

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- 189-219060000

County Stevens
SE - NW - SW Sec. 32 Twp. 33S Rge. 37 X W^E

Operator: License # 5208

1500 Feet from S (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 E. Wilson #1 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 3143 KB 3153

Phone (316) 626-1142

Total Depth 2910 PBDT 2870

Contractor: Name: Murfin Drilling Co., Inc.

Amount of Surface Pipe Set and Cemented at 702 Feet

License: 30606

Multiple Stage Cementing Collar Used? Yes X No

Wellsite Geologist: L. J. Reimer

If yes, show depth set NA Feet

Designate Type of Completion
X New Well Re-Entry Workover

If Alternate II completion, cement circulated from NA

Oil SWD S10W Temp. Abd.
X Gas ENHR SIGW
Dry Other (Core, WSW, Expl., Cathodic, etc)

feet depth to NA w/ NA sx cmt.

If Workover:

Drilling Fluid Management Plan alt I 5-8-96
(Data must be collected from the Reserve Pit) LV

Operator: _____

Chloride content 2,800 ppm Fluid volume 480 bbls

Well Name: _____

Dewatering method used Waste Minimization Mud System

Comp. Date _____ Old Total Depth _____

Location of fluid disposal if hauled offsite:

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

Operator Name Mobil Oil Corporation

11-27-95 11-30-95 1-3-96
Spud Date Date Reached TD Completion Date

Lease Name C. W. Creamer #1 SWDW License No. 5208

NE Quarter Sec. 23 Twp. 34 S Rng. 37 E/W

County Stevens Docket No. D-19,411

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 2-1-96

Subscribed and sworn to before me this 1st day of February, 19 96.

Notary Public Kathleen R. Poulton

Date Commission Expires August 18, 1998
6-55.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)

RECEIVED
KANSAS CORP COM

NOTARY PUBLIC - State of Kansas
KATHLEEN R. POULTON
My Appl. Exp. 08-18-98

Operator Name Mobil Oil Corporation Lease Name E. Wilson #1 Unit Well # 3
 Sec. 32 Twp. 33S Rge. 37 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 LOGS RUN</p>	<input type="checkbox"/> Log Formation (Top), Depth and Datums <input type="checkbox"/> Sample Name Top Datum
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CASING RECORD New 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#	702	Class C Class C	225 125	50:50 C/poz 50:50 C/poz
Production Casing	7.875	5.500	14#	2902	Class C Class C	133 75	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	2657-2672	Acid: 1,000 gals 7.5% HCL	
	2708-2723	Fract: 755 bbls 20# Crosslink gel	
	2760-2775	140,000 lbs 12/20 Brady Sand	

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumed Production, SWD or Inj. 12-29-95	Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
		445			

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

METHOD OF COMPLETION

Open Hole Perf. Dually Comp. Commingled 2657

Other (Specify) _____ 2775

Production Interval

CEMENTING SERVICE REPORT

Slumberger

Dowell

DOWELL SCHLUMBERGER INCORPORATED

TREATMENT NUMBER

DATE

PAGE

DS

DISTRICT

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

WELL NAME AND NO. <i>Unitson 1-3</i>		LOCATION (LEGAL) <i>Sec 32-33c-37w</i>		RIG NAME: <i>Mudwin #24</i>	
FIELD-POOL <i>Hugoton</i>		FORMATION		WELL DATA: BOTTOM TOP	
COUNTY/PARISH <i>Stolens</i>		STATE <i>Kc</i>		API. NO.	
NAME <i>Mobil Oil Corp</i>		MUD TYPE		GRADE	
AND		MUD DENSITY		LESS FOOTAGE SHOE JOINT(S)	
ADDRESS		MUD VISC.		Disp. Capacity	
ZIP CODE		NOTE: Include Footage From Ground Level To Head In Disp. Capacity		TOTAL	
SPECIAL INSTRUCTIONS		Float		Stage Tool	
		TYPE <i>Large Float Valve</i>		TYPE	
		DEPTH <i>2879.11</i>		DEPTH	
		TYPE <i>Cmt Nose</i>		TYPE	
		DEPTH <i>2901.61</i>		DEPTH	

ORIGINAL

IS CASING/TUBING SECURED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Head & Plugs <input type="checkbox"/> Double <input checked="" type="checkbox"/> Single <input type="checkbox"/> Swage <input type="checkbox"/> Knockoff	<input type="checkbox"/> TBG <input type="checkbox"/> D.P.	SQUEEZE JOB	
LIFT PRESSURE <i>1711</i> PSI	CASING WEIGHT ÷ SURFACE AREA (3.14 × R ²)	TOOL TYPE	TUBING VOLUME Bbls	
PRESSURE LIMIT PSI	BUMP PLUG TO <i>1310</i> PSI	DEPTH	CASING VOL. BELOW TOOL Bbls	
ROTATE RPM	RECIPROCATATE FT	DEPTH	TOTAL Bbls	
	No. of Centralizers	DEPTH	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											
2024	3100				1830	2-29-95	1800	2-29-95	2300	2-29-95	
2030	0	25									
2035	240	65									
2041	160		34								
2042	170	18									
2049	190		12								
2051	0										
2054	0	70.2									
2100	90		30								
2102	120		40								
2103	250		50								
2105	410		60								
2108	450		68								
2109	1150		70								
2110											
2115											
2116	1310										

REMARKS
PRE-JOB SAFETY MEETING - PSI Test.
start H2O ahead
start 1000 cmt.
psi check
start tail cmt.
psi check
shutdown wash pump lines deep top plug
start displacement
psi check
psi check
psi check
lower rate
psi check
bump top plug
blood psi of check float - looking back
start displacement
bump top plug again
blood psi of check float - holding
end job

SYSTEM CODE	NO. OF SACKS	YIELD CU. FT/SK	COMPOSITION OF CEMENTING SYSTEMS			SLURRY MIXED	
						BBLs	DENSITY
1.	133	2.75	class C + 3% D79 + .2% D46 + 1/4" D29			65.1	11.5
2.							
3.	75	1.37	class C + 2% B28 + 2% grade + .6% D60 + .2% D46 + 1/4" D29			18.1	14.8
4.							
5.							
6.							

BREAKDOWN FLUID TYPE		VOLUME		PRESSURE		MAX.		MIN.	
<input type="checkbox"/> HESITATION SQ.		<input type="checkbox"/> RUNNING SQ.		CIRCULATION Lbs		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		Cement Circulated To Surf. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Bbls	
BREAKDOWN PSI		FINAL PSI		DISPLACEMENT VOL. Bbls		TYPE OF WELL		STORAGE <input type="checkbox"/> INJECTION <input type="checkbox"/> BRINE WATER <input type="checkbox"/> WILDCAT	
Washed Thru Perfs <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		TO FT.		MEASURED DISPLACEMENT <input type="checkbox"/> <input checked="" type="checkbox"/> WIRELINE		OIL <input type="checkbox"/> GAS <input type="checkbox"/>			
PERFORATIONS		CUSTOMER REPRESENTATIVE		DS		SUPERVISOR			
TO TO		<i>Dennis Russell</i>				<i>James Esquivel</i>			

RECEIVED
MANSAS CORP COMM
1996 FEB -2 A-11-10

CEMENTING SERVICE REPORT

Schlumberger

Dowell

DOWELL SCHLUMBERGER INCORPORATED

TREATMENT NUMBER: 03-12-7887 DATE: 11/27/95
 PAGE: DS DISTRICT: UKS 03-12

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WELL NAME AND NO. Wilson #1-3	LOCATION (LEGAL) SEC 32-33S-37W	RIG NAME: MURFIN #24
FIELD-POOL Hugoton	FORMATION SURFACE	WELL DATA:
COUNTY/PARISH Stevens Co. 189	STATE KS 15	API. NO.
NAME MOBIL OIL CORP.	AND	ADDRESS
SPECIAL INSTRUCTIONS Safely CMT. 8 3/8 Surface casing w/ 225 SKS 50/50 P02/c + 6% D29 + 3% S1 + 5% D44 (BWDW) + 1/4 #1/SK D29; LEAD and 125 SKS 50/50 P02/c + 2.5% S1 + 1/4 #1/SK D29		BIT SIZE 12 1/4 CSG/Liner Size 8 3/8
IS CASING/TUBING SECURED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	LIFT PRESSURE 240 PSI	TOTAL DEPTH 710 WEIGHT 24#
PRESSURE LIMIT 500 OVER PSI	BUMP PLUG TO 180 PSI	<input type="checkbox"/> ROT <input type="checkbox"/> CABLE FOOTAGE 701.70
ROTATE RPM RECIPROCATE FT No. of Centralizers		MUD TYPE GRADE
		<input type="checkbox"/> BHST <input type="checkbox"/> BHCT THREAD 8RD
		MUD DENSITY LESS FOOTAGE SHOE JOINT(S) 42.8
		MUD VISC. Disp. Capacity 41.9
		TOTAL 41.9

ORIGINAL

SHOE	Float	DEPTH	TYPE	DEPTH	TYPE
DEPTH	TYPE	DEPTH	TYPE	DEPTH	TYPE
DEPTH	TYPE	DEPTH	TYPE	DEPTH	TYPE

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

Head & Plugs	<input type="checkbox"/> TBG <input type="checkbox"/> D.P.	SQUEEZE JOB	
<input type="checkbox"/> Double	SIZE	TOOL	TYPE
<input checked="" type="checkbox"/> Single	WEIGHT	DEPTH	
<input type="checkbox"/> Swage	GRADE	TAIL PIPE: SIZE	DEPTH
<input type="checkbox"/> Knockoff	THREAD	TUBING VOLUME	Bbls
TOP <input type="checkbox"/> R <input type="checkbox"/> W	<input type="checkbox"/> NEW <input type="checkbox"/> USED	CASING VOL. BELOW TOOL	Bbls
BOT <input type="checkbox"/> R <input type="checkbox"/> W	DEPTH	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											
00:47	-	2500	-	-	-	H2O	8.34				
00:50	-	180	25	-	5.8	H2O	8.34				
00:56	-	220	76	25	5.8	CMT	12.8				
01:12	-	100	27	101	4.0	CMT	14.6				
01:20	-	-	-	-	-	-	-				
01:23	-	170	41.9	-	6.0	H2O	8.34				
01:28	-	240	29.4	2.0	2.0	H2O	8.34				
01:31	-	180	36.3	2.0	2.0	H2O	8.34				
01:39	-	-	430	-	-	-	-				
01:39	-	-	-	-	-	-	-				

REMARKS

SYSTEM CODE	NO. OF SACKS	YIELD CU. FT/SK	COMPOSITION OF CEMENTING SYSTEMS				SLURRY MIXED	
			INCREMENT	CUM	INJECT RATE	FLUID TYPE	FLUID DENSITY	BBLs
1.	225	1.89	50/50 P02/c + 3% S1 + 5% D44 (BWDW) + 1/4 #1/SK D29	76	12.8			
2.	125	1.22	50/50 P02/c + 2.5% S1 + 1/4 #1/SK D29	27	14.6			
3.								
4.								
5.								
6.								

BREAKDOWN FLUID TYPE	VOLUME	DENSITY	PRESSURE	MAX.	MIN.
<input type="checkbox"/> HESITATION SQ.	<input type="checkbox"/> RUNNING SQ.	CIRCULATION LOSS	<input type="checkbox"/> YES <input type="checkbox"/> NO	Cement Circulated To Surf.	<input type="checkbox"/> YES <input type="checkbox"/> NO
BREAKDOWN	PSI	FINAL	PSI	Bbls	TYPE OF WELL
Washed Thru Perfs	<input type="checkbox"/> YES <input type="checkbox"/> NO	TO	FT.	MEASURED DISPLACEMENT	<input type="checkbox"/> OIL <input type="checkbox"/> GAS <input type="checkbox"/> STORAGE <input type="checkbox"/> INJECTION <input type="checkbox"/> BRINE WATER <input type="checkbox"/> WILDCAT
PERFORATIONS	TO	TO	CUSTOMER REPRESENTATIVE	DS	SUPERVISOR
			Dennis Russell		Jon Sosa