

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- 189-211200001

County Stevens
- - C - NE Sec. 24 Twp. 32S Rge. 36 E W

Operator: License # 5208

1320 Feet from S/N (circle one) Line of Section

Name: Mobil Oil Corporation

1320 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 Jones #1-H Unit Well # 2

City/State/Zip Liberal, KS 67905-2173

Field Name Hugoton

Purchaser: Spot Market

Producing Formation Chase

Operator Contact Person: Sharon Cook

Elevation: Ground 3039 KB 3055

Phone (316) 626-1142

Total Depth 6350 PBDT 3224

Contractor: Name: Bruce Well Service

Amount of Surface Pipe Set and Cemented at 1800 Feet

License: 07407

Multiple Stage Cementing Collar Used? Yes No

Wellsite Geologist: L. J. Reimer

If yes, show depth set NA Feet

Designate Type of Completion
 New Well Re-Entry Workover

If Alternate II completion, cement circulated from NA

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

feet depth to NA w/ NA sx cmt.

If Workover:

Drilling Fluid Management Plan REWORK 9/4 4-10-96
(Data must be collected from the Reserve Pit)

Operator: Mobil Oil Corporation

Chloride content NA ppm Fluid volume NA bbls

Well Name: Jones #1-H Unit Well #2

Dewatering method used _____

Comp. Date 11-20-87 Old Total Depth 6350

Location of fluid disposal if hauled offsite: _____

Deepening Re-perf. Conv. to Inj/SWD
 Plug Back 3224 PBDT
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

Operator Name NA

Lease Name _____ License No. _____

105-95 10-24-95

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

Spud Date _____ Date Reached TD _____ Completion Date _____
Commenced Recompletion

County _____ Docket No. _____

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

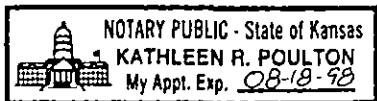
Title Regulatory Asst. Date 1-4-96

Subscribed and sworn to before me this 4th day of January, 19 96.

Notary Public Kathleen R. Poulton

Date Commission Expires August 18, 1998 6-10.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)



Operator Name Mobil Oil Corporation Lease Name Jones #1-H Unit Well # 2
 Sec. 24 Twp. 32S Rge. 36 East County Stevens
 West

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 CHANGE</p>	<input type="checkbox"/> Log Formation (Top), Depth and Datums <input type="checkbox"/> Sample Name Top Datum <p style="text-align: center;">NO CHANGE</p>
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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: <input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	Depth		Type of Cement	#Sacks Used	Type and Percent Additives
	Top	Bottom			

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	2686-2706		Acid: 1,000 gals 7.5% HCL
	2738-48		Fracd: 30,282 gals 20# Crosslink gel	
	2790-2800		155,240 lbs 12/20 Brady Sand	
	2810-20		CIBP @ 3224'	

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. 10-18-95		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 108 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 Other (Specify) _____

Production Interval: _____ 2686- _____ 2820