

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

API NO. 15- 189-219460000 **ORIGINAL**

County Stevens
NE - SW - SE Sec. 11 Twp. 32S Rge. 37 X E

Operator: License # 5208

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

Name: Mobil Oil Corporation

1475 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 C. S. Carpenter 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 3110 KB 3119

Phone (316) 626-1142

Total Depth 2955 PBDT 2902

Contractor: Name: Norseman Drilling Inc.

Amount of Surface Pipe Set and Cemented at 628 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

RECEIVED
STATE CORPORATION COMMISSION
1-3-96
JAN 03 1996
WICHITA, KANSAS

X New Well Re-Entry Workover Alternate II completion, cement circulated from NA

feet depth to NA w/ NA sx cmt.

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

Drilling Fluid Management Plan ALT I. 4-11-96
(Data must be collected from the Reserve Pit)

If Workover:

Chloride content 6,500 ppm Fluid volume 121 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 Hill #3 SWDW License No. 5208

9-18-95 9-21-95 10-9-95
Spud Date Date Reached TD Completion Date

SW Quarter Sec. 3 Twp. 33 S Rng. 37 E/W

County Stevens Docket No. CD-117710

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

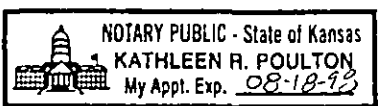
Title Regulatory Assistant Date 1-2-96

Subscribed and sworn to before me this 2nd day of January, 19 96.

Notary Public Kathleen R. Poulton

Date Commission Expires August 18, 1998
6-1.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 C. S. Carpenter Unit Well # 3
 Sec. 11 Twp. 32S Rge. 37 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
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
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#	628	Class C Class C	175 175	50:50 C/poz 50:50 C/poz
Production Casing	7.875	5.500	14#	2946	Class C Class C	225 175	3% D79 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	2688-98	Acid: 1,000 gals 7.5% HCL	
	2732-42	Fracd: 30,300 gals 20# Crosslink gel	
	2795-2810	135,000 lbs 12/20 Brady Sand	
	2838-53		

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. 10-7-95			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 Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
		460			

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled

Production Interval: _____ 2688 _____ 2853

CEMENTING SERVICE REPORT

Schlumberger

Dowell

DOWELL SCHLUMBERGER INCORPORATED

TREATMENT NUMBER 7558	DATE 9-21
STAGE 7	DS 03
DISTRICT 12	

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

WELL NAME AND NO. **C.S. CRIPPER 3** LOCATION (LEGAL) **SEC. 11-325-374**

FIELD-POOL **HUSOTON** FORMATION **CHASE**

COUNTY/PARISH **STEVENS** STATE **KS** API. NO.

RIG NAME: **WOLFMAN 2**

WELL DATA:

BIT SIZE 7 7/8	CSG/Liner Size	BOTTOM	TOP
TOTAL DEPTH	WEIGHT	14	
<input type="checkbox"/> ROT <input type="checkbox"/> CABLE	FOOTAGE	2946	
MUD TYPE	GRADE	USS50	
<input type="checkbox"/> BHST <input type="checkbox"/> BHCT	THREAD	ARD	
MUD DENSITY	LESS FOOTAGE SHOE JOINT(S)	2903	TOTAL
MUD VISC.	Disp. Capacity	71	

NAME **mobil**

AND _____

ADDRESS _____

ZIP CODE _____

SPECIAL INSTRUCTIONS

soften cement, 5/8 115 csp per customer order

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

Float	TYPE	Auto Fill Flap	Stage Tool	TYPE	
	DEPTH	2903		DEPTH	
Stage Tool	TYPE	CMT nose	Stage Tool	TYPE	
	DEPTH	2946		DEPTH	

IS CASING/TUBING SECURED? YES NO

LIFT PRESSURE **1740** PSI CASING WEIGHT + SURFACE AREA (3.14 x R²)

PRESSURE LIMIT **2000** PSI BUMP PLUG TO **1300** PSI

ROTATE _____ RPM RECIPROCATE _____ FT No. of Centralizers _____

Head & Plugs TBG D.P.

Double Single Swage Knockoff

SIZE WEIGHT GRADE THREAD

TOOL TYPE DEPTH

TAIL PIPE: SIZE DEPTH

TUBING VOLUME Bbls

CASING VOL. BELOW TOOL Bbls

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	DATE	TIME	DATE	TIME	DATE	
0001 to 2400											
14:28		2460					1400	8.3			PRE-JOB SAFETY MEETING
14:29		250	26	X	5.8	11	11				PSI TEST
14:34		280	110	26	5.8	CMT	11.5				START H2O
14:53		180	42	136	5.8	CMT	14.8				START 10 CMT
15:00		320		178	5.8						SHUT DOWN - WASH TO PIT
15:04		70	71.5	X	6.	H2O	8.3				DRIP PLUG START DISP
15:11		510		46	6.	11	11				CMT TAIL PIPE
15:14		830		61	6.	11	11				LOWER RATE
15:15		750		63	2.2	11	11				PSI CHECK
15:19		870		71	2.2	11	11				PSI CHECK
15:19		1300		71.5							BUMP PLUG
15:21											BLEED PIES CHECK FLOAT

REMARKS

SYSTEM CODE	NO. OF SACKS	YIELD CU. FT/SK	COMPOSITION OF CEMENTING SYSTEMS		SLURRY MIXED	
					BBLs	DENSITY
1.	225	2.75	C + 3% D-7A + 0.2% D-46 + 1/2% D-19		110	11.5
2.						
3.	125	1.37	C + 2% B-2.8 + 2% S-1 + 0.6% D-60 + 0.2% D-46		42	14.8
4.						
5.						
6.						

BREAKDOWN FLUID TYPE VOLUME DENSITY PRESSURE **1300** MAX. **70** MIN:

HESITATION SQ. RUNNING SQ. CIRCULATION LOST YES NO

BREAKDOWN PSI FINAL PSI DISPLACEMENT VOL. **71.5** Bbls

Washed Thru Perfs YES NO TO FT. MEASURED DISPLACEMENT WIRELINE

PERFORATIONS TO TO CUSTOMER REPRESENTATIVE **Jeff Lasiter** DS SUPERVISOR **Ray Pearson**

CEMENTING SERVICE REPORT

Schlumberger

Dowell

DOWELL SCHLUMBERGER INCORPORATED

TREATMENT NUMBER: 0312-1554 DATE: 9-19-95
 PAGE: DS DISTRICT: WISSES KANSAS

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

WELL NAME AND NO. **C-5 Carpenter #3** LOCATION (LEGAL) **Sec 11-325-37W** RIG NAME: **Noiseman #2**

FIELD-POOL _____ FORMATION _____

COUNTY/PARISH **Stevens** STATE **Kansas** API. NO. _____

NAME _____

AND _____

ADDRESS _____

WELL DATA: BIT SIZE **12 1/2** CSG/Liner Size **8 1/2** BOTTOM _____ TOP _____

TOTAL DEPTH **634** WEIGHT **24**

ROT CABLE FOOTAGE **627.28**

MUD TYPE _____ GRADE _____

BHST BHCT **80** THREAD **8 Rod**

MUD DENSITY _____ LESS FOOTAGE SHOE JOINT(S) _____ TOTAL _____

MUD VISC. _____ Disp. Capacity _____

ORIGINAL

SPECIAL INSTRUCTIONS
Rig up and Pump 175 sks Lead and 175 sks Tail for company man's instruction

IS CASING/TUBING SECURED? YES NO

LIFT PRESSURE **258** PSI CASING WEIGHT + SURFACE AREA (3.14 x R²) _____

PRESSURE LIMIT _____ PSI BUMP PLUG TO _____ PSI

ROTATE _____ RPM RECIPROCATE _____ FT No. of Centralizers **3**

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

Float	TYPE	Ball Valve	Stage Tool	TYPE	
	DEPTH	585.1		DEPTH	
Shoe	TYPE	Cement Nose	Stage Tool	TYPE	
	DEPTH	627.28		DEPTH	

Head & Plugs TBG D.P. SQUEEZE JOB

Double SIZE _____ TOOL TYPE _____

Single WEIGHT _____ DEPTH _____

Swage GRADE _____ TAIL PIPE: SIZE _____ DEPTH _____

Knockoff THREAD _____ TUBING VOLUME _____ Bbls

TOP OR W NEW USED CASING VOL. BELOW TOOL _____ Bbls

BOT OR W DEPTH _____ TOTAL _____ Bbls

ANNUAL VOLUME _____ Bbls

TIME	PRESSURE		VOLUME PUMPED BBL _A		JOB SCHEDULED FOR			ARRIVE ON LOCATION		LEFT LOCATION	
	TBG OR D.P.	CASING	INCREMENT	CUM	TIME:	DATE:	TIME:	DATE:	TIME:	DATE:	
0001 to 2400											
0456		2700		0							
0459		150	25	0	6	H ₂ O	8.33				
05:04		200	59	25	6	Cement	12.8				
05:15		100	38	53	6	Cement	14.6				
05:22		0		121	0	Cement	11.6				
05:26		710	37 1/2	0	6	H ₂ O	8.34				
05:29		210	0	0	6	H ₂ O	8.34				
05:37		290		33	2	H ₂ O	8.34				
0535		290									

REMARKS

SYSTEM CODE	NO. OF SACKS	YIELD CU. FT/SK	COMPOSITION OF CEMENTING SYSTEMS		SLURRY MIXED		
			BBLs	DENSITY	BBLs	DENSITY	
1.	175	1.89	50 Cement	50 POZ x 670	0.20 + 770.91 + 570.047 (Cement)	38	14.6
2.	175		50/50 POZ	50 + 2.575 ml	0.25 x 0.29		

BREAKDOWN FLUID TYPE _____ VOLUME _____ DENSITY _____ PRESSURE _____

HESITATION SQ. RUNNING SQ. CIRCULATION LOST YES NO

BREAKDOWN _____ PSI FINAL _____ PSI DISPLACEMENT VOL. _____ Bbls

Washed Thru Perfs YES NO TO _____ FT. MEASURED DISPLACEMENT WIRELINE

PERFORATIONS _____ TO _____ TO _____ TO _____

CUSTOMER REPRESENTATIVE _____

DS SUPERVISOR _____