STATE CORPORATION COMMISSION OF KANSAS	API NO. 15- 175-003700	0.07
OIL & GAS CONSERVATION DIVISION RECOMPLETION FORM	County Seward	
ACC-2 AMENDMENT TO WELL HISTORY	l Seward	East
1.	SW SW NE Sec 11 Twp 34S	
06120		
Operator: License # 06120	2970 Ft North from Southeast	
Address <u>P. O. Box 9999</u>	(Note: Locate well in section	plat below)
City/State/Zip Amarillo, TX 79105	Lease NameAdamson	Well # 1
	Field Name Hugoton	
Purchaser Williams Natural Gas		
Operator Contact Person John Papso	Name of NAMX Formation <u>Chase</u>	
Phone 806/371-3165	 Elevation: Ground 2890'	KB 2901
(110110	Elevation: Ground 2890' Section Plat	- NS - S (S (S)
Designate Type of Original Completion	İ	
New Well Re-Entry X Workover		5280
		4950
SWD		4620
X Gas Inj Delayed Compa	kiven 	3960
	FIAED	3630
STATE CONFORM	Their commission	3300
Date of Original Completion: $10/20/50$	┣╼╼┿═╼╋╼ ╒ ┿ ┵┿	2640
	3 1989	1980
DATE OF RECOMPLETION: 2-5	189	1650
CONCEPT	TION DIVISION	1320
12/14/88 1/4/89 CONSERV.	Ransas	990
Commenced Completed	 	330
D. J. Tura (D. v. al. Mu.).	\$280 4950 4290 33630 3300 2970 2970 2970 1980	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Designate Type of Recompletion/Workover:	28 4 4 4 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	<u> </u>
Deepening Delayed Completion		
Plug Back X Re-perforation	K.C.C. OFFICE USE	,
	FLetter of Confidentia	lity Attached
Conversion to Injection/Disposal	C Wireline Log Received	
	C Drillers Timelog Rece	itved
is recompleted production:	Distribution	· ·
	KCC SWD/Rep	NGPA
Commingled; Docket No.	KGS Plug	Other
Dual Completion; Docket No.	<u> </u>	(Specify)
Other (Disposal or Injection)?	2-35	89 1
•		
	<u> </u>	
INSTRUCTIONS: This form shall be completed in tri		·
200 Colorado Derby Building, Wichita, Kansas 67202,		
82-3-107 and 82-3-141 apply. Information on side to		
12 months if requested in writing and submitted with		
excess of 12 months. One copy of any additions		
submitted) shall be attached with this form. Submi		
commingling or dual completions. Submit CP-4 wi		
abandoned wells. NOTE: Conversion of wells to either	r disposal or injection <u>must</u> receive	approval before use;
submit form U~1.		
\ 		
All requirements of the statutes, rules and regulat		
been fully complied with and the statements herein a	re complete and correct to the best o	π my knowledge.
0		
Signature Wellen Durne.	Title Agent	Doto 1/21/00
signature Maryle Marries	IIIIA PEHIL	Date <u>1/31/89</u>
Subscribed and sworn to before me this31		
Notary Public Thorah Sublet		
Notary Public VUXUI/UM NOTARY Public VX	√ Date Commission Ex	pires 12/22/92

SIDE TWO

Operator NameCabo	ot Petrole	um Corpo	ration	Lease N	ame <u>Adar</u>	nson	Well # _	1
Sec <u>11</u> Twp	34 <u>S</u> Rge	34	East	County	Se	eward		
		REΩ	MPLETED FORMA	TION DESOR	IPTION:			
		NE CO		Sa				
	Name				<u>Тор</u>		Bottom	
N	/A							
`								
· · · · · · · · · · · · · · · · · · ·		ADD	ITIONAL CEMEN	TING/SQUEE	ZE RECORD			
Purpose:	Dept	h Bottom	Type of (èmen†	 # Sacks 	Used Type	& Percent Add	itives
Protect Casing Plug Back TD Plug Off Zone								
Shots Per Foot	Specify F	TION RECORI cotage of I	Each			ot, Cement So	queeze Record Tal Used)	;
1 SPF	2735'-274	0'	200	0 gal. 15	5% HCL			
	:		l					
вто <u>*</u>	Plug Type		•					
lize <u>1 1/2"</u>				A† <u>N/</u>		Was Liner Ru	in? <u> X </u>	
Estimated Production					26	bbl/water		
			125 M	CF gas	0	gas-oil rati		en. Gran
			,	**	•	4 N		