

STATE CORPORATION COMMISSION OF KANSAS  
OIL & GAS CONSERVATION DIVISION  
RECOMPLETION FORM  
ACO-2 AMENDMENT TO WELL HISTORY

API NO. 15- 033-20,567-00-01  
County Comanche East  
C SE SW Sec 26 Twp 33 Rge 20 XX West

Operator: License # 5171  
Name TXO Production Corp.  
Address 1660 Lincoln St., Suite 1800  
City/State/Zip Denver, CO 80264

660 Ft North from Southeast Corner of Section  
3300 Ft West from Southeast Corner of Section  
(Note: Locate well in section plat below)

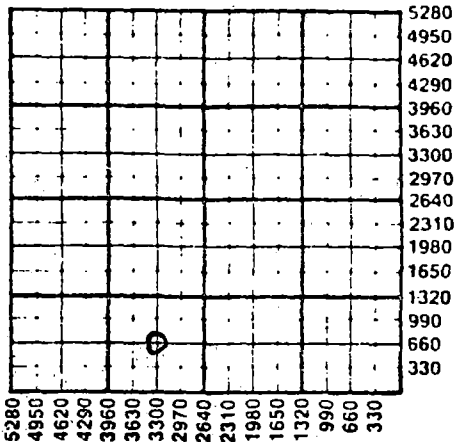
Purchaser \_\_\_\_\_  
Operator Contact Person Lance Anderson  
Phone (303) 861-4246

Lease Name Willems "A" Well # 5  
Field Name Collier Flats  
Name of New Formation Lansing  
Elevation: Ground 1820 KB 1831  
Section Plat

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

Date of Original Completion: 6-29-82  
DATE OF RECOMPLETION:  
6-8-89 7-11-89  
Commenced Completed

RECEIVED  
AUG 25 1989  
08-25-89  
CONSERVATION DIVISION  
Wichita, Kansas



Designate Type of Recompletion/Workover:  
 Deepening  Delayed Completion  
 Plug Back  Re-perforation  
 Conversion to Injection/Disposal  
Is recompleted production:  
 Commingled; Docket No. \_\_\_\_\_  
 Dual Completion; Docket No. \_\_\_\_\_  
 Other (Disposal or Injection)?  
Dump Flood well.

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)  
.....  
.....

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 recompletion of any well. Rules 82-3-107 and 82-3-141 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 any additional wireline logs and driller's time logs (not previously submitted) shall be attached with this form. Submit ACO-4 prior to or with this form for approval of commingling or dual completions. Submit CP-4 with all plugged wells. Submit CP-111 with all temporarily abandoned wells. NOTE: Conversion of wells to either disposal or injection must receive approval before use; submit form U-1.

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 Lance E. Anderson Title ENGINEER Date 8-23-89  
Subscribed and sworn to before me this 23<sup>rd</sup> day of August 19 89  
Notary Public Janice A. Parker Date Commission Expires 11-3-92

PE

SIDE TWO

Operator Name TXO Production Corp. Lease Name Willems "A" Well # 5  
 Sec 26 Twp 33 Rge 20  East  West County Comanche

RECOMPLETED FORMATION DESCRIPTION:

Log  Sample

Name Lansing Top 4420' Bottom 4650 (Iola)

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth		Type of Cement	# Sacks Used	Type & Percent Additives
	Top	Bottom			
<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	Acid, Fracture, Shot, Cement Squeeze Record
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)
2	4468-4484'	Acidize w/ 750 gal 15% HCl
		Acidize w/ 500 gal 15% HCl & 100 gal Xylene
		Acid frac w/ 2500 gal 28% Gelled HCl

PBTD 4909' Plug Type \_\_\_\_\_

TUBING RECORD:

Size \_\_\_\_\_ Set At \_\_\_\_\_ Packer At \_\_\_\_\_ Was Liner Run?  Y  N

Date of Resumed Production, Disposal or Injection 7-11-89

Estimated Production Per 24 Hours \_\_\_\_\_ bbl/oil 140 bbl/water  
 \_\_\_\_\_ MCF gas \_\_\_\_\_ gas-oil ratio