

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

API NO. 15- 189-220190000

County Stevens
-E/2- SE -SW Sec. 3 Twp. 32S Rge. 35 X E

Operator: License # 5208

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

Name: Mobil Oil Corporation

2500 Feet from E/W (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 Helmley "A" #1 Unit Well # 3

City/State/Zip Liberal, KS 67905-2173

Field Name Hugoton

Purchaser: Spot Market

Producing Formation Chase

Operator Contact Person: Sharon Cook

Elevation: Ground 2997 KB 3006

Phone (316) 626-1142

Total Depth 2894 PBDT 2846

Contractor: Name: Norseman Drilling Inc.

Amount of Surface Pipe Set and Cemented at 624 Feet

License: 3779

Multiple Stage Cementing Collar Used? Yes X No

Wellsite Geologist: L. J. Reimer

If yes, show depth set NA Feet

Designate Type of Completion

If Alternate II completion, cement circulated from NA

X New Well Re-Entry Workover

feet depth to NA w/ NA sx cmt.

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

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

If Workover:

Chloride content 4,500 ppm Fluid volume 260 bbls

Operator: _____

Dewatering method used Waste Minimization Mud System

Well Name: _____

Location of fluid disposal if hauled offsite:

Comp. Date _____ Old Total Depth _____

Operator Name Mobil Oil Corporation

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

Lease Name William Rapp #1 SWDW License No. 5208

11-21-95 11-27-95 12-6-96
Spud Date Date Reached TD Completion Date

NW Quarter Sec. 13 Twp. 31 S Rng. 36 E/W

County Stevens Docket No. D-19,690

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 2-8-96

Subscribed and sworn to before me this 8th day of February, 19 96.

Notary Public Dana S. Bailey

Date Commission Expires August 30, 1999
6-73.kcc

2-9-96

K.C.C. OFFICE USE ONLY 1006

F Letter of Confidentiality Attached

C Wireline Log Received

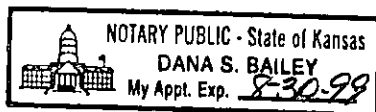
C Geologist Report Received

DISTRIBUTION

KCC SWD/Rep NGPA

KGS Plug Other

(Specify)



Operator Name Mobil Oil Corporation Lease Name Helmley "A" #1 Unit Well # 3
 Sec. 3 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets.) Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Submit Copy.) List All E.Logs Run: <p style="text-align: center;">NO LOGS RUN</p>	<input type="checkbox"/> Log Formation (Top), Depth and Datums <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">Name</td> <td style="width:33%;">Top</td> <td style="width:33%;">Datum</td> </tr> </table>	Name	Top	Datum
Name	Top	Datum		

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
Surface Casing	12.250	8.625	24#	624	Class C Class C	225 100	50:50 C/poz 50:50 C/poz
Production Casing	7.875	5.500	14#	2883	Class C	125	2% B28

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	2684-2704	Acid: 4,000 gals 15% HCL	
	2730-2750		

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. 12-4-95		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 151 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 2684
 (If vented, submit ACO-18.) Other (Specify) _____ 2750

CEMENTING SERVICE REPORT

Schlumberger

Dowell

DOWELL SCHLUMBERGER INCORPORATED

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

TREATMENT NUMBER	03-12-7874	DATE	11-26-95
STAGE	DS	DISTRICT	UKS 03-12

WELL NAME AND NO.	LOCATION (LEGAL)	RIG NAME:
Heimley A #1-3	SEC. 3-32S-35W	
FIELD-POOL	FORMATION	WELL DATA:
HUGOTON	CHASE	BIT SIZE
COUNTY/PARISH	STATE	CSG/Liner Size
STEVENS Co. 189	KS 15	5 1/2
	API. NO.	TOTAL DEPTH
		2894
		WEIGHT
		14 #
		<input type="checkbox"/> ROT <input type="checkbox"/> CABLE
		FOOTAGE
		2883
		MUD TYPE
		GRADE
		555
		<input type="checkbox"/> BHST
		THREAD
		8 RD
		MUD DENSITY
		5.0
		LESS FOOTAGE SHOE JOINT(S)
		31
		MUD VISC.
		Disp. Capacity
		65.5

ORIGINAL

NAME	MOBIL OIL CORP.
AND	
ADDRESS	
ZIP CODE	

SPECIAL INSTRUCTIONS

Safely Cmt. 5 1/2 Long string w/ 125 SKS Class 'C' + 2% B28 + 2% S1 + 0.6% D60 + 0.2% D46 as DIRECTED BY THE CUSTOMER.

IS CASING/TUBING SECURED?	<input type="checkbox"/> YES <input type="checkbox"/> NO
LIFT PRESSURE	390 PSI
CASING WEIGHT ÷ SURFACE AREA	(3.14 x R ²) 16.97
PRESSURE LIMIT	500 OVER PSI
BUMP PLUG TO	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											
14:45											PRE-JOB SAFETY MEETING
14:54		2840					H2O	8.34			PRESSURE TEST
14:56		10	15		5.8		H2O	8.34			START H2O AHEAD
15:00		160	30.5	15	5.8		CMT	14.8			START Cement Slurry
15:11		90		45.5							SHUT DOWN / DROP TOP PLUG
15:11			69.5		5.8		H2O	8.34			START Displacement
15:16		90		29.8	5.8		H2O	8.34			PSI Check
15:21		340		60.0	2.0		H2O	8.34			PSI Check / Lower Rate
15:27		1200		70.0			H2O	8.34			SHUT DOWN / Bump Top Plug
15:28											Bleed Lines / check float
15:30											End Job

RECEIVED KANSAS CORPORATION COMMISSION

REMARKS

SYSTEM CODE	NO. OF SACKS	YIELD CU. FT/SK	COMPOSITION OF CEMENTING SYSTEMS				SLURRY MIXED	
							BBLs	DENSITY
1.	125	1.37	Class 'C' + 2% B28 + 2% S1 + 0.6% D60 + 0.2% D46				30.5	14.8
2.								
3.								
4.								
5.								
6.								

FEB 09 CONSERVATION DIVISION WICHITA, KS

BREAKDOWN FLUID TYPE	VOLUME	DENSITY	PRESSURE	MAX.	MIN:
<input type="checkbox"/> HESITATION SQ.	30.5	14.8			
<input type="checkbox"/> RUNNING SQ.					
<input type="checkbox"/> CIRCULATION LOST					
<input type="checkbox"/> YES <input type="checkbox"/> NO					
Cement Circulated To Surf.					
<input type="checkbox"/> YES <input type="checkbox"/> NO					
BREAKDOWN	PSI	FINAL	PSI	DISPLACEMENT VOL.	Bbls
Washed Thru Perfs				69.5	
<input type="checkbox"/> YES <input type="checkbox"/> NO					
TO			FT.	MEASURED DISPLACEMENT	<input type="checkbox"/> WIRELINE
PERFORATIONS					
TO					
TO					
CUSTOMER REPRESENTATIVE	Jeff Asiter		DS	SUPERVISOR	
				Jon Sosa	

CEMENTING SERVICE REPORT

Schlumberger

Dowell

DOWELL SCHLUMBERGER INCORPORATED

DS-486-A PRINTED IN U.S.A.

TRAIL NUMBER	DATE
12-7866	11-22-95
STAGE	DS DISTRICT
	ULYSSES, KS

WELL NAME AND NO. HEMLEY A#1-3	LOCATION (LEGAL) SEC 3-22S-3SW
FIELD-POOL HUGOTON	FORMATION SURFACE
COUNTY/PARISH STEVENS	STATE KS
API. NO.	
NAME MOBIL OIL CORP.	
ADDRESS	
ZIP CODE	

RIG NAME: NORSMAN #2	WELL DATA:	BOTTOM	TOP
BIT SIZE 12 1/4	CSG/Liner Size 8 5/8		
TOTAL DEPTH 1229	WEIGHT 24		
<input checked="" type="checkbox"/> ROT <input type="checkbox"/> CABLE	FOOTAGE 624		
MUD TYPE	GRADE U5550		
<input type="checkbox"/> BHST <input type="checkbox"/> BHCT	THREAD 8RD		
MUD DENSITY	LESS FOOTAGE SHOE JOINT(S) 41		
MUD VISC.	Disp. Capacity 37.1		

ORIGINAL

SPECIAL INSTRUCTIONS SAFELY CEMENT 8 5/8 SURFACE CASING WITH 225 SKS OF LEAD AND 100 SKS OF TAIL AS DIRECTED BY THE CUSTOMER.

IS CASING/TUBING SECURED? YES NO

LIFT PRESSURE 221 PSI CASING WEIGHT ÷ SURFACE AREA (3.14 x R²)

PRESSURE LIMIT 500 OVER PSI BUMP PLUG TO 510 PSI

ROTATE RPM RECIPROCAT FT No. of Centralizers

NOTE: Include Footage From Ground Level To Head In Disp. Capacity		
Float	TYPE BAFFLE PLATE	DEPTH 583
STAGE TOOL	TYPE CMT NOSE	DEPTH 624
Head & Plugs	<input type="checkbox"/> TBG <input type="checkbox"/> D.P.	SQUEEZE JOB
<input type="checkbox"/> Double	SIZE	TOOL TYPE
<input type="checkbox"/> Single	WEIGHT	DEPTH
<input type="checkbox"/> Swage	GRADE	TAIL PIPE: SIZE DEPTH
<input type="checkbox"/> Knockoff	THREAD	TUBING VOLUME Bbls
TOP <input checked="" type="checkbox"/> R <input type="checkbox"/> W	<input type="checkbox"/> NEW <input type="checkbox"/> USED	CASING VOL. BELOW TOOL Bbls
BOT <input type="checkbox"/> R <input type="checkbox"/> W	DEPTH	TOTAL Bbls
		ANNUAL VOLUME Bbls

TIME	PRESSURE		VOLUME PUMPED BBL		JOB SCHEDULED FOR			ARRIVE ON LOCATION		LEFT LOCATION	
	TBG OR D.P.	CASING	INCREMENT	CUM	TIME: 0030	DATE: 11-22-95	TIME: 0030	DATE: 11-22-95	TIME: 0410	DATE: 11-22-95	
0001 to 2400											
0200										PRE-JOB SAFETY MEETING	
0226	2000						H2O	8.34		PRESSURE TEST LINES	
0227		Ø	25		5.8		H2O	8.34		START H2O SPACER	
0233		150	76	25	5.9		CMT	12.8		START LEAD SLURRY	
0246		170	22	101	5.9		CMT	14.6		START TAIL SLURRY	
0251		Ø		123						SHUT DOWN / DROP TOP PLUG	
0255		Ø	38		5.4		H2O	8.34		START Displacement	
0301		160		26	4.6		H2O	8.34		PSI CHECK	
0306		170		37	2.3		H2O	8.34		PSI CHECK	
0307		510		38						STOP PUMP / PLUG DOWN	
0308		510								CLOSE MANIFOLD	
0310										Bleed LINES / END JOB	

REMARKS

SYSTEM CODE	NO. OF SACKS	YIELD CU. FT/SK	COMPOSITION OF CEMENTING SYSTEMS				SLURRY MIXED	
							BBLs	DENSITY
1.	225	1.89	50/50 po2/c + 6% D20 + 3% SI + 5% D44 (Bwov) + 1/4 #/sk D29				75.7	12.8
2.	100	1.22	50/50 po2/c + 2.5% SI + 1/4 #/sk D29				21.7	14.6
3.								
4.								
5.								
6.								

BREAKDOWN FLUID TYPE	VOLUME	DENSITY	PRESSURE	MAX.	MIN: 45 SKS
<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. 38 Bbls	TYPE OF WELL	<input type="checkbox"/> OIL <input type="checkbox"/> STORAGE <input type="checkbox"/> BRINE WATER
Washed Thru Perfs	<input type="checkbox"/> YES <input type="checkbox"/> NO	TO	MEASURED DISPLACEMENT <input type="checkbox"/>	<input type="checkbox"/> GAS <input type="checkbox"/> INJECTION	<input type="checkbox"/> WILDCAT
PERFORATIONS	TO	TO	CUSTOMER REPRESENTATIVE	DS	SUPERVISOR
			JEFF LASITER		Russ WAGSTAFF