

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- 189-219730000

County Stevens

SW - NE - NE Sec. 10 Twp. 32S Rge. 37 X W^E

1250 Feet from N (circle one) Line of Section

1250 Feet from E/W (circle one) Line of Section

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

Lease Name J. A. Porter Unit Well # 4

Field Name Hugoton

Producing Formation Chase

Elevation: Ground 3110 KB 3119

Total Depth 2958 PBDT 2902

Amount of Surface Pipe Set and Cemented at 630 Feet

Multiple Stage Cementing Collar Used? Yes X No

If yes, show depth set NA Feet

If Alternate II completion, cement circulated from NA

feet depth to NA w/ NA sx cmt.

Fluid Management Plan all 4-1-96
(Data must be collected from the Reserve Pit)

chloride content 8,400 ppm Fluid volume 390 bbls

Dewatering method used Waste Minimization Mud System

Location of fluid disposal if hauled offsite:

Operator Name Mobil Oil Corporation

Lease Name Hill #3 SWD License No. 5208

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

County Stevens Docket No. CD-117710

Operator: License # 5208

Name: Mobil Oil Corporation

Address P.O. Box 2173

2319 North Kansas Avenue

City/State/Zip Liberal, KS 67905-2173

Purchaser: Spot Market

Operator Contact Person: Sharon Cook

Phone (316) 626-1142

Contractor: Name: Norseman Drilling Inc.

License: 3779

Wellsite Geologist: L. J. Reimer

Designate Type of Completion
 New Well Re-Entry Workover

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

If Workover:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

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

9-10-95 9-14-95 10-2-95
Spud Date Date Reached TD Completion Date

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

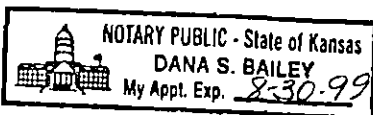
Title Regulatory Assistant Date 12-19-95

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

Notary Public Dana S. Bailey

Date Commission Expires August 30, 1999

5-255.kcc



K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
Distribution
1 KCC SWD/Rep NGPA
KGS Plug Other (Specify)

Operator Name Mobil Oil Corporation Lease Name J. A. Porter Unit Well # 4

Sec. 10 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 checked="" type="checkbox"/> Log Formation (Top), Depth and Datums <input type="checkbox"/> Sample Name Top Datum Glorietta 1280 1445 Stone Corral 1730 1800 Chase 2585 2915 Council Grove 2915 --
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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
List All E.Logs Run:		

Dual Induction Focused Log Gamma Ray Caliper
Z-Densilog Compensated Neutron Spectralog
Caliper Log Gamma Ray

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#	630	Class C	175	50:50 C/poz
					Class C	175	50:50 C/poz
Production Casing	7.875	5.500	14#	2948	Class C	225	3% D79
					Class C	150	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	2647-57	Acid: 1,000 gals 7.5% HCL	
	2690-2700	Fracd: 705 bbls 20# Crosslink Gel	
	2748-63	135,000 lbs 12/20 Brady Sand	
	2800-15		

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.		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
		375			

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

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

Production Interval: 2647 2815

CEMENTING SERVICE REPORT

Schlumberger
Dowell

DOWELL SCHLUMBERGER INCORPORATED

TREATMENT NUMBER 7509	DATE 7-10-95
STAGE 1	DS 03
DISTRICT 12	

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

WELL NAME AND NO. J.A. PORTER #4	LOCATION (LEGAL) SEC. 10-325-37W
FIELD-POOL HUGOTON	FORMATION SUFT
COUNTY/PARISH STEVENS	STATE KS
API. NO.	

RIG NAME: NORSMAN	WELL DATA:		BOTTOM	TOP
BIT SIZE 12 1/4	CSG/Liner Size 8 3/8	TOTAL DEPTH 24	WEIGHT 24	
<input type="checkbox"/> ROT <input type="checkbox"/> CABLE	FOOTAGE 630	MUD TYPE	GRADE US550	
<input type="checkbox"/> BHST <input type="checkbox"/> BHCT	THREAD 8KD	MUD DENSITY	LESS FOOTAGE SHOE JOINT(S) 588	TOTAL
MUD VISC.	Disp. Capacity 37.5			

ORIGINAL

NAME mob'l
AND _____
ADDRESS _____
ZIP CODE _____

SPECIAL INSTRUCTIONS
8 galley unit 6% as per customer's orders as follows

Float	TYPE <u>Rot Rotor</u>	Stage Tool	TYPE
	DEPTH <u>588</u>		DEPTH
SHOE	TYPE <u>cmrose</u>		TYPE
	DEPTH <u>630</u>		DEPTH

IS CASING/TUBING SECURED? YES NO
LIFT PRESSURE 270 PSI CASING WEIGHT ÷ SURFACE AREA (3.14 x R²)
PRESSURE LIMIT PSI BUMP PLUG TO 900 PSI
ROTATE RPM RECIPROCATATE FT No. of Centralizers

Head & Plugs	<input type="checkbox"/> TBG <input type="checkbox"/> D.P.	SQUEEZE JOB	
<input type="checkbox"/> Double	SIZE	TOOL	TYPE
<input 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	

JOB SCHEDULED FOR TIME: 20:00 DATE: 9-10 ARRIVE ON LOCATION TIME: 19:45 DATE: 9-10 LEFT LOCATION TIME: _____ DATE: _____

TIME	PRESSURE		VOLUME PUMPED BBL		INJECT RATE	FLUID TYPE	FLUID DENSITY	SERVICE LOG DETAIL
	TBG OR D.P.	CASING	INCREMENT	CUM				
0001 to 2400								PRE-JOB SAFETY MEETING
23:14		1800				1120	9.13	PSI TEST
23:16		160	26	X	6	11	11	START H2O
23:20		160	58	26	6	CMT	12.9	START LDCMT
23:30		200	37	84	6	CMT	14.6	Start TC CMT
23:36		210		121	6			SHUT DOWN A100 Plug
23:37		190	38	X	5.7	H2O	9.13	START DISP
23:43		260		28	5.7	11	11	lower BGR
23:43		210		30	2.3	11	11	PSI CHECK
23:44		230		38	2.3	11	11	CMT TO SUFT CMT
23:47		890		38	2.3	11	11	Bump Plug
23:48		900						Bleed lines close in HEAD

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% C + 6% 0.20 + 3% 5-1 + 5% 0.44 (BLOW) + 4% 0.29	58	12.8		
2.							
3.	175	1.22	50% C + 2% 5-1 + 4% 0.29	37	14.6		
4.							
5.							
6.							

BREAKDOWN FLUID TYPE	VOLUME		DENSITY	PRESSURE	MAX.	MIN.
<input type="checkbox"/> HESITATION SQ.	<input type="checkbox"/> RUNNING SQ.	CIRCULATION LOST	<input type="checkbox"/> YES <input type="checkbox"/> NO	Cement Circulated To Surf.	<input type="checkbox"/> YES <input type="checkbox"/> NO	10 Bbls
BREAKDOWN	PSI	FINAL	PSI	DISPLACEMENT VOL.	38 Bbls	
Washed Thru Perfs	<input type="checkbox"/> YES <input type="checkbox"/> NO	TO	FT.	MEASURED DISPLACEMENT	<input type="checkbox"/> WIRELINE	

PERFORATIONS TO TO TO TO
CUSTOMER REPRESENTATIVE: Soft Lositer
DS SUPERVISOR: Ret. Roemer

CEMENTING SERVICE REPORT

Schlumberger
Dowell

DOWELL SCHLUMBERGER INCORPORATED

TREATMENT NUMBER: 7525
DATE: 9-13
STAGE: 1 DS DISTRICT: 0312

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

WELL NAME AND NO. **Ja. Porter #4**
FIELD-POOL **Hugoton**
COUNTY/PARISH **STEVENS**
LOCATION (LEGAL) **SEC. 10-325-374**
FORMATION **shale**
STATE **KS** API. NO.

RIG NAME: **Wesman**
WELL DATA: **BOTTOM** TOP
BIT SIZE **7 7/8** CSG/Liner Size **5 1/2**
TOTAL DEPTH **14** WEIGHT **14**
 ROT CABLE FOOTAGE **2948**
MUD TYPE GRADE **WSSO**
 BHST BHCT THREAD **8RD**
MUD DENSITY LESS FOOTAGE SHOE JOINT(S) **2902** TOTAL
MUD VISC. Disp. Capacity **71**

NAME **mobil**
AND
ADDRESS
ZIP CODE

ORIGINAL

SPECIAL INSTRUCTIONS
*Display cmf 54 415 on for customer
order as follows*

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

Float	TYPE	AutoFill Flap.	TYPE	
	DEPTH	2902	DEPTH	
SHOE	TYPE	CMT 205E	TYPE	
	DEPTH	2948	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 **1440** PSI
ROTATE RPM RECIPROCATATE FT No. of Centralizers

Head & Plugs TBG D.P. SQUEEZE JOB
 Double WEIGHT TOOL TYPE
 Single GRADE DEPTH
 Swage THREAD TAIL PIPE: SIZE DEPTH
 Knockoff NEW USED TUBING VOLUME Bbls
TOP R W NEW USED CASING VOL. BELOW TOOL Bbls
BOT R W DEPTH TOTAL Bbls
ANNUAL VOLUME Bbls

TIME SCHEDULED FOR TIME: **20:30** DATE: **9-13** ARRIVE ON LOCATION TIME: **21:00** DATE: **9-13** LEFT LOCATION TIME: DATE: **4-1-76**

TIME	PRESSURE		VOLUME PUMPED BBL		INJECT RATE	FLUID TYPE	FLUID DENSITY	SERVICE LOG DETAIL
	TBG OR D.P.	CASING	INCREMENT	CUM				
0001 to 2400								PRE-JOB SAFETY MEETING
22:09		2500				H2O 8.3		PSI TEST
22:10		160	26	+	5.9	" "		START H2O
22:15		260	110	26	5.9	CMT 11.5		START LA CMT
22:33		170	37	130	5.9	CMT 14.8		START TL CMT
22:36		140		12	4	" "		lower rate
22:42		110		173	4	" "		Shut Down WSSA TAPIT
22:45		110	71			H2O 8.3		Drop Plug Start D.P.
22:53		550		48	6	" "		CMT TO SURFACE
22:55		860		62	6	" "		lower rate
22:56		750		65	2.2	" "		PSI check
22:59		850		70	2	" "		PSI check
22:59		1440		71	2	" "		Bump Plug
23:01								bleed pres check flood

REMARKS

SYSTEM CODE	NO. OF SACKS	YIELD CU. FT/SK	COMPOSITION OF CEMENTING SYSTEMS		SLURRY MIXED		
			BBLs	DENSITY	BBLs	DENSITY	
1.	225	2,75	C+3% D-79+	0.28	0.46	110	11.5
2.							
3.	150	1,37	C+2% S-1+2% B-28+	0.6%	0.60	37	14.8
4.							
5.							
6.							

BREAKDOWN FLUID TYPE VOLUME DENSITY PRESSURE **1440** MAX. **110** MIN:
 HESITATION SQ. RUNNING SQ. CIRCULATION LOST YES NO Cement Circulated To Surf. YES NO **23** Bbls.
BREAKDOWN PSI FINAL PSI DISPLACEMENT VOL. **71** Bbls TYPE OF WELL OIL STORAGE BRINE WATER GAS INJECTION WILDCAT **475K5**
Washed Thru Perfs YES NO TO FT. MEASURED DISPLACEMENT WIRELINE

PERFORATIONS TO TO CUSTOMER REPRESENTATIVE **JEFF LASITER** DS SUPERVISOR **Ray Pearson**