

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: N/A

Operator Contact Person: Sharon Cook

Phone (316) 626-1142

Contractor: Name: Catholic Protection Services

License: 31474

Wellsite Geologist: _____

Designate Type of Completion:

New Well Re-Entry Workover

Oil SWD SLOW Temp. Abd.

Gas ENHR SIGW

Dry Other (Core, USW, Expl., Cathodic, etc)

If Workover:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Deepening Re-perf. Conv. to Inj/SWD

Plug Back PBD

Commingled Docket No. _____

Dual Completion Docket No. _____

Other (SWD or Inj?) Docket No. _____

1/11/95 1/11/95 1/11/95
Spud Date Date Reached TD Completion Date

API NO. 15- 189-21823-00-00 ORIGINAL

County STEVENS

W/2 SE Sec. 12 Twp. 34 Rge. 39 X W

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

1420 FEL Feet from E/W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
NE, SB, NW or SW (circle one)

Lease Name CP- HICKS Well # 1

Field Name Hugoton

Producing Formation: NA **[ANODE REPOSITORY]**

Elevation: Ground 3249 KB NA

Total Depth 100 PBD NA

Amount of Surface Pipe Set and Cemented at None Feet

Multiple Stage Cementing Collar Used? NA Yes NA No

If yes, show depth set NA Feet

If Alternate II completion, cement circulated from NA

feet depth to NA w/ NA sx cmt.

Drilling Fluid Management Plan ALT 3 29X 10-18-95
(Data must be collected from the Reserve Pit)

Chloride content NA ppm Fluid volume NA bbls

Dewatering method used NA

Location of fluid disposal if hauled offsite:

Operator Name NA

Lease Name NA License No. _____

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

County NA Docket No. NA

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, 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

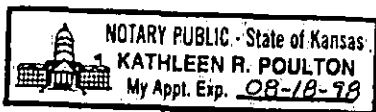
Title Regulatory Assistant Date 2-13-95

Subscribed and sworn to before me this 13th day of February, 19 95.

Notary Public Kathleen R. Poulton

Date Commission Expires AUGUST 18, 1998

DEW95097.SAC



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)

Form ACO-1 (7-91) CORPORATION COMMISSION

FEB 17 1995

CONSERVATION DIVISION
WICHITA, KANSAS

Operator Name: Mobil Oil Corporation Lease Name CP- HICKS Well # 1

Sec. 12 Twp. 34 Rge. 39 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 checked="" type="checkbox"/> Log Name _____ Formation (Top), Depth and Dates _____ Top _____ Datum _____ Sample <input type="checkbox"/>
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:		SEE ATTACHED DRILLER'S LOG
Electric Resistance Log - Attached		

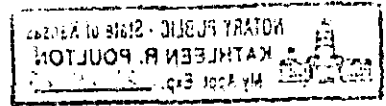
CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs./Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives

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 checked="" type="checkbox"/> Plug Off Zone	(1) First plug - Bentonite set at 13' - 3' plug.			
	(2) Second plug - Bentonite set at 23' - 21' plug.			

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		Amount and Kind of Material Used	Depth
First anode set at	90', second anode at	80', third anode at	70'.	

TUBING RECORD	Size _____ Set At _____	Packer At _____	Liner Run NA <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SMD or Inj. Installed	1/11/95	Producing Method NA <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)	
Estimated Production Per 24 Hours	Oil NA Bbls.	Gas NA Mcf	Water NA Bbls. Gas-Oil Ratio _____ Gravity _____

Disposition of Gas:	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, submit ACO-18.)	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Other (Specify) _____	<input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled _____



DATA SHEET

COMPANY MOBIL E+P JOB No. 80100370 DATE: 1-11-95
 WELL: HICKS 1 PIPELINE:
 LOCATION: SEC. 12 TWP. 34 RGE. 36/39 CO. STEVENS STATE KS
 ANODE TYPE LIGA ONE FT: ROTARY 100 FT: CASING _____ FT.

DEEP GROUND BED LOGGING DATA

DRILL. DEPTH LOG (FT)	ANODE TO STRUCTURE		ANODES		DRILL DEPTH LOG (FT)	ANODE TO STRUCTURE		ANODES	
	EXPLOR OHM	FINAL OHM	NO	TOP DEPTH		EXPLOR OHM	FINAL OHM	NO	TOP DEPTH
5					205				
HOLE PLUG 10				3'-13'	210				
EARTH FILL 15				13'-21'	215				
HOLE PLUG 20				21'-23'	220				
25					225				
30	.480				230				
35	.570				235				
40	.760				240				
45	.970				245				
50	.510				250				
55	.500				255				
60	.860				260				
65	.230				265				
70	.960		3		270				
75	.430				275				
80	1.21		2		280				
85	.990				285				
90	1.00		1		290				
95					295				
100					300				
105					305				
110					310				
115					315				
120					320				
125					325				
130					330				
135					335				
140					340				
145					345				
150					350				
155					355				
160					360				
165					365				
170					370				
175					375				
180					380				
185					385				
190					390				
195					395				
200					400				

PIT CLOSED 1-11-95 HOLE PLUG SET 1-11-95

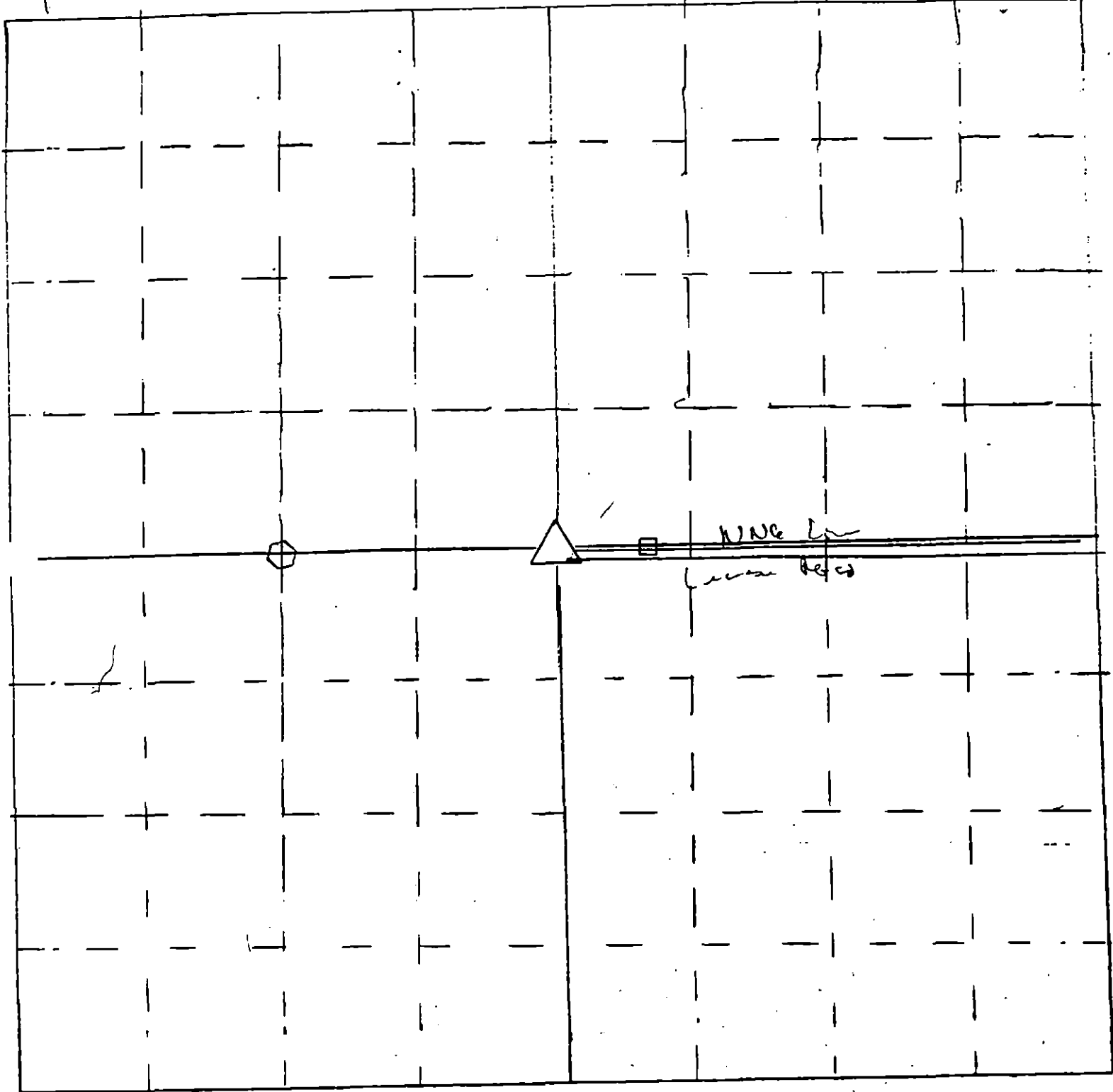
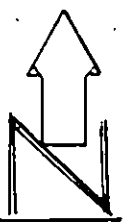
GROUND BED RESISTANCE: (1) VOLTS _____ ÷ AMPS _____ = _____ OHMS (2) VIBROGROUND _____ OHMS

HICKS 1 12-34-39 Stevens
1320 PSL 1380 FEL
Elec? N Crop

0-40 SAND
40-100 Clay

ORIGINAL

p-11970



- △ = gas well location
- ⬡ = cathodic deep well location

Scale = 1" = 50'
□ = Meter house