

ORIGINAL

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

Operator: License # 5171

Name: Marathon Oil Company

Address P.O. Box 689

City/State/Zip Oklahoma City, OK 73101

Purchaser: Delhi

Operator Contact Person: Barry Hardy

Phone (405) 720-5555

Contractor: Name: \_\_\_\_\_

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: TXO Production Corp.

Well Name: Gant "C" #2

Comp. Date 9-18-83 Old Total Depth 4500'

\_\_\_\_ Deepening  Re-perf. \_\_\_\_ Conv. to Inj/SWD

\_\_\_\_ Plug Back \_\_\_\_ PBD

Commingled Docket No. \_\_\_\_\_

\_\_\_\_ Dual Completion Docket No. \_\_\_\_\_

\_\_\_\_ Other (SWD or Inj?) Docket No. \_\_\_\_\_

3-21-92 3-27-92

SPUD Date 3-21-92 Date Reached TD 3-27-92 Completion Date  
Recompletion Begin

API NO. 15- 007-21,657-00-01

County Barber

C - SW - SW Sec. 8 Twp. 32S Rge. 13 X E W

610 Feet from S/W (circle one) Line of Section

660 Feet from E/W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
NE, SE, NW or SW (circle one)

Lease Name Gant "C" Well # 2

Field Name Brooks Younger

Producing Formation Marmaton & Drum

Elevation: Ground 1687' KB 1698'

Total Depth 4500 PBD CIBP @4360'

Amount of Surface Pipe Set and Cemented at 8 5/8" @415 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  
(Data must be collected from the Reserve Pit)

Chloride content \_\_\_\_\_ ppm Fluid volume \_\_\_\_\_ bbls

Dewatering method used \_\_\_\_\_

Location of fluid disposal if hauled offsite: \_\_\_\_\_

Operator Name \_\_\_\_\_

Lease Name \_\_\_\_\_ License No. \_\_\_\_\_

\_\_\_\_ Quarter Sec. \_\_\_\_ Twp. \_\_\_\_ S Rng. \_\_\_\_ E/W

County \_\_\_\_\_ Docket No. \_\_\_\_\_

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, 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 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 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 Barry Hardy  
Barry Hardy

Title Production Engineer Date 3-27-92

Subscribed and sworn to before me this 24 day of April, 19 92.

Notary Public Barbara S. Standridge

Date Commission Expires 11-1-95

K.C.C. OFFICE USE ONLY  
F \_\_\_\_ Letter of Confidentiality Attached  
C \_\_\_\_ Wireline Log Received  
C \_\_\_\_ Geologist Report Received  
Distribution  
 KCC  
\_\_\_\_ KGS  
\_\_\_\_ SWD/Rep  
\_\_\_\_ Plug  
\_\_\_\_ Other (Specify)  
APR 27 1992  
RECEIVED  
CORPORATION COMMISSION  
WICHITA, KANSAS

PI

Operator Name Marathon Oil Company

Lease Name Gant "C"

Well # 2

Sec. 8 Twp. 32S Rge. 13W

East  
 West

County Barber

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 type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input type="checkbox"/> No	Herington	1986 -288	Marmaton 4306 -2608
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Onaga	2792 -1094	Miss. 4379 -2681
List All E.Logs Run:		Stotler	2992 -1294	RTD 4500
N/A - Recompletion		Topeka	3249 -1551	LTD 4494
		Toronto	3739 -2041	PBD 4455
		Doug. Gp.	3775 -2077	
		Lansing	3905 -2207	
		Drum	4118 -2420	
		Swope	4227 -2529	
		B/KC	4296 -2598	

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 1/4"	8 5/8"	24#	415'	Lite Class A	250 125	2% gel
Production		4 1/2"	10.5#	4496'	Surefill	200	

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	Marmaton 4318-4322	300 gals	15% HCL acid w/additives.
			Flush w/70 bbls 2% KCLW	
4	Drum 4118-4120'			
	CIBP @4360'			

<b>TUBING RECORD</b>	Size 2 3/8"	Set At 4357'	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj.	Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
3-27-92				
Estimated Production Per 24 Hours	Oil 0	Bbls.	Gas 196	McF 1.7
				Water Bbls. Gas-Oil Ratio Gravity

Disposition of Gas:	<input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, submit ACO-18.)	METHOD OF COMPLETION	<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input checked="" type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify)	Production Interval 4318-4322 4118-4120
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