

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

Operator: License # 5208
Name: Mobil Oil Corporation
Address P.O. Box 2173
2319 North Kansas Avenue
City/State/Zip Liberal, KS 67905-2173
Purchaser: Spot Market
Operator Contact Person: Sharon Cook
Phone (316) 626-1142
Contractor: Name: Gibson Well Service
License: 5866
Wellsite Geologist: L. J. Reimer

Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD SIOH Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover:
Operator: Mobil Oil Corporation
Well Name: R. D. Gustason Well #1
Comp. Date 1-9-87 Old Total Depth 6425
 Deepening Re-perf. Conv. to Inj/SWD
 Plug Back 2950 PBDT
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____
1-14-98 2-4-98
~~Spud Date~~ Date Reached TD Completion Date
Commenced Recompletion

API NO. 15- 189-209370002
County Stevens
SW - NE RECEIVED Sec. 32 Twp. 32 Rge. 38 X E
1520 Feet from SW (circle one) Line of Section
3890 Feet from EW (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
NE, (SE) NW or SW (circle one)
Lease Name W. J. Davis #1 Unit Well # 2
Field Name Hugoton
Producing Formation Chase
Elevation: Ground 3189 KB 3199
Total Depth 6425 PBDT 2950
Amount of Surface Pipe Set and Cemented at 1718 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set NA Feet
If Alternate II completion, cement circulated from NA
feet depth to NA w/ NA sx cmt.

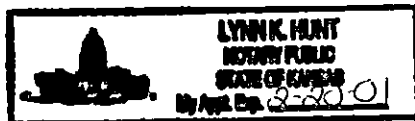
Drilling Fluid Management Plan Re-work, 6-5-98 UCC.
(Data must be collected from the Reserve Pit)
Chloride content NA ppm Fluid volume NA bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: _____
Operator Name NA
Lease Name _____ License No. _____
Quarter Sec. Twp. S Rng. E/W
County _____ Docket No. _____

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 Sharon A. Cook Sharon A. Cook
Title Regulatory Asst. Date 4-13-98
Subscribed and sworn to before me this 13th day of April,
19 96.
Notary Public Lynd K. Hunt
Date Commission Expires 2-20-01
8-34.kcc

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other
(Specify)



Operator Name Mobil Oil Corporation Lease Name W. J. Davis #1 Unit Well # 2
 Sec. 32 Twp. 32 Rge. 38 East County Stevens
 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 type="checkbox"/> No	<input type="checkbox"/> Log Formation (Top), Depth and Datums <input type="checkbox"/> Sample Name Top Datum NO CHANGE
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Cores Taken	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
List All E.Logs Run:	NO CHANGE	

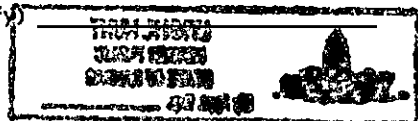
CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs./Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
NO CHANGE							

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 SPF	2530-40	Acid: 1,000 gals 7.5% HCL	
	2570-80	Frac'd: 56,028 gals Wf130 in 70q foam	
	2640-54	107,900 lbs 16/30 sand	
	2692-2702		

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj. 2-4-98	Producing Method <input checked="" 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
		341		

Disposition of Gas: Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled 2530
 (If vented, submit ACO-18.) Other (Specify) 2702



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

Operator: License # 5208
Name Mobil Oil Corporation
Address P.O. Box 5444
City/State/Zip Denver, CO 80217

Purchaser No oil or gas sales
T/A

Operator Contact Person J. E. Dawson
Phone (303) 298-2696

Contractor: License # 9137
Name Unit Drilling & Expl. Co.

Wellsite Geologist
Phone

Designate Type of Completion

XX New Well Re-Entry Workover
Oil SWD Temp Abd
X Gas Inj Delayed Comp.
Dry Other (Core, Water Supply etc.)

If ONWO: old well info as follows:

Operator
Well Name
Comp. Date Old Total Depth

WELL HISTORY

Drilling Method:

XX Mud Rotary Air Rotary Cable

12/30/86 1/6/87 1/9/87
Spud Date Date Reached TD Completion Date
6425 2950
Total Depth PBD

Amount of Surface Pipe Set and Cemented at 1718 feet
Multiple Stage Cementing Collar Used? Yes XX No
If yes, show depth set feet
If alternate 2 completion, cement circulated from feet depth to w/ SX cmt
Cement Company Name
Invoice #

API NO. 15-189-20937 ORIGINAL
County Stevens
SW NE SW Sec. 32 Twp. 32S Rge. 38 East
38 West

1520 Ft North from Southeast Corner of Section
3890 Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)

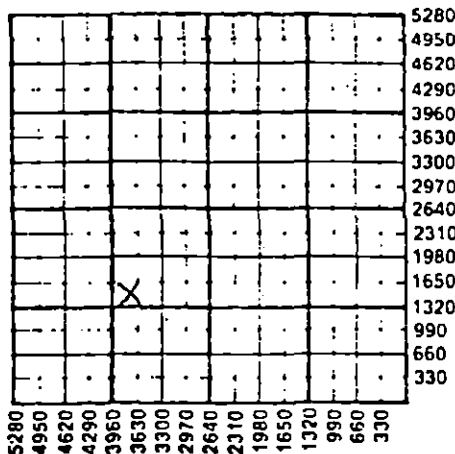
Lease Name R.D. Gustason Well #

Field Name Gentzler

Producing Formation Morrow

Elevation: Ground 3189 KB 3205

Section Plat



WATER SUPPLY INFORMATION

Disposition of Produced Water: Disposal
Docket # Repressuring

Questions on this portion of the ACO-1 call:
Water Resources Board (913) 296-3717

Source of Water:
Division of Water Resources Permit # J-86-431

X Groundwater 1620 Ft North from Southeast Corner
(Well) 3255 Ft West from Southeast Corner of
Sec 32 Twp 32S Rge 38 East X West

Surface Water Ft North from Southeast Corner
(Stream, pond etc) Ft West from Southeast Corner
Sec Twp Rge East West

Other (explain) (purchased from city, R.W.D. #)

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 spud date of any well. Rule 82-3-130, 82-3-107 and 82-3-106 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 drillers time log shall be attached with this form. 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 J. E. Dawson
Producing Accounting Supervisor Date 2/26/87

Subscribed and sworn to before me this 26th day of February 1987
Notary Public Donald Cavette
MY COMMISSION EXPIRES 7/2/90
Date Commission Expires

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)

Operator Name Mobil Oil Corporation Lease Name R. Gustason Well # 3

Sec. 32 Twp. 32S Rge. 38 East West County Stevens

WELL LOG

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
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No

Formation Description
 Log Sample

Name	Top	Bottom
Chase	2463	
Council Grove	2797	
Admire	3041	
Wabaunsee	3232	
Shawnee	3590	
Heebner	4481	
Lansing	4575	
Kansas City	4780	
Marmaton	5150	
Cherokee	5277	
Morrow	5680	
Chester	6132	
St. Genevieve	6297	
T.D.	6475	

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 1/2	8 5/8	24	1718	H-Lite	750	2% CC
					G	100	2% CC
Production	7 7/8	5 1/2	14	3030	50/50H	375	2% CaCl 2% gel
					50/50 H	90	2% CaCl

Shots Per Foot	Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
	N/A	N/A	

TUBING RECORD Size N/A Set At Packer at Liner Run Yes No

Date of First Production T/A Producing Method Flowing Pumping Gas Lift Other (explain)

Estimated Production Per 24 Hours	Oil Bbls	Gas MCF	Water Bbls	Gas-Oil Ratio CFPB	Gravity

METHOD OF COMPLETION Production Interval

Disposition of gas: Vented Open Hole Perforation
 Sold Other (Specify) N/A
 Used on Lease Dually Completed
 Commingled