

ORIGINAL

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

API NO. 15- 175214810000
County SEWARD
C - SE/4-NW/4 Sec. 35 Twp. 33S Rge. 34 X E

Operator: License # 6120

1980 Feet from S/4 (circle one) Line of Section

Name: CABOT OIL & GAS CORPORATION

1980 Feet from E/4 (circle one) Line of Section

Address 9400 N. Broadway, Suite 608

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

City/State/Zip Oklahoma City, OK 73114

Lease Name COOK Well # 3-35

Purchaser: CABOT OIL & GAS MARKETING

Field Name ADAMSON

Operator Contact Person: STEVE TURK

Producing Formation MORROW

Phone (405) 478-6501

Elevation: Ground 2910 KB 2922

Contractor: Name: BEREDCO Drilling

Total Depth 6540 PBTD 6084

License: 5147

Amount of Surface Pipe Set and Cemented at 1341 Feet

Wellsite Geologist: JIM PENDERGRASS

Multiple Stage Cementing Collar Used? Yes X No

Designate Type of Completion
 New Well Re-Entry Workover

If yes, show depth set _____ Feet

Oil SWD S10W Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc.)

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cat.

If Workover/Re-Entry: old well info as follows:

Drilling Fluid Management Plan ALT 1 JH 1-17-96
(Data must be collected from the Reserve Pit)

Operator: _____

Chloride content 900 ppm Fluid volume 10,000 bbls

Well Name: _____

Dewatering method used Dryout - Backfill

Comp. Date _____ Old Total Depth _____

Location of fluid disposal if hauled offsite:

Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PBTD
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

RELEASED

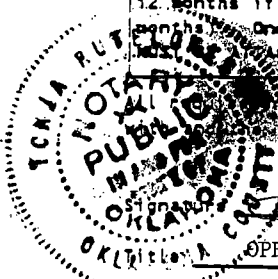
Operator Name _____

Lease Name NOV License No. 1 1996

7-8-95 7-20-95 8-10-95
Spud Date Date Reached TD Completion Date

Quarter _____ Sec. _____ Twp. _____ Rge. _____ E/W _____
County _____ Docket No. _____
FROM CONFIDENTIAL

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.



I, Steve Turk, 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.

Steve Turk OPERATIONS MANAGER Date 10-11-95

Subscribed and sworn to before me this 11th day of October, 19 95.

Notary Public [Signature]

Date Commission Expires 1-26-97

OFFICE USE ONLY
Letter of Confidentiality Attached
Log Received
Report Received
Distribution
KCC SWD/Rep _____ MGA _____
KGS Plug _____ Other _____
(Specify)

ORIGINAL

Operator Name: **CABOT OIL & GAS CORPORATION**

Lease Name: **COOK**

Well # **4-3-35**

Sec. **35** Twp. **33S** Rge. **34**

East
 West

County: **SEWARD**

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
(Attach Additional Sheets.)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
(Submit Copy.)

List All E.Logs Run:
Dual Induction Gamma Ray with Linear Correlation
Litho-Density Compensated Neutron Gamma Ray
Microlog Gamma Ray
Repeat Formation Tester
MSG/Gamma Ray Casing Collars Cement Bond Log

Name	Top	Datum
Herrington	2640	
Krider	2671	
Winfield	2754	
Ft. Riley	2811	
Council Grove	3008	
B/Heebner	4297	
Toronto	4308	
Lansing	4424	
Checkerboard	4810	
Marmaton	5096	
Oswego	5176	
Cherokee	5308	
Atoka	5542	
Morrow	5730	
Chester	6002	
St. Louis	6464	

CASING RECORD

New 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"	25#/ft.	1341'	Midcon Prem Plus	280 150	2% CaCl, 1/4#/sk Flocele
Production	7-7/8"	5-1/2"	15.5#/ft.	6135'	Poz H	125	2% gel, 10% salt, 0.5% TIC, 0.2% Anti-foamer, 12-1/2% sx Kolite

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
2	Morrow 5986'-5995'	Acidize w/ 1000 gals 7-1/2% NE/FE HCl	5986'-5995'
		Frac w/ 46,736# 20/40 sand	

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2-3/8"	5981'		

Date of First, Resumed Production, SWD or Inj. **8-27-95** Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	2	700	0	350,000 scf/bbl	not available

Disposition of Gas:

METHOD OF COMPLETION

Production Interval

Vented Sold Used on Lease
(If vented, submit ACO-18.)

Open Hole Perf. Dually Comp. Commingled
 Other (Specify)

5986'-5995'

CEMENTING SERVICE REPORT

DOWELL SCHLUMBERGER INCORPORATED

TREATMENT NUMBER: 03-12-7322 DATE: 7-22-95
 STATE: OK DISTRICT: WYSSSES, KS

PRINTED IN U.S.A.

WELL NAME AND NO.: **COOK #3-35**
 LOCATION (LEGAL): **SFC 35-33S-34W**
 FIELD/POOL: **HUGOTON**
 COUNTY/parish: **SEWARD** STATE: **KS** APL. NO.:

WELL DATA: **Beredco #2**

BOTTOM		TOP	
BIT SIZE: 7 7/8	CD/Linear Size: 5 1/2	5 1/2	5 1/2
TOTAL DEPTH: 2640	WEIGHT: 155	14	15.5
ETROY <input type="checkbox"/> CABLE	FOOTAGE: 1311	2003	2821
MUD TYPE:	GRADE: 355		
<input type="checkbox"/> BHST <input type="checkbox"/> BHCT	THREAD: 8RD	8RD	8RD
MUD DENSITY:	LESS FOOTAGE SPACE JOINTS: 47		
MUD VISC.:	Disp. Capacity: 98.9	67.1	176.2

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

NAME: **CABOT OIL & GAS**
 AND: **ORIGINAL**
 ADDRESS:
 ZIP CODE:

SPECIAL INSTRUCTIONS: **CEMENT 5 1/2" PRODUCTION CASING WITH 125 SKS OF CEMENT SLURRY AS DIRECTED BY THE CUSTOMER**

TYPE: INSIDE FLAT COLLAR	DEPTH: 0094
TYPE: CMT NOSE	DEPTH: 0135

Head & Plugs: TBG O.P. SQUEEZE JOB

Double WEIGHT GRADE THREAD

Single SWAGE KNOCKOFF

TOP DR OR W: NEW USED

BOT DR OR W: DEPTH

IS CASING/TUBING SECURED? YES NO

LIFT PRESSURE: **3805** PSI CASING WEIGHT - SURFACE AREA (3.14 x R²): **1420** PSI

PRESSURE LIMIT: **800 OVER** PSI BUMP PLUG TO: **1420** PSI

ROTATE: RPM RECIPROCATATE FT No. of Centralizers: **10**

TIME	PRESSURE		VOLUME PUMPED BBL		JOB SCHEDULED FOR		ARRIVE ON LOCATION		LEFT LOCATION		
	TBG OR O.P.	CASING	INCREMENT	CUM	INJECT RATE	FLUID TYPE	FLUID DENSITY	TIME	DATE	TIME	DATE
0001 to 2400											
2230											
2345	3600					H ₂ O	8.34				
2348		80	10		3.9	Gel					
2351		340	10	10	3.9	CW100	8.6				
2353		270	9	20	3.9	H ₂ O	8.31				
2356		280	35	25	3.9	CMT	13.9				
0005				69							
0009		0	146		5.8	KCL	8.6				
0033		510		136	5.8	KCL	8.6				
0037		530		146	2.1	KCL	8.6				
0037		1420		197							
0038											

PRE-JOB SAFETY MEETING

PRESSURE TEST LINES

START Gel H₂O

START CW100 WASH

START H₂O SPACER

START CMT SLURRY

SHUTDOWN/WASH LINES / Drop Top Plug

START Displacement

PSI Check

PSI Check

STOP PUMP / Plug Down

CHECK FIDAT Holding

RELEASED

NOV 1 1996

REMARKS: FROM CONFIDENTIAL

SYSTEM CODE	NO. OF SACKS	YIELD CU. FT/SK	COMPOSITION OF CEMENTING SYSTEMS		DENSITY
1.	125	1.47	50/50 POE/1H + 2% DZO + 0.5% D65 + 10% D49 (6-2-1) + 0.2% D46 + 12.5% AK D42		13.9
2.					
3.					
4.					
5.					
6.					

STATE OF OKLAHOMA RECEIVED NOV 1 1995

CONSERVATION DIVISION Wichita, Kansas

BREAKDOWN FLUID TYPE: HESITATION SQ. RUNNING SQ. CIRCULATION LOST

DENSITY: YES NO

PRESSURE: YES NO

MAX. TEM.:

BREAKDOWN: PSI FINAL PSI

Washed Thru Ports: YES NO

MEASURED DISPLACEMENT: **47** BBL

PERFORATIONS: TO TO TO TO

CUSTOMER REPRESENTATIVE: **Jim Pendergrass**

DS SUPERVISOR: **Russ Wagstaff**



WELL DATA

R/LD _____ SEC 35 TWP _____ RING _____ COUNTY Seward STATE Ks

FORMATION NAME _____ TYPE _____

FORMATION THICKNESS _____ FROM _____ TO _____

INITIAL PROD: OIL _____ BPD. WATER _____ BPD. GAS _____ MCFD _____

ESSENT PROD: OIL _____ BPD. WATER _____ BPD. GAS _____ MCFD _____

COMPLETION DATE _____ MUD TYPE _____ MUD WT. _____

CRACKER TYPE _____ SET AT _____

BOTTOM HOLE TEMP. _____ PRESSURE _____

LOG DATA _____ TOTAL DEPTH _____

JOB DATA

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
CAT CROWBAR <u>50x110x1</u>	<u>1</u>	<u>Howe</u>
SPRINGSIDE <u>Fill Tube</u>	<u>1</u>	<u>"</u>
ROD SHOE	<u>1</u>	<u>"</u>
INTERNALIZERS	<u>3</u>	<u>"</u>
TITUM PLUG	<u>1</u>	<u>"</u>
SP PLUG	<u>1</u>	<u>"</u>
SAD	<u>1</u>	<u>"</u>
CRACKER		
OTHER		

CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE <u>7-8-95</u> TIME <u>20:00</u>	DATE <u>7-8-95</u> TIME <u>22:00</u>	DATE <u>7-9-95</u> TIME <u>10:00</u>	DATE <u>7-9-95</u> TIME <u>2:04</u>

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
<u>D. Peacock</u>	<u>Service supervisor</u>	<u>Liberal</u>
<u>H. Tedder</u>	<u>TC-4</u>	<u>"</u>
<u>C. Ashley</u>	<u>BC-17031</u>	<u>"</u>
	<u>BC-17031</u>	<u>"</u>

MATERIALS

HEAT FLUID _____ DENSITY _____ LB/GAL. API _____

SPL. FLUID _____ DENSITY _____ LB/GAL. API _____

POP. TYPE _____ SIZE _____ LB. _____

POP. TYPE _____ SIZE _____ LB. _____

POD TYPE _____ GAL. _____ % _____

POD TYPE _____ GAL. _____ % _____

POD TYPE _____ GAL. _____ % _____

REFRACTANT TYPE _____ GAL. _____ IN _____

AGENT TYPE _____ GAL. _____ IN _____

LID LOSS ADD. TYPE _____ GAL.-LB. _____ IN _____

SLING AGENT TYPE _____ GAL.-LB. _____ IN _____

IKG RED. AGENT TYPE _____ GAL.-LB. _____ IN _____

SEALER TYPE _____ GAL.-LB. _____ IN _____

DOCKING AGENT TYPE _____ GAL.-LB. _____

REFRAC BALLS TYPE _____ QTY. _____

OTHER _____

OTHER _____

DEPARTMENT Cement

DESCRIPTION OF JOB _____

JOB DONE THRU: TUBING CASING ANNULUS TBG./ANN.

CUSTOMER REPRESENTATIVE X Stan Wylchoff

HALLIBURTON OPERATOR David Peacock COPIES REQUESTED _____

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIONS	YIELD CU.FT./SK.	MIXED LBS./GAL.
<u>1</u>	<u>350</u>	<u>Mudden</u>			<u>2% CC, 1/4 Flocc</u>	<u>3.27</u>	<u>141</u>
<u>1</u>	<u>150</u>	<u>Hent</u>			<u>2% CC</u>	<u>1.32</u>	<u>141.8</u>

NOV 1 1996

PRESSURES IN PSI

SUMMARY

FROM CONFIDENTIAL VOLUMES

REGULATING _____ DISPLACEMENT _____ PRESURISH: BBL-GAL. _____ TYPE H₂O

BREAKDOWN _____ MAXIMUM _____ LOAD & BKDN: BBL-GAL. _____ PAD: BBL-GAL. _____

PERAGE _____ FRACTURES GRADIENT _____ TREATMENT: BBL-GAL. _____

CUT-IN: INSTANT _____ 5-MIN _____ 15-MIN _____ CEMENT SLURRY: BBL-GAL. 195 STATE CORPORATION COMMISSION

HYDRAULIC HORSEPOWER _____ TOTAL VOLUME: BBL-GAL. _____

ADDED _____ AVAILABLE _____ USED _____ REMARKS Lead - 160 BBL'S
Tail - 35 BBL'S

BEATING _____ DISPL. _____ OVERALL _____ CEMENT LEFT IN PIPE _____

SET 40 REASON Shoe

RECEIVED
 OCT 13 1995
 CONSERVATION DIVISION
 Wichita, Kansas

CUSTOMER: Paradeo Drilling
 LEASE: COOK
 WELL NO.: 3-35
 JOB TYPE: Surface
 DATE: 7-8-95