

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

Operator: License # 32119

Name: Northern Natural Gas

Address P.O. Box 178

City/State/Zip Cunningham, KS 67035

Purchaser: N/A

Operator Contact Person: Dan Dobbins

Phone (316) 298-5111

Contractor: Name: Pratt Well Service

License: 5893

Wellsite Geologist: None

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD SLOW Temp. Abd.

Gas ENHR SIGW

Dry Other (Core, WSW, Expl., Cathodic, etc)

Gas Storage

If Workover:

Operator: Northern Natural Gas

Well Name: House 2-34

Comp. Date 10/16/78 Old Total Depth 4332'

XXX RAN LINER INTO LOWER PART OF HOLE

Deepening Re-perf. Conv. to Inj/SWD

Plug Back PBTD

Commingled Docket No. _____

Dual Completion Docket No. _____

Other (SWD or Inj?) Docket No. _____

8/28/97 9/3/97 9/10/97

Date of START OF WORKOVER **Date Reached TD** **Completion Date of WORKOVER**

API NO. 15- 151-20558-0001

County Pratt

SW - SE - SW - SE Sec. 2 Twp. 28S Rge. 11 X ^E _W

50 Feet from S (circle one) Line of Section

1850 Feet from E (circle one) Line of Section

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

Lease Name House Well # 2-34

Field Name Cunningham

STORAGE
~~Producing~~ Formation Simpson/Viola

Elevation: Ground 1770 KB 1778

Total Depth 4430 PBTD 4417

Amount of Surface Pipe Set and Cemented at 1495 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 1500

feet depth to Surface w/ 650 sx cmt.

Drilling Fluid Management Plan REWORK JTD 12-22-97
(Data must be collected from the Reserve Pit)

Chloride content 14,000 ppm Fluid volume 220 bbls

Dewatering method used N/A

Location of fluid disposal if hauled offsite:

Operator Name Geary Mud Disposal

Lease Name Gray License No. 284168

_____ Quarter Sec. 15 Twp. 14N Rng. 7 ^E _W

County Garfield, OK Docket No. 284168

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, 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.

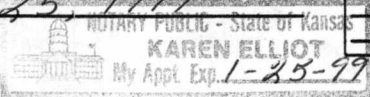
Signature Dan Dobbins

Title Sr. Reservoir Analyst Date 12-10-97

Subscribed and sworn to before me this 10th day of December, 19 97.

Notary Public Karen Elliot

Date Commission Expires January 25, 1999



K.C.C. OFFICE USE ONLY		
F	<input checked="" type="checkbox"/>	Letter of Confidentiality Attached
C	<input checked="" type="checkbox"/>	Wireline Log Received
C	<input type="checkbox"/>	Geologist Report Received
Distribution		
<input checked="" type="checkbox"/>	KCC	<input type="checkbox"/> SWD/Rep
<input type="checkbox"/>	KGS	<input type="checkbox"/> Plug
<input type="checkbox"/>		<input type="checkbox"/> NGPA
<input type="checkbox"/>		<input type="checkbox"/> Other (Specify)

SIDE TWO

Operator Name Norther Natural Gas Lease Name House Well # 2-34
 Sec. 2 Twp. 28S Rge. 11 East County Pratt
 West

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 checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datums	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Viola	4258	-2480
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Simpson	4366	-2588
List All E.Logs Run: Cement Bond Log Dual Induction Laterolog Compensated Density Dual Spaced Neutron				

CASING RECORD <input checked="" 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
Conductor	20"	13 3/8"	48#	141	Common	200	-----
Surface	12 1/4"	8 5/8"	24#	1500	Reg Poz Mix	650	18% Salt
Production	7 7/8"	5 1/2"	15 1/2#	4333	Reg Poz Mix		2% Gel, 1/4# Flocele 18% Salt, 5# Gil

ADDITIONAL CEMENTING/SQUEEZE RECORD				
Purpose: Set Liner	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	4312-4430	Standard	25	5# Gil, 18% Salt 1/4# Flocele Calseal

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	4367-4387		
4	4260-4300			

TUBING RECORD		Size 2 7/8"	Set At 4344	Packer At 4208	Liner Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj. Storage Observation Well			Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)		
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

Disposition of Gas: **METHOD OF COMPLETION** **Production Interval**

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled _____
 (If vented, submit ACO-18.) Other (Specify) _____

ORIGINAL



Natural gas. Electricity.
Endless possibilities.™

December 11, 1997

Kansas Corporation Commission
130 South Market #2078
Wichita, KS 67202-3802

RECEIVED
STATE CORPORATION COMMISSION

DEC 13 1997

RE: Form AC0-1

CONSERVATION DIVISION
WICHITA, KANSAS

Please find enclosed the completion reports for the Greider 35-21, Cannon 20-33, House 2-34, and Funke 25-11 in our storage field. The cementing tickets and electrical logs are also included. There will not be any geologist well report filed as we did not have a geologist on site for the well deepening.

If you need more information please call me at 316-257-5146 or 316-298-5111.

Thanks,

A handwritten signature in cursive script that reads "Rebecca Mosshart".

Rebecca Mosshart
Sr. O & M Tech

ORIGINAL

INVOICE



HALLIBURTON ENERGY SERVICES, INC.

REMIT TO: P.O. BOX 951046 DALLAS, TX 75395-1046 Corporate FIN 73-0271280

INVOICE NO.	DATE
307850	09/05/199

WELL LEASE NO./PROJECT	WELL/PROJECT LOCATION	STATE	OWNER
HOUSE 2-34	PRATT	KS	SAME
SERVICE LOCATION	CONTRACTOR	JOB PURPOSE	TICKET DATE
PRATT	PRATT WELL SERVICE	SHOWN BELOW	09/05/199
ACCT. NO.	CUSTOMER AGENT	VENDOR NO.	CUSTOMER PO NUMBER
634280	W A MERRICK		L 4420 7 008
		SHIPPED VIA	FILE NO.
		COMPANY TRUCK	2974

ORIGINAL

NORTHERN NATURAL GAS CO
BOX 178
CUNNINGHAM, KS 67035

DIRECT CORRESPONDENCE TO:
1102 E. 8TH
HAYS KS 67601
913-625-3431

REFERENCE NO.	DESCRIPTION	QUANTITY	UM	UNIT PRICE	AMOUNT
PRICING AREA - MID CONTINENT					
JOB PURPOSE - CEMENT PRODUCTION LINER					
000-117	MILEAGE CEMENTING ROUND TRIP	36 MI		3.20	115.20
		1 UNT			
000-119	MILEAGE FOR CREW	36 MI		1.95	70.20
		1 UNT			
009-407	CEMENTING LINERS/SHORT CASING	4429 FT		2,019.00	2,019.00
009-019		1 UNT			
504-308	CEMENT - STANDARD	50 SK		10.83	541.50
508-291	GILSONITE BULK	125 LB		.50	62.50
509-968	SALT	300 LB		.17	51.00
507-775	HALAD-322	14 LB		7.70	107.80
507-970	D-AIR 1, POWDER	6 LB		3.65	21.90
509-406	ANHYDROUS CALCIUM CHLORIDE	1 SK		46.90	46.90
507-210	FLOCELE	6 LB		1.90	11.40
508-127	CAL SEAL 60	1 SK		28.00	28.00
500-207	BULK SERVICE CHARGE	61 CFT		1.55	94.55
500-306	MILEAGE CMTG MAT DEL OR RETURN	47.43 TMI		1.18	110.00M
JOB PURPOSE SUBTOTAL					3,279.95
INVOICE SUBTOTAL					3,279.95
DISCOUNT-(BID)					655.99-
INVOICE BID AMOUNT					2,623.96
*- KANSAS STATE SALES TAX					125.84
*- PRATT COUNTY SALES TAX					25.68
Simpson Project 543828 LF					
INVOICE TOTAL - PLEASE PAY THIS AMOUNT =====>					\$2,775.48

RECEIVED
STATE CORPORATION COMMISSION
DEC 13 1997
CONSERVATION DIVISION
Wichita, Kansas

TERMS: If Customer does not have an approved open account with Halliburton, all sums due are payable in cash at the time of performance of services or delivery of equipment, products or materials. If customer has an approved open account, invoices are payable on the twentieth day after date of invoice. Customer agrees to pay interest on any unpaid balance from the date payable until paid at the highest lawful contract rate applicable, but never to exceed 18% per annum. In the event Halliburton employs an attorney for collection of any account, Customer agrees to pay attorney fees of 10% of the unpaid amount.



TICKET CONTINUATION

CUSTOMER COPY

TICKET No. *2012*

HALLIBURTON ENERGY SERVICES

FORM 1911 R-10

CUSTOMER *Northern Natural Gas Co.* WELL *House 2-34* DATE *9-5-97* PAGE *2* OF *2*

PRICE REFERENCE	SECONDARY REFERENCE PART NUMBER	ACCOUNTING			DESCRIPTION	QTY		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
504-309	516.00261	1			Standard Cement	50	SK			10.83	541
508-271	516.00337	1			Bilsonite Bld 5#/SK	125	1/65			50	62
509-968	516.00158	1			Salt Bld 18%	300	1/65			17	51
507-715	516.00144	1			Haled-322 Bld .6%	14	1/65			7.70	107
507-970	870.15764	1			D-A-1 BH .25%	6	1/65			3.65	21
507-406	870.50812	1			Calcium Chloride BH 1%	1	SK			46.90	46
507-210	870.50011	1			Flocele Bld .25#/SK	6	1/65			1.90	11
507-137	870.50131	1			Calseal Bld 5%	1	SK			28.50	28
					<i>Loaded on TRK # 52530 - Front</i>						
ORIGINAL											
500-207		1			SERVICE CHARGE						
500-306		1			MILEAGE CHARGE	TOTAL WEIGHT	LOADED MILES	TON MILES			
						<i>5270</i>	<i>18</i>	<i>Minimum Charge</i>			<i>110.00</i>
										CONTINUATION TOTAL	

No. B 338306

CONTINUATION TOTAL *110.00*



JOB LOG 4239-5

TICKET #	57850	TICKET DATE	9-5-97
REGION	North America	NWA/COUNTRY	USA
MBU ID/EMP #	61622	EMPLOYEE NAME	TOOD A. SERBA
LOCATION	Pratt KS 25051	PSL DEPARTMENT	SP3M
TICKET AMOUNT		COMPANY	WNGC
WELL LOCATION	W LUNNINGHAM KS	WELL TYPE	OS
LEASE / WELL #	House 2-39	DEPARTMENT	CMT
		SEC / TWP / RNG	
		CUSTOMER REP PHONE	AET MERRICK
		API / UWI #	
		JOB PURPOSE CODE	055

HES EMP NAME/EMP#/(EXPOSURE HOURS)	HRS	HES EMP NAME/EMP#/(EXPOSURE HOURS)	HRS	HES EMP NAME/EMP#/(EXPOSURE HOURS)	HRS	HES EMP NAME/EMP#/(EXPOSURE HOURS)	HRS
T. SERBA 61622	5	T. SERBA 51216	4.5	B. Johnson 69726	4.5	D. SCOTT B9975	3.5

START NO.	TIME	RATE (BPM)	VOLUME (BBL)(GAL)	PUMPS		PRESS (psi)	JOB DESCRIPTION/REMARKS
				IT	C		
	06:30						called out
	12:30						on loc SAFETY MTG
	12:40						RTS START RUNNING LINES IN HOLE
	15:07						LINER ON BOTTOM CIRC. W/RTS
	15:30						Hook up to well
	15:35	2.5				620	START 1290 KCL Pre Flush
	15:43		18				START H2O Spooler
	15:49		3				MIX: Pump 25 SEC CMT @ 14.7 PPS
	15:53		6.9			650	Close IW - CLEAR Pump: LINES
	15:59						RELEASE Tbj Plug
	15:59					100	START Disp/W/H2O
	15:59		15			950	LIFTING CMT
	16:01					2200	RELEASED LINER Plug Continue Pumping
	16:02		20.2			2500	Plug down Release PST Float Hold
	1						Pull out of Linc Good Circ
	16:05						T.O.W. W/ D.P.

THANKS

CNCL AGAIN

TOOD
SCOTT
BRIAN
BEAD

