

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- 189-220630000

County Stevens _____ E

NE - SW - SW Sec. 31 Twp. 32 Rge. 35 X W

1250 Feet from S/N (circle one) Line of Section

1250 Feet from E/W (circle one) Line of Section

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

Lease Name Republic Fee #3 Unit Well # 4

Field Name Hugoton

Producing Formation Chase

Elevation: Ground 3017 KB 3026

Total Depth 2920 PBDT 2865

Amount of Surface Pipe Set and Cemented at 617 Feet

Multiple Stage Cementing Collar Used? Yes X 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 ALT 1 JH 1-28-97
(Data must be collected from the Reserve Pit)

Chloride content 13,000 ppm Fluid volume 0 bbls

Dewatering method used Waste Minimization Mud System

Location of fluid disposal if hauled offsite: .

Operator Name Mobil Oil Corporation

Lease Name _____ License No. 5208

Quarter _____ Sec. _____ Twp. _____ S Rng. _____ E/W

County _____ Docket No. _____

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: Norseman Drilling Inc.

License: 3779

Wellsite Geologist: L. J. Reimer

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

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

If Workover:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

_____ Deepening _____ Re-perf. _____ Conv. to Inj/SWD
_____ Plug Back _____ PBDT
_____ Commingled _____ Docket No. _____
_____ Dual Completion _____ Docket No. _____
_____ Other (SWD or Inj?) _____ Docket No. _____

4-16-96 _____ 4-20-96 _____ 5-7-96
Spud Date Date Reached TD Completion Date

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 Assistant Date 7-19-96

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

Notary Public Kathleen R. Poulton KANSAS CORPORATION COMMISSION

Date Commission Expires August 18, 1998

6-147.kcc

K.C.C. OFFICE USE ONLY

F Letter of Confidentiality Attached

C Wireline Log Received

C _____ Geologist Report Received

Distribution _____ SWD/Rep _____ NGPA
_____ Plug _____ Other
(Specify)

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JUL 24 1996



CEMENTING SERVICE REPORT

Schlumberger

Dowell

DOWELL SCHLUMBERGER INCORPORATED

TREATMENT NUMBER

DATE

277

4-17-96

DS

DISTRICT

12

03

DS-496-A PRINTED IN U.S.A.

WELL NAME AND NO. <i>Republic Fee #4</i>		LOCATION (LEGAL) <i>Sec. 31-32S-25W</i>		RIG NAME: <i>Worlsmar</i>	
FIELD-POOL <i>Hugoton</i>		FORMATION <i>SURF.</i>		WELL DATA:	
COUNTYPARISH <i>STEUBENS</i>		STATE <i>KS</i>		API. NO.	
NAME <i>MOBIL</i>		MUD TYPE		GRADE <i>45550</i>	
AND		MUD DENSITY		LESS FOOTAGE SHOE JOINT(S) <i>575</i>	
ADDRESS		MUD VISC.		Disp. Capacity <i>36.6</i>	
ZIP CODE		TOTAL			

ORIGINAL

SPECIAL INSTRUCTIONS
Barley cmt 8 5/8 as per customer's orders

IS CASING/TUBING SECURED? YES NO

LIFT PRESSURE *250* PSI CASING WEIGHT ÷ SURFACE AREA (3.14 x R²)

PRESSURE LIMIT *510* PSI BUMP PLUG TO *510* PSI

ROTATE RPM RECIPROCATE FT No. of Centralizers

Head & Plugs	<input type="checkbox"/> Double	<input type="checkbox"/> TBG	<input type="checkbox"/> D.P.	SQUEEZE JOB	
	<input type="checkbox"/> Single	<input type="checkbox"/> WEIGHT		TOOL	TYPE
	<input type="checkbox"/> Swage	<input type="checkbox"/> GRADE			DEPTH
	<input type="checkbox"/> Knockoff	<input type="checkbox"/> THREAD		TAIL PIPE: SIZE	DEPTH
				TUBING VOLUME	Bbbs
				CASING VOL. BELOW TOOL	Bbbs
				TOTAL	Bbbs
				ANNUAL VOLUME	Bbbs

JOB SCHEDULED FOR TIME: *0130* DATE: *4-17* ARRIVE ON LOCATION TIME: *0130* DATE: *4-17* LEFT LOCATION TIME: DATE:

TIME	PRESSURE		VOLUME PUMPED BBL		JOB SCHEDULED FOR			ARRIVE ON LOCATION		LEFT LOCATION	
	TBG OR D.P.	CASING	INCREMENT	CUM	INJECT RATE	FLUID TYPE	FLUID DENSITY	TIME	DATE	TIME	DATE
0001 to 2400											
0727		150	X			H2O	8.3				
0729		120	25	X	5.5	11	11				
0735		150	26	25	5.5	CMT	12.8				
0749		160	32	101	5.5	CMT	14.6				
0755				133							
0756		120	37	X	6	H2O	8.3				
0758		120		6	6	11	11				
0801		150		27	6	11	11				
0802		140		29	2	11	11				
0805		170		35	2	11	11				
0806		510		37	2	11	11				
0807											

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JUL 24 1996

REMARKS

SYSTEM CODE	NO. OF SACKS	YIELD CU. FT/SK	COMPOSITION OF CEMENTING SYSTEMS				SLURRY MIXED	
			BLS	DENSITY	BLS	DENSITY		
1.	225	1.89	530 #102 + 6% D-20 + 5% D-44 (below) + 3% D-29	76	12.8			
2.								
3.	150	1.22	530 #102 + 2.5% S-1 + 1/4 # D-29	32	14.6			
4.								
5.								
6.								

BREAKDOWN FLUID TYPE

HESITATION SQ. RUNNING SQ. CIRCULATION LOST YES NO

BREAKDOWN PSI FINAL PSI DISPLACEMENT VOL. *37* Bbbs

Washed Thru Perfs YES NO TO FT. MEASURED DISPLACEMENT WIRELINE

PERFORATIONS TO TO CUSTOMER REPRESENTATIVE *Russell Worley* DS SUPERVISOR *Ray Pearson*

CEMENTING SERVICE REPORT

Schlumberger

Dowell

DOWELL SCHLUMBERGER INCORPORATED

TREATMENT NUMBER	DATE
8290	
PAGE	DS
1	03-12
DISTRICT	
	WYSSSES, KS.

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WELL NAME AND NO. REpublic Fee #4	LOCATION (LEGAL) Sec. 31-32S-35W	RIG NAME: NORSEMAN Drilling Rig #2
FIELD-POOL HUGOTON	FORMATION CHASE	WELL DATA:
COUNTY/PARISH STEVENS	STATE KS.	API NO.
NAME Mobil	ORIGINAL	
AND		
ADDRESS	ZIP CODE	

SPECIAL INSTRUCTIONS Safely Cement 5 1/2 Long-String AS PER CUSTOMERS INSTRUCTIONS	
IS CASING/TUBING SECURED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
LIFT PRESSURE 1700 PSI	CASING WEIGHT ÷ SURFACE AREA (3.14 x R ²)
PRESSURE LIMIT 2000 PSI	BUMP PLUG TO 1240 PSI
ROTATE RPM	RECIPROCATATE FT No. of Centralizers

TIME	PRESSURE		VOLUME PUMPED BBL		JOB SCHEDULED FOR			ARRIVE ON LOCATION		LEFT LOCATION	
	TBG OR D.P.	CASING	INCREMENT	CUM	TIME	DATE	TIME	DATE	TIME	DATE	
0001 to 2400											
											SERVICE LOG DETAIL
1305	1500		X				H2O	8.3			PRE-JOB SAFETY MEETING
1306	210	25	X	5.7			"	8.3			PRESS. TEST Lines
1311	290	65	25	5.7			CMT	11.5			START H2O
1323	130	16	90	4			CMT	14.0			START & LEAD CMT.
1327				106			H2O	8.3			START & LEAD CMT.
1329	106		X	5.8			"	"			Shut Down Wash Top
1340	520			61			"	"			Recal Plug Start Disp.
1341	490			62			"	"			LOWER RATE
1344	580			69			"	"			PST check
1345	1240			70			"	"			Bump Plug
1346											bleeding check float
1349	1200										Refler. Plug
1351											bleeding check float

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KANSAS CORPORATION COMMISSION
JUL 24 1996
CONSERVATION DIVISION
WICHITA, KS

REMARKS

SYSTEM CODE	NO. OF SACKS	YIELD CU. FT/SK	COMPOSITION OF CEMENTING SYSTEMS			SLURRY MIXED	
						BBLs	DENSITY
1.	135	2.75	C+ 3% D79 + 0.2% D46 + 1/4 #1sk D 39			65	11.5
2.							
3.	70	1.37	C+ 2% B 28 + 2% S1 + 0.6% D.60 + 0.2% D46			16	14.8
4.							
5.							
6.							

BREAKDOWN FLUID TYPE	VOLUME	DENSITY	PRESSURE	MAX. 1240 MIN: 130
<input type="checkbox"/> HESITATION SQ.	<input type="checkbox"/> RUNNING SQ.	CIRCULATION LOST	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Cement Circulated To Surf. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
BREAKDOWN	PSI	FINAL	PSI	DISPLACEMENT VOL. 70 Bbls
Washed Thru Perfs	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	TO	FT.	MEASURED DISPLACEMENT <input checked="" type="checkbox"/>
PERFORATIONS	TO	TO	CUSTOMER REPRESENTATIVE	DS SUPERVISOR
			Russell WDRLEY	RJ Pearson