

SIDE ONE

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

Operator: License # 5208
Name MOBIL OIL CORPORATION
Address P.O. BOX 5444
City/State/Zip DENVER, COLORADO 80217

Purchaser NORTHERN NATURAL GAS

Operator Contact Person B. R. MAYNARD
Phone (303) 298-2069

Designate Type of Original Completion
 New Re-Entry Workover

Oil SWD Temp Abd
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply, etc)

Date of Original Completion: TA'D 8-30-85

DATE OF RECOMPLETION
12-18-85 1-2-86
Commenced Completed

Designate Type of Recompletion / Workover:
 Deepening Delayed Completion
 Plug Back Re-perforation
 Conversion to Injection / Disposal

Is recompletion production:
 Commingled; Docket No. _____
 Dual Completion; Docket No. _____
 Other (Disposal or Injection)?

FORMALLY: BOB L. MOORE WELL #1
API No. 15- 189-20850-00-01
COUNTY STEVENS
SW SE Sec 23 Twp 32S Rge 35 X East West

660 Ft North from Southeast Corner of Section
1980 Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)

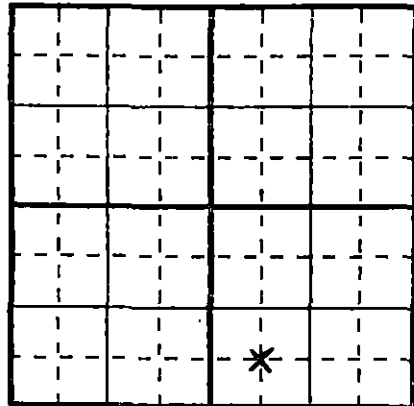
Lease Name MOORE #2 UNIT WELL # 3

Field Name BOLES

Name of New Formation U. CHESTER

Elevation: Ground 2979.5 FT. KB 2995.5 FT.

SECTION PLAT



RECEIVED
STATE CORPORATION COMMISSION
JAN - 3 1989
CONSERVATION DIVISION
Wichita, Kansas

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Logs Received
C Drillers Time-log Received
Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other
(Specify)
1-3-89 X(1)

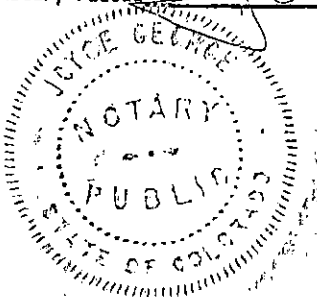
INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the recompletion of any well. Rules 82-3-107 and 82-3-141 apply. Information on side two of this form will be held confidential 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-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 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 B. R. Maynard B. R. MAYNARD Title REGULATORY COMPLIANCE MANAGER Date 12/30/88

Subscribed and sworn to before me this 30th day of December 19 88

Notary Public Joyce George Date Commission Expires 1/3/91



SIDE TWO

FORMALLY: BOB L. MOORE WELL #1

Operator Name MOBIL OIL CORPORATION Lease Name MOORE #2 UNIT Well # 3

Sec 23 Twp 32S Rge 35 XX East West County STEVENS

RECOMPLETION FORMATION DESCRIPTION

Name	_XX_ Log	Sample	
		Top	Bottom
CHASE		2632'	
COUNCIL GROVE		2972'	
ADMIRE		3245'	
WABAUNSEE		3362'	
SHAWNEE		3778'	
HEBNER		4200'	
LANSING		4292'	
KANSAS CITY		4628'	
MARMATON		5020'	
CHEROKEE		5225'	
MORROW		5630'	
CHESTER		5895'	

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth		Type of Cement	# Sacks Used	Type & Percent Additives
	Top	Bottom			
Perforate					
Protect Casing					
Plug Back TD					
Plug Off Zone					

Shots Per Foot	PERFORATION RECORD	Acid, Fracture, Shot, Cement Squeeze Record
	Specify Footage of Each Interval Perforated	
2 SPF	5964'-5994'	FRAC'D W/33,080 GAL VERSAGELL 1300 W/47,280# 16/30 SAND

PBTD 6100' FT. Plug Type CAST IRON BRIDGE PLUG

TUBING RECORD:

Size 2-7/8' Set At 5950' FT. Packer At 5853' FT. Was Liner Run Y XX N

Date of Resumed Production, Disposal or Injection WAITING ON PIPELINE

Estimated Production Per 24 Hours: 0 bbl/oil 0 bb/water
650 MCF gas gas-oil ratio

