ORIGINAL

SIDE ONE

STATE CORPORATION COMMISSION OF KANSAS	API NO. 15- 033-20,809-5-00-0 County Comanche County, Kansas			
OIL & GAS CONSERVATION DIVISION RECOMPLETION FORM				
ACO-2 AKENDHENT TO WELL HISTORY	tast.			
Operator: License #5225	C NW NE Sec. 3 Twp. 34S Rge. 17 XXX West 4620 Ft. North from Southeast Corner of Section			
Name: Quinque Operating Company	660 Ft. West from Southeast Corner of Section			
Address P. O. Box 2738	(NOTE: Locate well in section plat below.)			
city/State/Zip: Liberal, KS 67905	Lease Name Meadows "OWWO" Well # R-1 Field Name SE Beals			
Purchaser: Trident NGL	Producing Formation Mississippian			
Operator Contact Person: Phone:(316) 624-2578	Elevation: Ground 1816 KB 1828			
Designate Type of Original Completion X New Well Re-Entry Workover Date of Original Completion 2-10-91	7 6 6 C 4950 4620 4290 3960			
Name of Original Operator Raydon Exploration, In	3630			
Original Well Name Meadows R-1	2970 2640			
Date of Recompletion:	2310			
9-27-91 12-4-91 DEGE Commenced Completed STATE CORPORAL	1VED 1550 110			
Commenced Completed STATE CORPORAT Re-entry Workover Designate Type of Recompletion/Workover: Oil SWD Temp. Abd. 1-2 X Gas Inj Delayed CompNSERVAT Dry Other (Core, Water Supply, etc.)	9 1992 3-13-9			
Deepening Re-perforation Plug Back 5125 PBTD Conversion to Injection/Disposal	C Wireline Log Received C Drillers Timelog Received			
Is recompleted production:	Distribution KCC SND/RepNGPA			
Commingled Docket No. Dual Completion Docket No. Other (Disposal or Injection?) Docket No.	KGS Plug Other (Specify)			
INSTRUCTIONS: This form shall be completed in triplicate a Derby Building, Wichita, Kansas 67202, within 120 days apply. Information on side two of this form will be held c and submitted with the form. See rule 82-3-107 for confide wireline logs and driller's time logs (not previously submit prior to or with this form for approval of commingling or d CP-111 with all temporarily abandoned wells. NOTE: Corwapproval before use; submit form U-1.	of the recompletion of any well. Rules 82-3-107 and 82-3-141 onfidential for a period of 12 months if requested in writing ntiality in excess of 12 months. One copy of any additional tted) shall be attached with this form. Submit ACO-4 or ACO-5 ual completions. Submit CP-1 with all plugged wells.			
with and the statements herein are complete and correct to t	•			
Signature				
Subscribed and sworn to before me this 27th day of				
Notary Public DURNY (1 White	Date Commission Expires11-27-95			

NOTARY PUBLIC - State of Kansas BEVERLY A. WHITE My Appt. Exp. 1/-27-95 FORM ACO-2 7/89

	•		SIDE TWO				
Operator NameQu	inque Operat	ing Company	Lease Name	Meadows	Well #	R-1	
	-	East					
Sec. 3 Tup. 34	Pop 17 32.	West	Country	Comanche C	oimtu. Ka		
West County Comanche County KS							
RECOMPLETION FORMATION DESCRIPTION							
Log Sample							
Name			•	<u>Iop</u>	Bottom	•	
		•					
Mississippian			5086	 -			
	•			5080	5576		
						:	
					(a)		
•						•	
ADDITIONAL CEMENTING/SQUEEZE RECORD							
Purpose:	Depth						
Xperforate	Top Bottom	Type of Cement	# Sacks Used	Type and	Percent Additives	, ;	
Protect Casing	5008-5105	50-50 POZ	125	12% Salt; 6% F	Halad 322		
Plug Back TD Plug Off Zone							
,							
	 	<u></u>	 `	<u> </u>			
L	J	L	L				
PERFORATION RECORD Shots Per Foot Specify Footage of Each Interval Perforated		Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)					
2	5008-5011		500 gal 150 Em				
2	E000 7005		500 gal 15% FE				
2			500 gal 15% FE; 4000 gal. MOD 202				
2	5136-5138		1500 gal 159	<u>} </u>			
							
				<u></u>			
PBID 5130 Plug Type Cement Retainer							
		-5 ./6	TUBING RECORD	·			
size2 3/8	Set At	5125		Á Was L	iner Run	γ <u></u> ΧΧ Ν	
Date of Resumed Produ	uction, Disposal d	or Injection	test date	L-10-92			
Estimated Production	Per 24 Hours C	nit3	_ Bbls. Water	15 Bbls.		Gas-Oil-Ratio	
Gas 500 Mcf							
Disposition of Gas:							
Vented X sold Used on Lease (If vented, submit ACO-18.)							
The state of the s							