

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: Bruce Well Service

License: 07407

Wellsite Geologist: L. J. Reimer

Designate Type of Completion
 New Well Re-Entry Workover

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

If Workover:

Operator: Mobil Oil Corporation

Well Name: Brownell #1 Unit Well #2

Comp. Date 8-8-85 Old Total Depth 6450

Deepening Re-perf. Conv. to Inj/SWD
 Plug Back 2930 PBTD
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

12-2-95 1-5-96
Spud Date Date Reached TD Completion Date
Commenced Recompletion

API NO. 15- 189-208560001

County Stevens

- SW - SW - SW Sec. 6 Twp. 32S Rge. 35 X W E

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

660 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 Brownell #1 Unit Well # 2

Field Name Hugoton

Producing Formation Chase

Elevation: Ground 3035 KB 3051

Total Depth 6450 PBTD 2930

Amount of Surface Pipe Set and Cemented at 1811 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 cnt.

Drilling Fluid Management Plan "O.W.W.O."
(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. _____

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KANSAS CORP COM
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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 1-30-96

Subscribed and sworn to before me this 30th day of January, 19 96.

Notary Public Kathleen R. Poulton

Date Commission Expires August 18, 1998
6-44.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)

NOTARY PUBLIC - State of Kansas
KATHLEEN R. POULTON
My Appt. Exp. 08-10-98

11-1990

SIDE TWO

Operator Name Mobil Oil Corporation Lease Name Brownell #1 Unit Well # 2

Sec. 6 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 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 <u>Bottom</u>	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input checked="" type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	2940	Class C	2 sx	

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	2690-2705		Acid: 750 gals 7.5% HCL	
	2740-2755		Fractd: 28,896 gals 20# Crosslink gel		
	2795-2815		141,460 lbs 12/20 Brady Sand		
	CIBP @ 2940				

TUBING RECORD	Size 2 3/8"	Set At 2827	Packer At None	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj. 12-14-95	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf 107	Water Bbls.	Gas-Oil Ratio Gravity

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: _____ 2690 _____ 2815 _____