	2860-2910 (add perms)	2500 gals 15% HCL w/1730 scf/min N2 @ 70Q foam. Flush w/1-1/2 times N2.	2860-2910
4 spf	2810-2847 (add perms)	2500 gals. 15% HCL w/2800 scf/min N2 @ 70Q foam. Flush w/6800 scf N2.	2810-2847
		Dropped 130 7/8" ball sealers. Flush w/6800 scf N2.	2810-2847
		5200 gals 15% HCL - depth - 2710-25; 2810-47; & 2860-910	
4 spf	2760-2778 (add perms)	2600 gals 15% HCL. Flush w/2700 gals 2% HCL water.	2710-25, 2760-78

TUBING RECORD		Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enthr. Intermittently produced throughout w/o.		Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
		10			

Disposition of Gas Vented Sold Used on Lease *(If vented, Submit ACO-18.)*

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval _____