

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- 189-221190000
County Stevens
 - NW - SE - SE Sec. 10 Twp. 34S Rge. 37 E
 X W

Operator: License # 5208

1150 Feet from (S/N) (circle one) Line of Section

Name: Mobil Oil Corporation

1250 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 CP-Cutter #1 Unit Well # 3

City/State/Zip Liberal, KS 67905-2173

Field Name Hugoton

Purchaser:

Producing Formation NA

Operator Contact Person: Sharon Cook

Elevation: Ground 3136 KB NA

Phone (316) 626-1142

Total Depth 100 PBDT NA

Contractor: Name: Catholic Protection Services

Amount of Surface Pipe Set and Cemented at None Feet

License: 31474

Multiple Stage Cementing Collar Used? NA Yes NA No

Wellsite Geologist:

If yes, show depth set NA Feet

Designate Type of Completion

If Alternate II completion, cement circulated from NA

 New Well Re-Entry Workover

feet depth to NA w/ NA sx cmt.

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

Drilling Fluid Management Plan ALT 3 5-22-98 JK
(Data must be collected from the Reserve Pit)

If Workover:

Chloride content NA ppm Fluid volume NA bbls

Operator:

Dewatering method used NA

Well Name:

Location of fluid disposal if hauled offsite: 4-29-97

Comp. Date Old Total Depth

Operator Name NA

 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 NA License No.

1-24-97 1-24-97 1-24-97
Spud Date Date Reached TD Completion Date

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

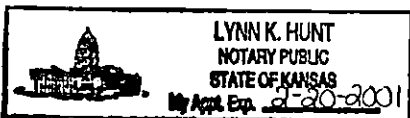
Title Regulatory Assistant Date 4-21-97

Subscribed and sworn to before me this 21st day of April, 19 97.

Notary Public Lynn K. Hunt

Date Commission Expires February 20, 2001

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 CP-Cutter #1 Unit Well # 3
 Sec. 10 Twp. 34S 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 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: Electric Resistance Log - Attached	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datums <input type="checkbox"/> Sample Name Top Datum SEE ATTACHED DRILLER'S LOG
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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

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	(1) First plug - Bentonite set at 13' - 3' plug.			
<input checked="" type="checkbox"/> Plug Off Zone	(2) Second plug - Bentonite set at 24' - 27' plug.			

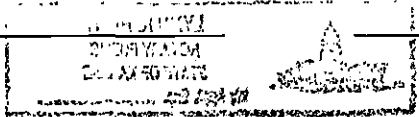
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
	First anode set at 80', second anode at 70', third anode at 60'.		

TUBING RECORD		Size Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
1" PVC vent from TD to 3' above surface.				
Date of First, Resumed Production, SWD or Inj. Installed 1-24-97		Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)		
Estimated Production Per 24 Hours	Oil Bbls. NA	Gas Mcf NA	Water Bbls. NA	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: _____



15-189-22119

Catholic Protection Services
Liberal, Kansas

ORIGINAL

DATA SHEET

COMPANY MOBILE & P US INC. JOB No. 801-00582 DATE: 1/24/97
 WELL: CUTTER 1-3 PIPELINE: _____
 LOCATION: SEC. 10 TWP. 34 RGE.37 CO: STEVENS STATE: KANSAS
 ANODE TYPE LIDA ONE 1x45 (3) FT: ROTAR 100FT 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	FINAL	NO	TOP DEPTH		EXPLOR	FINAL	NO	TOP DEPTH
	OHM	OHM				OHM	OHM		
5			3FT.	EARTH FILL	205				
10				PLUG 10 FT.	210				
15				EARTH	215				
20				FILL 14FT	220				
25				EARTH	225				
30				FILL FROM	230				
35				24FT	235				
40				PLUG 3FT.	240				
45				TOP/COKE	245				
50					250				
55					255				
60	3.08	3.75	3		260				
65					265				
70	2.25	3.01	2		270				
75					275				
80	2.12	2.87	1		280				
85					285				
90					290				
95					295				
100				COKE	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				

PITS CLOSED JANUARY 27, 1997

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

RECEIVED
 1997 JAN 29 11:00 AM
 E.C.

1 LOCATION OF WATER WELL: County: <u>STEVENSON</u>	Fraction: <u>NW 1/4 SE 1/4 SE 1/4</u>	Section Number: <u>10</u>	Township Number: <u>T 34 S</u>	Range Number: <u>R 37 E</u>
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Distance and direction from nearest town or city street address of well if located within city?

Cutter 1-3

2 WATER WELL OWNER: Mobil Oil Corp.
 RR#, St. Address, Box #: P.O. Box 3173
 City, State, ZIP Code: Liberal, KS 67905

ORIGINAL

Board of Agriculture, Division of Water Resources
Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

1 Mile

4 DEPTH OF COMPLETED WELL: 100 ft. ELEVATION:

Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.

WELL'S STATIC WATER LEVEL ft. below land surface measured on mo/day/yr

Pump test data: Well water was ft. after hours pumping gpm

Est. Yield gpm; Well water was ft. after hours pumping gpm

Bore Hole Diameter: 6 in. to 100 ft., and in. to ft.

WELL WATER TO BE USED AS:

5 Public water supply	8 Air conditioning	11 Injection well
1 Domestic	3 Feedlot	6 Oil field water supply
2 Irrigation	4 Industrial	7 Lawn and garden only
		9 Dewatering
		10 Monitoring well

Was a chemical/bacteriological sample submitted to Department? Yes.....No.....; If yes, mo/day/yr sample was submitted

Water Well Disinfected? Yes No

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued Clamped
2 PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded
		7 Fiberglass		Threaded

Blank casing diameter in. to ft., Dia in. to ft., Dia in. to ft.

Casing height above land surface in., weight lbs./ft. Wall thickness or gauge No.

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)	10 Asbestos-cement
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS	11 Other (specify)
				12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	3 Mill slot	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	9 Drilled holes	
		7 Torch cut	10 Other (specify)	

SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft.

GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other

Grout Intervals: From ft. to ft., From ft. to ft., From ft. to ft.

What is the nearest source of possible contamination:

1 Septic tank	4 Lateral lines	7 Pit privy	10 Livestock pens	14 Abandoned water well
2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage	15 Oil well/Gas well
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage	16 Other (specify below)
			13 Insecticide storage	

Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
10	60	<u>SURFACE Top Soil, SAND + Clay</u>			
60	80	<u>SANDY Clay + SAND</u>			
80	100	<u>SANDY Clay + SAND</u>			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 11/01/99 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 548 This Water Well Record was completed on (mo/day/yr) 11/01/99 under the business name of Les Taylor Drilling Co by (signature) Les Taylor

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY