

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

API NO. 15- 189-21839 -00-00 ORIGINAL
County Stevens
- NW - SE - NE Sec. 11 Twp. 33S Rge. 37 X W E

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: Cheyenne Drilling

License: 5382

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 PBT

Commingled Docket No. _____

Dual Completion Docket No. _____

Other (SWD or Inj?) Docket No. _____

1-8-95 1-11-95 2-9-95

Spud Date Date Reached TD Completion Date

1390 Feet from S (circle one) Line of Section

1250 Feet from E (circle one) Line of Section

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

Lease Name Madden #2 Unit Well # 4

Field Name Hugoton

Producing Formation Chase

Elevation: Ground 3078 KB 3089

Total Depth 2949 PBT 2894

Amount of Surface Pipe Set and Cemented at 650 Feet

Multiple Stage Cementing Collar Used? Yes 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 1 09# 11-17-95
(Data must be collected from the Reserve Pit)

Chloride content 4800 ppm Fluid volume 400 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 E

County Stevens Docket No. CD-117710

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 MAR 06 1995
Sharon A. Cook

Title Regulatory Assistant DATE 3-3-95 OFFICE WICHITA, KANSAS

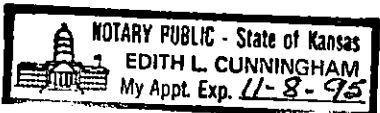
Subscribed and sworn to before me this 3 day of March, 1995.

Notary Public Edith L. Cunningham

Date Commission Expires November 8, 1995

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

5-73.kcc



Form ACO-1 (7-91)

COMMISSION
MAR 06 1995
DIVISION
WICHITA, KANSAS

SIDE TWO

Operator Name Mobil Oil Corporation Lease Name Madden #2 Unit Well # 4
 Sec. 11 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy.) List All E.Logs Run: Array Induction Shallow Focused Electric Log Compensated Neutron Compensated Photo-Density Spectral Gamma Ray	<table border="0" style="width:100%"> <tr> <td><input checked="" type="checkbox"/> Log</td> <td>Formation (Top), Depth and Datums</td> <td><input type="checkbox"/> Sample</td> </tr> <tr> <td>Name</td> <td>Top</td> <td>Datum</td> </tr> <tr> <td>Glorietta</td> <td>1207</td> <td>1374</td> </tr> <tr> <td>Stone Corral</td> <td>1676</td> <td>1738</td> </tr> <tr> <td>Chase</td> <td>2572</td> <td>2906</td> </tr> <tr> <td>Council Grove</td> <td>2906</td> <td>--</td> </tr> </table>	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datums	<input type="checkbox"/> Sample	Name	Top	Datum	Glorietta	1207	1374	Stone Corral	1676	1738	Chase	2572	2906	Council Grove	2906	--
<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datums	<input type="checkbox"/> Sample																	
Name	Top	Datum																	
Glorietta	1207	1374																	
Stone Corral	1676	1738																	
Chase	2572	2906																	
Council Grove	2906	--																	

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#	650	Class C Class C	175 sx 150 sx	50:50 C/poz 50:50 C/poz
Production Casing	7.875	5.500	14#	2939	Class C Class C	270 sx 150 sx	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				

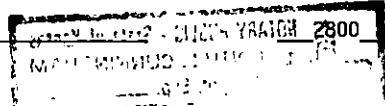
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
SEE ATTACHED WELL HISTORY			
1	2790'-2800' 2742'-2757' 2767'-2777'		
1	2702'-2708' 2642'-2662'		
2	2685'-2695' 2602'-2612'		

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		None				
Date of First, Resumed Production, SWD or Inj. 2-6-95			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 489	Mcf	Water Bbls.	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 2602

Production Interval: Other (Specify) _____



Well Data - Well History Report

Lease: MADDEN #2 UNIT WELL #4 Well #: 4 Well ID: 0053070
 API #: 15-189-21839-00 State: KS County: STEVENS
 Ppty ID: 1995300 OCSG #:

Spud Date: 01/08/1995 Water Depth: 0 KB Height: 11
 Spud Time: 16:00 Original Ref Point: KB BH Height: 0
 DF Height:

ORIGINAL

Drilling Job Start/End: 01/08/95 @ 16:00 to 01/11/95 @ 20:00
 Completion Job Start/End: 01/18/95 @ 07:00 to 02/09/95 @ 17:00

DATE	ACTIVITY				
01/09/95	CASING	OD: 8.625,	24.00#	J55,	Top/Bot: 0/650
01/11/95	CASING	OD: 5.500,	14.00#	J55,	Top/Bot: 0/2939

WELLBORE SUMMARY

API WB#	Creation Date	Top	TD	Diam(@TD)	Plug Back Date	Depth PBTD
00	01/08/95	0	2949		01/11/95	2949
00	01/08/95	0	2949		02/09/95	2894

CASING SUMMARY

Date RUN	String	OD	ID	Grade	Wt/FT	Connection	Top/Bot
01/09/95		8.625	8.097	J55	24.00	STC	0/650
01/11/95		5.500	5.012	J55	14.00	STC	0/2939

PERFORATION SUMMARY

Perf Date	Top Perf	Btm Perf	Zone Name	Phase Hole (deg) Size	J/B Sqzd

RECEIVED STATE CORPORATION COMMISSION

MAR 06 1995 SPF

CONSERVATION DIVISION WICHITA, KANSAS

PERFORATION TIME CODE ACTIVITY

DATE	HOURS	CODE	ACTIVITY
1995-01-18	4.00	636	PERF. FT. RILEY 2790-2800, (1SPF), TOWAN DA 2742-57(1SPF), 2767-77(1SPF), WINFIELD 2685-95, (2SPF), 2702-08(1SPF) L.KRIDER 2

MSD999

*** PRISM ***

Page 2

Well Data - Well History Report

642-62 (1SPF), U. KRIDER 2602-12 (2SPF).
R/GUAGE RING & CLEAR PERFS.

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WELL TREATMENT TIME CODE ACTIVITY

DATE	HOURS	CODE	ACTIVITY
-----	-----	---	-----
1995-01-18	1.00	657	ACIDIZE PERFS W/1000 GAL 7.5% HCL & 1000 GAL WTR. IN 500 STAGES, BEGIN W/WTR. & 200 BALL SEALERS, FORM BROKE AT 1780#, GOOD BALL ACTION & BALL OUT, R/GUAGE RING & CLEAR PERFS.
1995-01-18	1.50	655	FRAC VIA CSG W/110000# 10/20 SND & 1000 BBL'S X-LINKED FW, SND RAMMED 1PPG-8PPG, AIR 55 BPM, SCREENED OUT W/57 BBL'S FL USH IN CSG. ISIP 550# 5 MIN SI_0

Report Generated on: 03/03/95 @ 09:35

End of Report...

CEMENTING SERVICE REPORT

Schlumberger

Dowell

DOWELL SCHLUMBERGER INCORPORATED

TREATMENT NUMBER

03126784

DATE

1-8-94

STAGE

DS

DISTRICT

Ulysses, KS 0312

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

WELL NAME AND NO. MADDEN 2-4		LOCATION (LEGAL) SEC 11-33S-37W		RIG NAME: CHEYENNE #4	
FIELD-POOL HUGOTON		FORMATION		WELL DATA: BOTTOM TOP	
COUNTY/PARISH STEVENS		STATE KS		API. NO.	
NAME MOBIL OIL CORP		MUD TYPE		GRADE USS50	
AND		MUD DENSITY		LESS FOOTAGE SHOE JOINT(S) 44	
ADDRESS		MUD VISC.		Disp. Capacity 38.6	
ZIP CODE		NOTE: Include Footage From Ground Level To Head In Disp. Capacity		TOTAL	

ORIGINAL

SPECIAL INSTRUCTIONS		Float		TYPE INSERT FLOAT VALVE		TYPE	
		DEPTH		606		DEPTH	
		SHOE		TYPE CMT NOSE		TYPE	
		DEPTH		650		DEPTH	
		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		<input type="checkbox"/> WEIGHT		DEPTH	
		<input type="checkbox"/> Swage		<input type="checkbox"/> GRADE		TAIL PIPE: SIZE DEPTH	
		<input type="checkbox"/> Knockoff		<input type="checkbox"/> THREAD		TUBING VOLUME Bbls	
IS CASING/TUBING SECURED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		LIFT PRESSURE 267 PSI		CASING WEIGHT ÷ SURFACE AREA (3.14 × R ²)		CASING VOL. BELOW TOOL Bbls	
PRESSURE LIMIT 500 OVER PSI		BUMP PLUG TO 9/0 PSI		TOP <input checked="" type="checkbox"/> R <input type="checkbox"/> W		NEW <input type="checkbox"/> USED Bbls	
ROTATE RPM		RECIPROCAT FT		No. of Centralizers		TOTAL 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	
00:50											
01:22		2400					H ₂ O	8.32			PSI TEST
01:25		100	25		5.8		H ₂ O	8.32			START H ₂ O AHEAD
01:31		150	65	25	5.8		CMT	12.2			START LEAD
01:41		190		90	5.8		CMT	12.2			PSI Check (5 bbl of LEAD)
01:43		220	32		5.8		CMT	14.8			START TAIL
01:46		280	16	106	5.8		CMT	14.8			PSI Check 16 bbl of Tail
01:49				122							Shutdown / Drop Top Plug
01:51		0	38.6		5.8		H ₂ O	8.32			START DISP
01:57		310	10.	286	5.8		H ₂ O	8.32			PSI Check
02:00				38.6							Shutdown / Plug Down / Check Float

REMARKS

SYSTEM CODE	NO. OF SACKS	YIELD CU. FT/SK	COMPOSITION OF CEMENTING SYSTEMS				SLURRY MIXED					
							BBLs	DENSITY				
1.	175	2.11	50/50	POZ/C	+ 6%	D20	+ 3%	SI	+ 1/4 #/sk	D29	65.7	12.2
2.	150	1.20	50/50	POZ/C	+ 0.75%	D20	+ 3%	SI	+ 1/4 #/sk	D29	32	14.8
3.												
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 checked="" type="checkbox"/> NO		Cement Circulated To Surf. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
BREAKDOWN		PSI		FINAL		PSI		DISPLACEMENT VOL. 38.6 Bbls	
Washed Thru Perfs <input type="checkbox"/> YES <input type="checkbox"/> NO		TO		FT.		MEASURED DISPLACEMENT <input checked="" type="checkbox"/>		<input type="checkbox"/> WIRELINE	
PERFORATIONS		TO		TO		CUSTOMER REPRESENTATIVE		DS SUPERVISOR	
						MR. Volan Youngblood		Russ Wagstaff	

CEMENTING SERVICE REPORT

Schlumberger

Dowell

DOWELL SCHLUMBERGER INCORPORATED

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

TREATMENT NUMBER 0312 6744	DATE 1-11-95
STAGE DS	DISTRICT ULSSES, KS 0312

WELL NAME AND NO. MADDEN #2-4	LOCATION (LEGAL) SEC 11-33S-37W	RIG NAME: CHEYENNE 44
FIELD POOL HUGOTON	FORMATION	WELL DATA:
COUNTY/PARISH STEVENS	STATE KS	API. NO.
NAME MOBIL OIL CORP	AND	ADDRESS
SPECIAL INSTRUCTIONS START CEMENT W/O SHUTDOWN PER CUSTOMER'S ORDER	IS CASING/TUBING SECURED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	LIFT PRESSURE 1733 PSI
CASING WEIGHT - SURFACE AREA (3.14 x R ²)	PSI	CASING WEIGHT - SURFACE AREA (3.14 x R ²)
PRESSURE LIMIT 500 OVER PSI	BUMP PLUG TO 1260 PSI	ROTATE RPM RECIPROCATE FT No. of Centralizers

BIT SIZE 7 7/8	CSG/Liner Size 5 1/2	TOTAL DEPTH 49	WEIGHT 14	ROT <input type="checkbox"/> CABLE <input type="checkbox"/>	FOOTAGE 2939	MUD TYPE	GRADE USS50	BHST <input type="checkbox"/> BHCT <input type="checkbox"/>	THREAD 8RD	MUD DENSITY	LESS FOOTAGE SHOE JOINT(S) 44	MUD VISC.	Disp. Capacity 70.6	TOTAL
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Float	TYPE INSERT FLOAT VALVE	DEPTH 2395	Stage Tool	TYPE	DEPTH
SHOE	TYPE CMT NOSE	DEPTH 2939		TYPE	DEPTH

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	<input type="checkbox"/> WEIGHT	DEPTH
<input type="checkbox"/> Swage	<input type="checkbox"/> GRADE	TAIL PIPE: SIZE DEPTH
<input type="checkbox"/> Knockoff	<input type="checkbox"/> 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 TIME: 1400 DATE: 1-11-95	ARRIVE ON LOCATION TIME: 1410 DATE: 1-11-95	LEFT LOCATION TIME: 1730 DATE: 1-11-95
0001 to 2400	TBG OR D.P. CASING	INCREMENT CUM	INJECT RATE	FLUID TYPE	FLUID DENSITY

TIME	TBG OR D.P.	CASING	INCREMENT	CUM	INJECT RATE	FLUID TYPE	FLUID DENSITY	SERVICE LOG DETAIL
1520								PRE-JOB SAFETY MEETING
1525	2500							PSI TEST
1529	0	25			5.8	H ₂ O	8.32	START H ₂ O AHEAD
1534	250	132	25		5.8	CMT	11.5	START LEAD
1544	200	64	89		5.8	CMT	11.5	PSI TEST (check)
1556	200	36	157		5.9	CMT	14.8	START TAIL
1559	320	20	177		5.9	CMT	14.8	PSI check
1602			16	193				SHUTDOWN/WASH LINES/DRIP TOP PLUG
1607	0	70			5.9	H ₂ O	8.32	START DISPL
1610	150	20	20		6.0	H ₂ O	8.32	PSI check
1617	990	43	63		6.0	H ₂ O	8.32	PSI check
1621				704				SHUTDOWN/CHECK FLOAT (Holding)

ORIGINAL

REMARKS

SYSTEM CODE	NO. OF SACKS	YIELD CU. FT/SK	COMPOSITION OF CEMENTING SYSTEMS				SLURRY MIXED	
							BBLs	DENSITY
1.	270	2.75	CLASS C + 3% D79 + 0.2% D46 + 1/4 #1/sk D29				132	11.5
2.	150	1.37	CLASS C + 2% B28 + 2% S1 + 0.6% D60 + 0.2% D46				36.5	14.8
3.								
4.								
5.								
6.								

BREAKDOWN FLUID TYPE	VOLUME	DENSITY	PRESSURE 1260 MAX.	MIN: 71355
<input type="checkbox"/> HESITATION SQ.	<input type="checkbox"/> RUNNING SQ.	CIRCULATION LOST	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Cement Circulated To Surf. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO 35 Bbls
BREAKDOWN	PSI FINAL	PSI	DISPLACEMENT VOL. 70.6 Bbls	TYPE OF WELL <input type="checkbox"/> OIL <input checked="" type="checkbox"/> GAS
Washed Thru Perfs <input type="checkbox"/> YES <input type="checkbox"/> NO	TO	FT.	MEASURED DISPLACEMENT <input checked="" type="checkbox"/>	<input type="checkbox"/> STORAGE <input type="checkbox"/> BRINE WATER <input type="checkbox"/> WILDCAT
PERFORATIONS	TO	TO	CUSTOMER REPRESENTATIVE	DS SUPERVISOR
			MR. VOLAN YOUNGBLOOD	Russ Wagstaff