

ORIGINAL

SIDE ONE

125190
RELEASED
1/25/89

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

API NO. 15- 129-20,868-00-00 JAN 9 8 1991

County Morton FROM CONFIDENTIAL

C NE/4 Sec 19 Twp 33S Rge 39 X West

Operator: License # 5598
Name APX Corporation
Address P. O. Box 351
City/State/Zip Liberal, Kansas 67905-0351

3960 Ft North from Southeast Corner of Section
1320 Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)

Purchaser Panhandle Eastern Pipe Line Co.
(Transporter)
Operator Contact Person M. L Pease
Phone (316) 624-6253

Lease Name Moeschl "A" Well # 2H

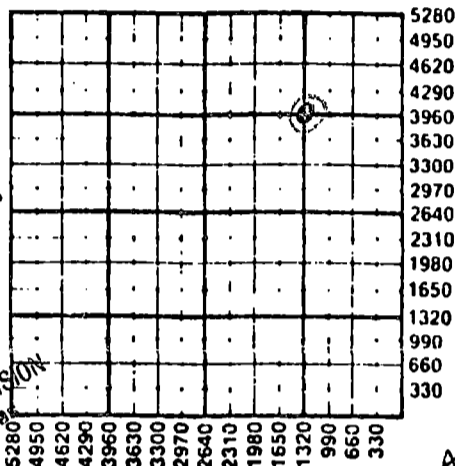
Field Name Hugoton

Name of New Formation Chase

Elevation: Ground 3251.6 KB NA

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 etc.)



Date of Original Completion: 10-25-88

DATE OF RECOMPLETION:

Commenced _____ Completed _____

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)?

RECEIVED
STATE CORPORATION COMMISSION
JAN 25 1989
1-25-89
CONSERVATION DIVISION
Wichita, Kansas

K.C.C. OFFICE USE ONLY
 Letter of Confidentiality Attached
 Wireline Log Received
 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 M. L Pease Title Division Production Mgr. Date 1/23/89
M. L Pease

Subscribed and sworn to before me this 24th day of January 19 89

Notary Public Glenna S. Salley Date Commission Expires _____

GLENN A. SALLEY
NOTARY PUBLIC
STATE OF KANSAS
MY APPT. EXPIRES 1-6-91
FORM ACO-2
5/88

JAN 26 1989

KANSAS GEOLOGICAL SURVEY
WICHITA BRANCH

SIDE TWO

Operator Name APX Corporation Lease Name Moeschl "A" Well # 2H

Sec 19 Twp 33S Rge 39 X East West County Morton

RELEASED

RECOMPLETED FORMATION DESCRIPTION:

JAN 28 1991

 Log Sample

FROM CONFIDENTIAL

Name Top Bottom

ADDITIONAL CEMENTING/SQUEEZE RECORD					
Purpose:	Depth		Type of Cement	# Sacks Used	Type & Percent Additives
	Top	Bottom			
<u>Perforate</u>					
<u>Protect Casing</u>					
<u>Plug Back TD</u>					
<u>Plug Off Zone</u>					

Shots Per Foot	PERFORATION RECORD	Acid, Fracture, Shot, Cement Squeeze Record
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)
<u>2</u>	<u>2688-2703, 2641-2669, 2574-2620, 2497-2554, 2462-2491, 2433-2443</u>	<u>Brk dwn w/20,500 gal 2% KCL wtr. Frac w/135,000 gal gelled 2% KCL wtr & 367,800# 12/20 sd.</u>

PBTD 2720 Plug Type

TUBING RECORD:

Size Set At Packer At Was Liner Run? Y X N

Date of Resumed Production, Disposal or Injection 1-9-89

Estimated Production Per 24 Hours bbl/oil bbl/water

1450 MCF gas gas-oil ratio @ 60 psig