

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

API NO. 15- 189-220170000 **ORIGINAL**
County Stevens
SE - NE - NW Sec. 5 Twp. 32S Rge. 35 X W^E

Operator: License # 5208
Name: Mobil Oil Corporation
Address P.O. Box 2173
2319 North Kansas Avenue
City/State/Zip Liberal, KS 67905-2173

1250 Feet from S(N) (circle one) Line of Section
2500 Feet from E(W) (circle one) Line of Section

Purchaser: Spot Market
Operator Contact Person: Sharon Cook
Phone (316) 626-1142

Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)
Lease Name Keating #1 Unit Well # 2

Contractor: Name: Norseman Drilling Inc.
License: 3779
Wellsite Geologist: L. J. Reimer

Field Name Hugoton
Producing Formation Chase

Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSH, Expl., Cathodic, etc)

Elevation: Ground 3020 KB 3029
Total Depth 2970 PBDT 2914

Amount of Surface Pipe Set and Cemented at 584 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 sx cmt.

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. _____
11-28-95 12-2-95 12-20-95
Spud Date Date Reached TD Completion Date

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

Chloride content 4,800 ppm Fluid volume 90 bbls
Dewatering method used Waste Minimization MDR system
Location of fluid disposal if hauled offsite: 2-5-96

Operator Name Mobil Oil Corporation
Lease Name William Rapp #1 SWDW License No. 5208
NW Quarter Sec. 13 Twp. 31S Rge. 36 (W)
County Stevens Docket No. 19,690

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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 R. Kelly Rae Kelly
Title Regulatory Assistant Date 2-14-96

Subscribed and sworn to before me this 14th day of February, 19 96.
Notary Public Sharon A. Cook

Date Commission Expires October 1, 1998
6-76.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)

SIDE TWO

Operator Name Mobil Oil Corporation Lease Name Keating #1 Unit Well # 2
 Sec. 5 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 Name Top Datum
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 (Submit Copy.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
List All E.Logs Run: NO LOGS RUN		

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#	584	Class C Class C	225 100	50:50 C/poz 50:50 C/poz
Production Casing	7.875	5.500	14#	2961	Class C Class C	150 75	3% D79 2% 828

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	2660-2675	Acid: 750 gals 7.5% HCL	
	2710-2720	Fract: 26,460 gals 20# Crosslink gel	
	2758-2778	122,062 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)			
12-14-95				
Estimated Production Per 24 Hours	Oil Bbls.	Gas 340 Mcf	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

Production Interval: _____ 2660 _____ 2778

CEMENTING SERVICE REPORT

Schlumberger

Dowell

DOWELL SCHLUMBERGER INCORPORATED

TREATMENT NUMBER	03-12-7906	DATE	1/30/95
STAGE	DS	DISTRICT	UKS 03-12

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WELL NAME AND NO. KEATING #1-2	LOCATION (LEGAL) SEC. 5-325-35W	GRIG NAME: Norsman #2
FIELD-POOL Hugoton	FORMATION Chase	WELL DATA:
COUNTY/PARISH Stevens Co. 189	STATE KS 15	API. NO.
NAME MOBIL OIL CORP.	AND	ADDRESS
SPECIAL INSTRUCTIONS	IS CASING/TUBING SECURED?	IS CASING/TUBING SECURED?

BIT SIZE	7 7/8	CSG/Liner Size	5 1/2
TOTAL DEPTH		WEIGHT	14 #
<input type="checkbox"/> ROT <input type="checkbox"/> CABLE		FOOTAGE	2965
MUD TYPE		GRADE	
<input type="checkbox"/> BHST <input type="checkbox"/> BHCT		THREAD	8RD
MUD DENSITY	9.0	LESS FOOTAGE SHOE JOINT(S)	95.85
MUD VISC.		Disp. Capacity	71.2

ORIGINAL

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

IS CASING/TUBING SECURED?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	LIFT PRESSURE	430 PSI	CASING WEIGHT ÷ SURFACE AREA (3.14 x R ²)	199
PRESSURE LIMIT	500 OVER PSI	BUMP PLUG TO			
ROTATE	RPM	RECIPROCATE	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	
0545											
0608	-	2800	-	-							
0610	-	170	10	-	5.8	H ₂ O	8.34				
0612	-	170	73	10	5.8	CMT	11.5				
0624	-	100	18	83	4.0	CMT	14.8				
0628	-	-	-	-	-	-	-				
0634	-	10	71	154	4.0	H ₂ O	8.34				
0641	-	170	-	87	4.0	H ₂ O	8.34				
0647	-	430	-	602	2.0	H ₂ O	8.34				
0653	-	-	-	715	-	H ₂ O	8.34				
0656	-	-	-	-	-	-	-				

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REMARKS

SYSTEM CODE	NO. OF SACKS	YIELD CU. FT/SK	COMPOSITION OF CEMENTING SYSTEMS		SLURRY MIXED	
			Bbbs	DENSITY	Bbbs	DENSITY
1.	150	2.75	Class 'C' + 3% D79 + 0.2% D46 + 0.5#/SK D29	73	11.5	
2.	75	1.37	Class 'C' + 2% B28 + 2% S1 + 0.6% D60 + 0.2% D46 + 1/2% D29	18	14.8	
3.						
4.						
5.						
6.						

BREAKDOWN FLUID TYPE	VOLUME	DENSITY	PRESSURE	MAX.	MIN:
<input type="checkbox"/> HESITATION SQ.	<input type="checkbox"/> RUNNING SQ.	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.	71.5 Bbbs
Washed Thru Perfs	<input type="checkbox"/> YES <input type="checkbox"/> NO	TO	FT.	MEASURED DISPLACEMENT	<input type="checkbox"/> WIRELINE
PERFORATIONS	TO	TO	CUSTOMER REPRESENTATIVE	DS	SUPERVISOR
			Tom Dunning		Jon Sosa

CEMENTING SERVICE REPORT

Schlumberger

Dowell

DOWELL SCHLUMBERGER INCORPORATED

TREATMENT NUMBER

DATE

7596

11-28-95

STAGE

DS

DISTRICT

1

03

12

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WELL NAME AND NO. <i>Keating 1-2</i>		LOCATION (LEGAL) <i>SEC. 5-32S-35W</i>		RIG NAME: <i>2013192 2</i>	
FIELD-POOL <i>HUSTON</i>		FORMATION <i>SURF</i>		WELL DATA: BIT SIZE <i>12 1/4</i> CSG/Liner Size <i>8 3/8</i> BOTTOM TOP	
COUNTY/PARISH <i>STEVENS</i>		STATE <i>KS.</i>		TOTAL DEPTH <i>587</i> WEIGHT <i>24</i>	
NAME <i>mobile oil</i>		API. NO.		<input type="checkbox"/> ROT <input type="checkbox"/> CABLE FOOTAGE <i>587</i>	
AND		MUD TYPE		GRADE <i>4550</i>	
ADDRESS		STATE		<input type="checkbox"/> BHST <input type="checkbox"/> BHCT THREAD <i>980</i>	
ZIP CODE		MUD DENSITY		LESS FOOTAGE SHOE JOINT(S) <i>596</i> TOTAL	
SPECIAL INSTRUCTIONS		MUD VISC.		Disp. Capacity <i>34.8</i>	

ORIGINAL

NOTE: Include Footage From Ground Level To Head In Disp. Capacity

Float	TYPE	<i>6 3/8" PLATE</i>	Stage Tool	TYPE	
	DEPTH	<i>596</i>		DEPTH	
SHOE	TYPE	<i>CMT NOSE</i>	Stage Tool	TYPE	
	DEPTH	<i>586</i>		DEPTH	

IS CASING/TUBING SECURED? YES NO

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

PRESSURE LIMIT PSI BUMP PLUG TO *610* PSI

ROTATE RPM RECIPROCATE FT No. of Centralizers

Head & Plugs TBG D.P. SQUEEZE JOB

Double SIZE WEIGHT GRADE

Single GRADE

Swage THREAD

Knockoff NEW USED

BOT R W DEPTH

TAIL PIPE: SIZE DEPTH

TUBING VOLUME Bbls

CASING VOL. BELOW TOOL Bbls

TOTAL Bbls

ANNUAL VOLUME Bbls

TIME: 0001 to 2400

PRESSURE: TBG OR D.P. CASING

VOLUME PUMPED BBL: INCREMENT CUM

JOB SCHEDULED FOR TIME: *20:30* DATE: *11-28*

ARRIVE ON LOCATION TIME: *20:30* DATE: *11-28*

LEFT LOCATION TIME: DATE:

TIME	TBG OR D.P.	CASING	VOLUME PUMPED BBL		INJECT RATE	FLUID TYPE	FLUID DENSITY	SERVICE LOG DETAIL
			INCREMENT	CUM				
22:37		2000				H ₂ O 4.3	PRE-JOB SAFETY MEETING	
22:39		150	26	X	6	11 11	PSI TEST	
22:44		160	78	26	6	CMT 14.8	START H ₂ O	
22:58		150	21	104	4	CMT 14.6	START CMT PLUG	
23:03				125	4		SHUT DOWN	
		90	35	X	6	H ₂ O 8.3	DRIP PLUG START DISP	
		200	5	6	6	11 11	CMT TO SURFACE	
23:09		230	25	6	6	11 11	LOWER RATE	
23:13		240	33	24	11 11	11 11	PSI CHECK	
23:14		610	35	2.4	11 11	11 11	BUMP PLUG	
23:16		190					BLEEDLINE CLOSE IN A CTD	

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REMARKS

SYSTEM CODE	NO. OF SACKS	YIELD CU. FT/SK	COMPOSITION OF CEMENTING SYSTEMS		SLURRY MIXED	
			BBLs	DENSITY		
1.	225	1.89	50% + 6% 12-20 + 3% 5-1 + 5% (5400) 0.44 + 4% 12-20		12.8	
2.						
3.	1001	1.22	50% + 2.5% 5-1 + 4% 12-20		196	
4.						
5.						
6.						

BREAKDOWN FLUID TYPE: HESITATION SQ. RUNNING SQ. CIRCULATION LOST YES NO

Pressure: Cement Circulated To Surf. YES NO *30* Bbls

BREAKDOWN: PSI FINAL PSI DISPLACEMENT VOL. *35* Bbls

Washed Thru Perfs YES NO TO FT. MEASURED DISPLACEMENT WIRELINE

PERFORATIONS: TO TO TO TO

CUSTOMER REPRESENTATIVE: *Tom Running*

DS SUPERVISOR: *Ret Pearson*