

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- 189-209970001

County Stevens
- C - N2 - NW Sec. 15 Twp. 32S Rge. 35 E
X W

Operator: License # 5208

660 Feet from S (circle one) Line of Section

Name: Mobil Oil Corporation

1320 Feet from E (circle one) Line of Section

Address P.O. Box 2173

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

2319 North Kansas Avenue

Lease Name McCulley #1-A Unit Well # 2

City/State/Zip Liberal, KS 67905-2173

Field Name Hugoton

Purchaser: Spot Market

Producing Formation Chase

Operator Contact Person: Sharon Cook

Elevation: Ground 2999 KB 3010

Phone (316) 626-1142

Total Depth 6350 PBTB 2868

Contractor: Name: Best Well Service

Amount of Surface Pipe Set and Cemented at 1850 Feet

License: _____

Multiple Stage Cementing Collar Used? Yes X No

Wellsite Geologist: L. J. Reimer

If yes, show depth set NA Feet

Designate Type of Completion
_____ New Well _____ Re-Entry X Workover

If Alternate II completion, cement circulated from NA

_____ Oil _____ SWD _____ SLOW _____ Temp. Above _____
X Gas _____ ENHR _____ SIGW _____ KANSAS CORPORATION
_____ Dry _____ Other (Core, WSW, Expl., Cathodic, etc) _____

feet depth to NA w/ NA sx cmt.

If Workover:

Drilling Fluid Management Plan REWORK 8/4 4-22-97
(Data must be collected from the Reserve Pit)

Operator: ARCO Oil & Gas Co.

Chloride content NA ppm Fluid volume NA bbls

Well Name: Glenn McCulley #2

Watering method used _____

Comp. Date 2-23-87 Old Total Depth 6350

Location of fluid disposal if hauled offsite: _____

X Rename
_____ Deepening XXX Re-perf. _____ Conv. to Inj/SWD
X Plug Back 2868 PBTB
_____ Commingled _____ Docket No. _____
_____ Dual Completion _____ Docket No. _____
_____ Other (SWD or Inj?) _____ Docket No. _____

Operator Name NA

Lease Name _____ License No. _____

6-8-96 --- 6-27-96
Spud Date Date Reached TD Completion Date
Commenced Recompletion

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 8-19-96

Subscribed and sworn to before me this 19th day of August,
19 96.

Notary Public Dana S. Bailey

Date Commission Expires August 30, 1999

6-164 .kcc

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



Operator Name Mobil Oil Corporation Lease Name McCulley #1-A Unit Well # 2

Sec. 15 Twp. 32S Rge. 35 East West County Stevens

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 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	NO CHANGE	
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input checked="" 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 Surface	12 1/4"	8 5/8"	24	1850'	Premium Lite Class H	925	
Production	7 7/8"	5 1/2"	15.5	3256'	50/50 Poz	645	2% CaCl ₂

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
1 SPF	2660-2670	Acid: 1,000 gals 7.5% HCL	
	2696-2711	Frac'd: 16,926 gals 20# Crosslink gel	
	2748-2763	58,300 lbs 12/20 Brady Sand	

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.	Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
6-19-96				
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity
		411		

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval _____ 2660 _____ 2763