

5

SIDE ONE

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

Operator: License # 6417

Name: Union Pacific Resources Company

Address P.O. Box 7 - MS 3407

City/State/Zip Fort Worth, TX 76101

Purchaser: N/A

Operator Contact Person: Joy L. Prohaska

Phone (817) 877-7956

Contractor: Name: Murfin Drilling

License: 6033

Wellsite Geologist: N/A STATE

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD Temp. Abd.

Gas Inj Delayed Comp.

Dry Other (Core, Water Supply, etc.)

If **OWO**: old well info as follows:

Operator: N/A

Well Name: _____

Comp. Date _____ Old Total Depth _____

Drilling Method:

Mud Rotary Air Rotary Cable KCC

9/28/89 10/06/89 10-7-89 Drilled & Abandoned

Spud Date Date Reached TD Completion Date

API NO. 15- 199-20,179-00-00

County Wallace

NE SE Sec. 13 Twp. 14 Rge. 42 XX East West

2300' Ft. North from Southeast Corner of Section

680' Ft. West from Southeast Corner of Section

(NOTE: Locate well in section plat below.)

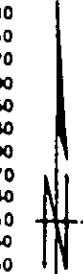
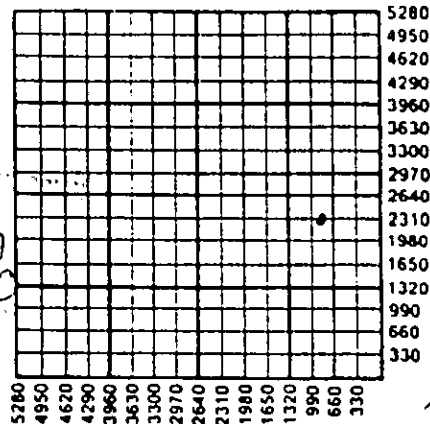
Lease Name Collins Farms 43-13 Well # 1

Field Name Wildcat

Producing Formation Did not produce

Elevation: Ground 3792' KB 3802'

Total Depth 5350' PBTD N/A



Alt II DFO

Amount of Surface Pipe Set and Cemented at 682' 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.

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 spud date of any well. Rule 82-3-130, 82-3-107 and 82-3-106 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 all wireline logs and drillers time log 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. Any recompletion, workover or conversion of a well requires filing of ACO-2 within 120 days from commencement date of such work.

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.

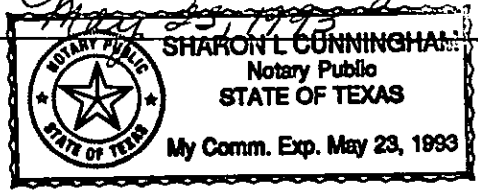
Signature J L Prohaska

Title Regulatory Analyst Date 1-8-90

Subscribed and sworn to before me this 9 day of January, 19 90.

Notary Public Sharon L Cunningham

Date Commission Expires _____



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)

Handwritten initials 'PI' and a checkmark.

SIDE TWO

Operator Name Union Pacific Resources Company Lease Name Collins Farms 43-13 Well # 1
 Sec. 13 Twp. 14 Rge. 42 East West County Wallace

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken (Attach Additional Sheets.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run (Submit Copy.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: center;">Formation Description</th> </tr> <tr> <td></td> <td style="text-align: center;"><input checked="" type="checkbox"/> Log</td> <td style="text-align: center;"><input type="checkbox"/> Sample</td> </tr> <tr> <th style="text-align: left;">Name</th> <th style="text-align: center;">Top</th> <th style="text-align: center;">Bottom</th> </tr> <tr> <td>Fort Hayes</td> <td style="text-align: center;">1304</td> <td></td> </tr> <tr> <td>Dakota</td> <td style="text-align: center;">1740</td> <td></td> </tr> <tr> <td>Stone Corral</td> <td style="text-align: center;">2823</td> <td></td> </tr> <tr> <td>Lansing-Kansas City</td> <td style="text-align: center;">4206</td> <td></td> </tr> <tr> <td>Morrow</td> <td style="text-align: center;">5010</td> <td></td> </tr> <tr> <td>Spergen</td> <td style="text-align: center;">5233</td> <td></td> </tr> </table>	Formation Description				<input checked="" type="checkbox"/> Log	<input type="checkbox"/> Sample	Name	Top	Bottom	Fort Hayes	1304		Dakota	1740		Stone Corral	2823		Lansing-Kansas City	4206		Morrow	5010		Spergen	5233	
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CASING RECORD <input checked="" 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
Surf CSG	12 1/4	8 5/8	24"	682.47	65/35	350	6% GEL, 2% CACL 2 1/4# sx flo seal
					Standard	75	2% CACL 2, 1/4 #sx flo seal
					Standard	100	#sx flo seal
PERFORATION RECORD				Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)			
Shots Per Foot	Specify Footage of Each Interval Perforated			Depth			
	Did Not Perforate			N/A			
TUBING RECORD							
N/A	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Date of First Production		Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)					
N/A							
Estimated Production Per 24 Hours		Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity	

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-1B.)

METHOD OF COMPLETION

Open Hole Perforation Dually Completed Commingled

Other (Specify) Drilled & Abandoned

Production Interval _____