

# \* Amended Report

15-189-20780-0000

SIDE ONE

## STATE CORPORATION COMMISSION OF KANSAS OIL & GAS CONSERVATION DIVISION

### WELL COMPLETION OR RECOMPLETION FORM ACO-1 WELL HISTORY

#### DESCRIPTION OF WELL AND LEASE

Operator: License # 5208  
 Name Mobil Oil Corporation  
 Address P.O. Box 5444  
 Denver, CO 80217

Purchaser Northern Natural Gas

Operator Contact Person J. E. Dawson  
 Phone (303) 298-2696

Contractor: License # *na*  
 Name

Wellsite Geologist K. L. Stollenwerk  
 Phone (303) 298-3748

- Designate Type of Completion
- New Well     Re-Entry     Workover
- Oil     SWD     Temp Abd  
 Gas     Inj     Delayed Comp.  
 Dry     Other (Core, Water Supply etc.)

If ONWO: old well info as follows:  
 Operator  
 Well Name  
 Comp. Date ..... Old Total Depth.....

#### WELL HISTORY

Drilling Method:  
 Mud Rotary     Air Rotary     Cable

12/18/84    N/A    4/23/85  
 Spud Date    Date Reached TD    Completion Date

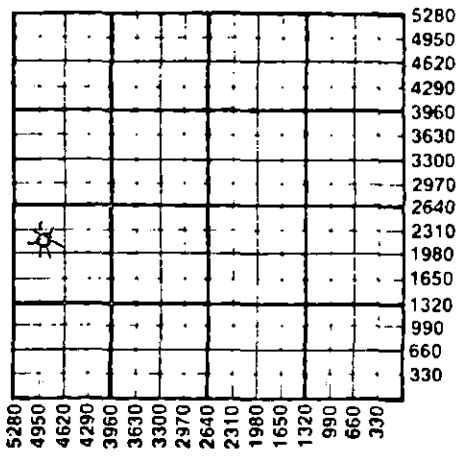
6450    \* 6426  
 Total Depth    PBD

Amount of Surface Pipe Set and Cemented at 1759 feet  
 Multiple Stage Cementing Collar Used?  Yes  No  
 If yes, show depth set.....feet  
 If alternate 2 completion, cement circulated from.....feet depth to.....w/.....SX cmt

API NO. ~~15-189-20780~~.....  
 County...Stevens.....  
 NW SW Sec. 25 Twp. 32S Rge. 35 West  
 2086 Ft North from Southeast Corner of Section  
 4726 Ft West from Southeast Corner of Section  
 (Note: Locate well in section plat below)

Lease Name Marcellus C Well # 1  
 Field Name North Shuck NW  
 Producing Formation Upper Chester/Limestone  
 Elevation: Ground 2942 KB 2958

#### Section Plat



WATER SUPPLY INFORMATION  
 Disposition of Produced Water:  Disposal  
 Docket # CO-82408  Repressuring

Questions on this portion of the ACO-1 call:  
 Water Resources Board (913) 296-3717  
 Source of Water:  
 Division of Water Resources Permit # T84-680

Groundwater.....Ft North from Southeast Corner  
 (Well) .....Ft West from Southeast Corner of  
 Sec Twp Rge  East  West

Surface Water.....Ft North from Southeast Corner  
 (Stream, pond etc).....Ft West from Southeast Corner  
 Sec Twp Rge  East  West

Other (explain).....  
 (purchased from city, R.W.D. #)

INSTRUCTIONS: This form shall be completed in duplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 90 days after completion or recompletion of any well. Rule 82-3-130 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 drillers time log shall be attached with this form. 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 *J. E. Dawson* J. E. Dawson  
 Title Producing Accounting Supervisor Date 9.16.86

Subscribed and sworn to before me this 16<sup>th</sup> day of September 1986  
 Notary Public *Debra A Cavette*  
 MY COMMISSION EXPIRES 7/2/90

K.C.C. OFFICE USE ONLY

Letter of Confidentiality Attached  
 Wireline Log Received  
 Drillers Timelog Received

Distribution  
 SWD/Rep     NGPA  
 Plug     Other  
 (Specify)

*J. E. Dawson* 9.30.86  
 subscribed & sworn to before me on this 30<sup>th</sup> day of September, 1986.  
 MY COMMISSION EXPIRES 7/2/90  
 10-6-1986 OCT 6 1986  
 Form ACO-1 (7-84)  
*Debra A Cavette*  
 Notary

Section 25 Twp 32 Rge 35 W

SIDE TWO

Operator Name Mobil Oil Corporation Lease Name Marcellus "C" Well # 1

Sec. 25 Twp. 32S Rge. 35 County Stevens

East  
 West

WELL LOG

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  Yes  No  
 Samples Sent to Geological Survey  Yes  No  
 Cores Taken  Yes  No

Formation Description  
 Log  Sample

Frac Data Report:

10,000 gals gel KCl water  
 28,000 gals 2% KCl  
 49,000# sand total

| Name          | Top  | Bottom |
|---------------|------|--------|
| Chase         | 2622 |        |
| Council Grove | 2955 |        |
| Admire        | 3224 |        |
| Wabaunsee     | 3343 |        |
| Lansing       | 4296 |        |
| Kansas City   | 4630 |        |
| Marmaton      | 5035 |        |
| Cherokee      | 5217 |        |
| Morrow        | 5636 |        |
| Chester       | 5902 |        |
| St. Genevieve | 6173 |        |
| St. Louis     | 6287 |        |

| CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used<br>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  |   | 9 5/8"  | 36#            | 1759   |   | 600         |                            |
| Production   |   | 5 1/2"  | 15.5#          | 6433   |   | 310         |                            |
| PERFORATION RECORD   |   |   |                |  | Acid, Fracture, Shot, Cement Squeeze Record |             |                            |
| Shots Per Foot   | Specify Footage of Each Interval Perforated |   |                | (Amount and Kind of Material Used)                                 |   | Depth       |                            |
| 4  | 5945-5960                                   |   |                |  |   |             |                            |
| TUBING RECORD  |   |   |                | Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No |   |             |                            |
| Date of First Production   |   | Size  |                | Set At   |   | Packer at   |                            |
| 12/26/85   |   | 2 7/8"  |                |  |   |             |                            |
| 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   | Gas            | Water  | Gas-Oil Ratio                               | Gravity     |                            |
|  |   | Bbls  | 1100 MCF       | Bbls   | CFPB  |             |                            |

METHOD OF COMPLETION

Production Interval

Disposition of gas:  Vented  Open Hole  Perforation  
 Sold  Other (Specify) .....  
 Used on Lease  Dually Completed  Commingled

