

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

Operator: License # 8458
Name Transwestern Operating Co.
Address Box 276
.....Golden, CO 80202
City/State/Zip

Purchaser Permian Corp.
5800 E. Shell Dr.
Tulsa, OK 74135

Operator Contact Person Doug Isern
Phone 303-279-2995

Contractor: License # 6033
Name Murfin Drilling Company

Wellsite Geologist Russel Bak
Phone 303-457-0042

Designate Type of Completion
X New Well Re-Entry Workover
X Oil SWD Temp Abd
Gas Inj Delayed Comp.
Dry Other (Core, Water Supply etc.)

If OWD: old well info as follows:
Operator,
Well Name,
Comp. Date, Old Total Depth

WELL HISTORY

Drilling Method:
X Mud Rotary Air Rotary Cable

12-12-87 12-21-87 1-8-88
Spud Date Date Reached TD Completion Date

5292' 5226'
Total Depth PBTD
8-5/8" @ 432'

Amount of Surface Pipe Set and Cemented at.....feet
Multiple Stage Cementing Collar Used? X Yes No
If yes, show depth set.....feet
If alternate 2 completion, cement circulated
from.....feet depth to surf.....w/.....SX cmt
Cement Company Name Dowell
Invoice # 0# 12-0326
5-16-88

API NO. 15-199-20,126-00-00

County Wallace

NE.. SE.. NE.... Sec. 30.. Twp. 15S.. Rge. 42.. East
West

3630..... Ft North from Southeast Corner of Section
..330..... Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)

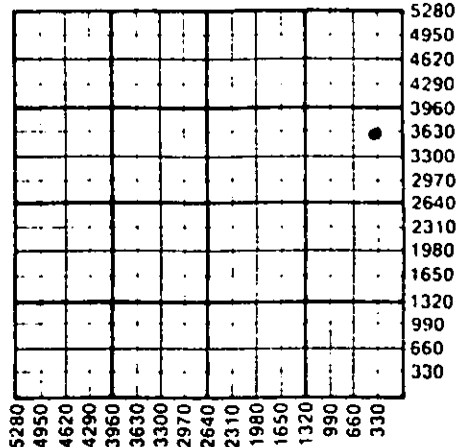
Lease Name Krautkramer Well # 2-30

Field Name Stockholm SW

Producing Formation Morrow

Elevation: Ground 3,901' KB 3,906'

Section Plat



WATER SUPPLY INFORMATION

Disposition of Produced Water: Disposal
Docket #, Repressuring

Questions on this portion of the ACO-1 call:

Water Resources Board (913) 296-3717

Source of Water: Hauled.
Division of Water Resources Permit #.....

Groundwater.....Ft North from Southeast Corner
(Well)Ft West from Southeast Corner of
Sec Twp Rge East West

Surface Water.....Ft North from Southeast Corner
(Stream, pond etc).....Ft West from Southeast Corner
Sec Twp Rge East West

X Other (explain) D. Bergquist, Box 25, Weskan, KS
(purchased from city, R.W.D. #)

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. 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 H. W. Stack
Title Consulting Engineer Date 3-9-88

Subscribed and sworn to before me this 9th day of March 1988
Notary Public.....

Date Commission Expires October 25, 1990

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Drillers Timelog Received
RECEIVED
DISTRIBUTION
KGS SWD/Rep NGPA
Plug Other
(Specify)
14000 03-14-88

Sec. 30 Twp. 15 S. Rge. 42 W

CEMENTING SERVICE REPORT



DOWELL SCHLUMBERGER INCORPORATED

TREATMENT NUMBER	DATE
03-12-0326	1-4-88
STAGE	DISTRICT
DS	WYASSES, Ks.

DS 496 PRINTED IN U.S.A.

WELL NAME AND NO.	LOCATION (LEGAL)
KRAUTKRAMER #2-30	Sec 29-15s-42w
FIELD-POOL	FORMATION

COUNTY/PARISH	STATE	API. NO.
WALLACE	Ks.	

NAME TRANSWESTERN
AND 2nd Stage

ADDRESS _____
ZIP CODE _____

SPECIAL INSTRUCTIONS _____

RIG NAME: PATRICK

WELL DATA:	BOTTOM	TOP
BIT SIZE	CSG/Liner Size	5 1/2
TOTAL DEPTH	WEIGHT	15.5
<input type="checkbox"/> ROT <input checked="" type="checkbox"/> CABLE	FOOTAGE	
MUD TYPE	GRADE	J 55
<input type="checkbox"/> BHST <input type="checkbox"/> BHCT	THREAD	
MUD DENSITY	LESS FOOTAGE SHOE JOINT(S)	
MUD VISC.	Disp. Capacity	

NOTE: Include Footage From Ground Level To Head In Disp. Capacity

Job Footage	TYPE	Stage Tool	TYPE
	DEPTH		ARROW
	TYPE		DEPTH
	DEPTH		18

IS CASING/TUBING SECURED? YES NO

LIFT PRESSURE 1873 PSI CASING WEIGHT + SURFACE AREA (3.14 x R²)

PRESSURE LIMIT 2500 PSI BUMP PLUG TO _____ PSI

ROTATE _____ RPM RECIPROCATE _____ FT No. of Centralizers _____

Head & Plugs TBG D.P. SQUEEZE JOB

Double SIZE 2 1/2 EUC TOOL TYPE ARROW

Single WEIGHT 6.5 DEPTH 1870

Swage GRADE J 55 TAIL PIPE: SIZE _____ DEPTH _____

Knockoff THREAD 820 TUBING VOLUME 10.8 Bbls

TOP NEW USED CASING VOL. BELOW TOOL _____ Bbls

BOT NEW USED DEPTH 1870 TOTAL _____ Bbls

ANNUAL VOLUME _____ Bbls

JOB SCHEDULED FOR TIME: 1000 DATE: 1-4-88 ARRIVE ON LOCATION TIME: 1000 DATE: 1-4-88 LEFT LOCATION TIME: 1630 DATE: 1-4-88

TIME	PRESSURE		VOLUME PUMPED BBL		INJECT RATE	FLUID TYPE	FLUID DENSITY	SERVICE LOG DETAIL
	TBG OR D.P.	CASING	INCREMENT	CUM				
0001 to 2400								PRE-JOB SAFETY MEETING
1428	0				1 1/2	H ₂ O	8.3	START PUMP / TEST CASING
1433	530	530		7				STOP PUMP
1435					3	H ₂ O	8.3	START PUMP / BREAK CIRCULATION
1443	180		79	25		Cmt	12.4	START CEMENT SLURRY - 225SX
1519	100			109	3			CEMENT TO PIT
1519	100		10	110	3	H ₂ O	8.3	START DISPLACEMENT
1522	340			10				STOP PUMP
1524	1030							PRESSURE UP TUBING.
1527		140			3	H ₂ O	8.3	START REVERSE CIRCULATION
1532		140		14				STOP PUMP

REMARKS _____

SYSTEM CODE	NO. OF SACKS	YIELD CU. FT/SK	COMPOSITION OF CEMENTING SYSTEM		SLURRY MIXED	
			PERCENT	PERCENT	BBLs	DENSITY
1.	225	1.98	LIGHTWEIGHT 3-P, 2/65-1		79.3	12.4
2.						
3.						
4.						
5.						
6.						

RECEIVED
OPERATION COMMISSION
MAY 09 1988
CONSERVATION DIVISION
Wichita, Kansas

BREAKDOWN FLUID TYPE	VOLUME	DENSITY	PRESSURE	MAX.	MIN.
<input type="checkbox"/> HESITATION SQ. <input type="checkbox"/> RUNNING SQ.	CIRCULATION LOST	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Cement Circulated To Surf.	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	10 Bbls.
BREAKDOWN PSI FINAL	PSI	DISPLACEMENT VOL.	10 Bbls	TYPE OF WELL	<input type="checkbox"/> STORAGE <input type="checkbox"/> BRINE WATER
Washed Thru Perfs <input type="checkbox"/> YES <input type="checkbox"/> NO	TO FT	MEASURED DISPLACEMENT <input checked="" type="checkbox"/>	<input type="checkbox"/> WIRELINE	<input type="checkbox"/> OIL <input type="checkbox"/> GAS	<input type="checkbox"/> INJECTION <input type="checkbox"/> WILDCAT

PERFORATIONS _____ TO _____ TO _____

CUSTOMER REPRESENTATIVE W STACK

DS SUPERVISOR D. J. SHARP

OILFIELD SERVICES DISTRICT
 INDUSTRIAL SERVICES STATE

DSI SERVICE ORDER, RECEIPT AND INVOICE NO. **03-12-0326**

DSI SERVICE LOCATION NAME AND NUMBER
1) LYSSES Ks. 03-12

CUSTOMER NUMBER: _____ CUSTOMER P.O. NUMBER: _____ TYPE SERVICE CODE: **305** BUSINESS CODES: _____

CUSTOMER'S NAME: **TRANSWESTERN**

WORKOVER NEW WELL OTHER W N API OR IC NUMBER: _____

ADDRESS: _____

CITY, STATE AND ZIP CODE: **End Stage**

ARRIVE LOCATION: MO. **1** DAY **4** YR. **88** TIME **1000**

DSI will furnish and Customer shall purchase materials and services required in the performance of the following SERVICE INSTRUCTIONS or DSI INDUSTRIAL SERVICE CONTRACT NO. _____ in accordance with the terms and conditions as printed on the reverse side of this form.

SERVICE ORDER AND RECEIPT I certify that the materials and services listed were authorized and received and all services performed in a workmanlike manner and that I have the authority to accept and execute this document.

SET 3 1/2 Csg. #101 QNO STAGE 72255x DELU 13-P, 2 1/2 S-1

DISPLACE 10.8 BELLS WATER

MAX PRESS- 1500 PSI

JOB COMPLETION: MO. **1** DAY **4** YR. **88** TIME **1630**

STATE: **Ks.** CODE: **15** COUNTY/PARISH: **WALLACE** CODE: _____ CITY: _____

SIGNATURE OF CUSTOMER OR AUTHORIZED REPRESENTATIVE: _____

WELL NAME AND NUMBER / JOB SITE: **KRAUTKRAMER #2-30**

LOCATION AND POOL / PLANT ADDRESS: **Sec 28-155-420**

SHIPPED VIA: **DS**

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
048253-000	Pump TRUCK @ 1870'	EA	1		1000.00
059200-001	Pump MILEAGE	mi	80	2.10	168.00
049102-001	HAUL 21143 ² 80mi.	Tm	846	.75	634.50
049100-000	SERVICE CHARGE	CUFT	233	.95	231.35
067008-100	S-1 CARTR	110	392	1.27	105.84
102901-125	DS LIGHTWEIGHT 3/4"	SK	285	5.70	1682.50

ORDER

AND

RECEIPT

THANKS FOR USING DSI

FIELD EST. # 3412.19

STATE OF KANSAS RECEIVED
 MAY 09 1988
 GEARSERVATION DIVISION
 Wichita, Kansas

LICENSE/REIMBURSEMENT FEE: _____

REMARKS: _____ STATE: _____ % TAX ON \$ _____
 COUNTY: _____ % TAX ON \$ _____
 CITY: _____ % TAX ON \$ _____
 SIGNATURE OF DSI REPRESENTATIVE: _____ TOTAL \$ _____

Operator Name Transwestern Operating Co. Lease Name Krautkramer Well # 2-30

Sec. 30 Twp. 15S Rge. 42 East West County Wallace

WELL LOG

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 Yes No
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No

Formation Description
 Log Sample

Name	Top	Bottom
Blain Salt	2,275	
Stone Corral	2,775	
Heebner	4,132	
Morrow Shale	5,030	
Morrow Sand	5,128	
St. Genevieve	5,170	

RELEASED

APR 17 1989

FROM CONFIDENTIAL

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
Surface	12 1/2"	8-5/8"		432'	60-40 Poz	250	2% gel, 3% dc
Production	7-7/8"	5 1/2"	15.5	5,284'	50% Poz	125	5% salt
PERFORATION RECORD				Acid, Fracture, Shot, Cement Squeeze Record			
Shots Per Foot	Specify Footage of Each Interval Perforated			(Amount and Kind of Material Used)		Depth	
4	5,133-5,142'			250 Gal 7 1/2% MSR			
TUBING RECORD				Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Size 2-7/8"		Set At 5,222'		Packer at NA			
Date of First Production 1-23-88		Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (explain).....					
Estimated Production Per 24 Hours		Oil 90 Bbls	Gas 50 MCF	Water 0 Bbls	Gas-Oil Ratio 555	Gravity CFPB 39.5	

METHOD OF COMPLETION

Production Interval

Disposition of gas: Vented Open Hole Perforation
 Sold Other (Specify) 5,133-5,142...
 Used on Lease Dually Completed
 Commingled

15-199-20126-00-00

PLAT AND CERTIFICATION OF ACREAGE ATTRIBUTABLE TO AN OIL WELL

State Corporation Commission, Conservation Division
200 Colorado Derby Bldg. Wichita, Kansas 67202

OPERATOR Trans-Western Operating Co.

LOCATION OF WELL:

LEASE Krautkramer

2,310 feet from the N line

WELL NUMBER 2-30

330 feet from the E line

FIELD Stockholm

Of the NE of Sec 30 T.15S R.42W

COUNTY Wallace

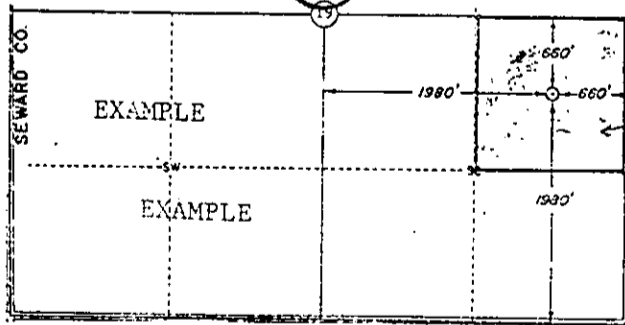
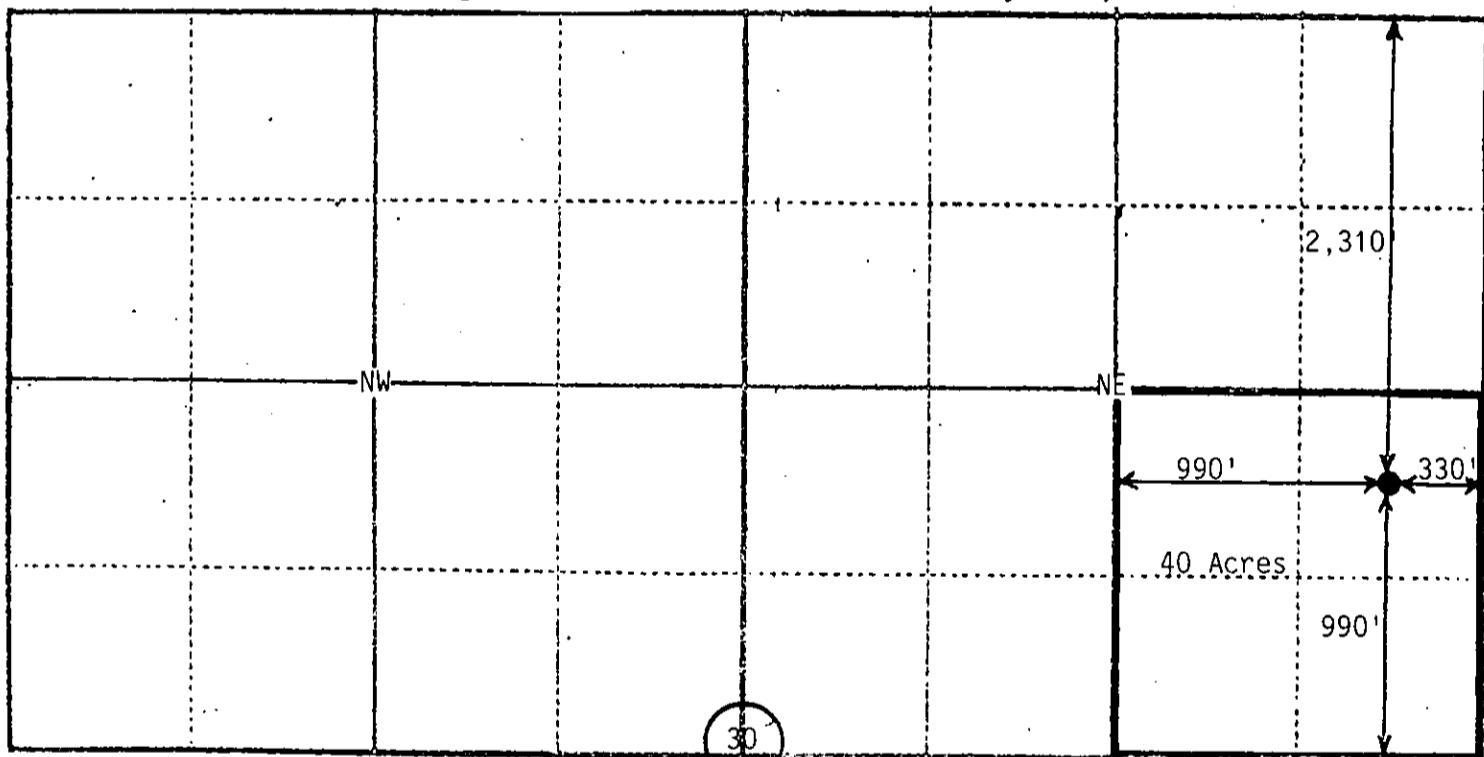
*NUMBER OF ACRES
ATTRIBUTABLE TO WELL 40

DESCRIPTION OF ACREAGE:

PLAT

NEsENE of Section 30

(Show location of Well and outline attributable acreage)
(Show footage to nearest lease or unit boundary line)



RELEASED
APR 17 1969
FROM CONFIDENTIAL

The undersigned hereby certifies that he is consultant
for Trans-Western Operating Co., a duly authorized agent, that all information
shown hereon is true and correct to the best of his knowledge and belief, and that
all acreage claimed as attributable to the well named herein is held by production
from that well.

Suscribed and sworn to before me on this

March, 1968.
Ruthven H. Bueh
Notary Public

My Commission expires 10-25-90

STATE CORPORATION COMMISSION
Wichita, Kansas