

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- 189-219490000

County Stevens  
-SE- -NW- -NW\_ Sec. 5 Twp. 33S Rge. 37 X W E

Operator: License # 5208

1250 Feet from S/N (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 Schmidt #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 3152

Phone (316) 626-1142

Total Depth 3000 PBTD 2973

Contractor: Name: Murfin Drilling Co., Inc.

Amount of Surface Pipe Set and Cemented at 670 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

If Alternate II completion, cement circulated from NA

X New Well Re-Entry Workover

feet depth to NA w/ NA sx cmt.

Oil SWD SIOW Temp. Abd.

X Gas ENHR SIGN

Dry Other (Core, WSW, Expl., Cathodic, etc)

Drilling Fluid Management Plan all I 4-3-96  
(Data must be collected from the Reserve Pit) LV

If Workover:

Chloride content 19,000 ppm Fluid volume 607 bbls

Operator: \_\_\_\_\_

Dewatering method used Waste Minimization

Well Name: \_\_\_\_\_

Location of fluid disposal if hauled offsite: \_\_\_\_\_

Comp. Date \_\_\_\_\_ Old Total Depth \_\_\_\_\_

Operator Name Mobil Oil Corporation

Deepening Re-perf. Conv. to Inj/SWD

Plug Back \_\_\_\_\_ PBTD

Commingled Docket No. \_\_\_\_\_

Dual Completion Docket No. \_\_\_\_\_

Other (SWD or Inj?) Docket No. \_\_\_\_\_

Lease Name Hill #3 SWDW License No. 5208

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

9-16-95 9-19-95 10-16-95  
Spud Date Date Reached TD Completion Date

County Stevens Docket No. CD-117710

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 12-28-95

Subscribed and sworn to before me this 28th day of December, 19 95.

Notary Public Kathleen R. Poulton

Date Commission Expires August 18, 1998  
5-260.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)



Operator Name Mobil Oil Corporation Lease Name Schmidt #1 Unit Well # 3  
 Sec. 5 Twp. 33S 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 type="checkbox"/> Log	Formation (Top), Depth and Datums	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
List All E.Logs Run:				
NO LOGS RUN				

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#	670	Class C Class C	215 150	50:50 C/poz 50:50 C/poz
Production Casing	7.875	5.500	14#	2993	Class C Class C	300 150	3% D79 2% 828

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	2566-72	2744-64	Acid: 1,000 gals 7.5% HCL	
	2594-2604	2796-2816	Fract: 792 bbls 20# Crosslink gel		
	2636-56		146,700 lbs 12/20 Brady Sand		
	2688-2703				

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. 10-12-95	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 305 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  Other (Specify)

Production Interval: 2566 to 2816

CEMENTING SERVICE REPORT

Schlumberger

Dowell

DOWELL SCHLUMBERGER INCORPORATED

TREATMENT NUMBER 03-12-7543 DATE 4-16-95  
 PAGE DS DISTRICT Ulysses KS 03:12

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

WELL NAME AND NO. Schmidt #1-3	LOCATION (LEGAL) SEC 5-33S-37W	RIG NAME: MURFIN #24
FIELD-POOL Hugoton	FORMATION SURFACE	WELL DATA: BIT SIZE 12 1/4, CSG/Liner Size 8 3/8, TOTAL DEPTH 675, WEIGHT 24
COUNTY/PARISH STEVENS Co.	STATE Kansas	API. NO.
NAME MOBIL OIL CORP.		BOTTOM TOP
ADDRESS		<input checked="" type="checkbox"/> ROT <input type="checkbox"/> CABLE <input type="checkbox"/> BHST <input type="checkbox"/> BHCT MUD TYPE GRADE 15550 MUD DENSITY LESS FOOTAGE SHOE JOINT(S) 42 MUD VISC. Disp. Capacity 40

ORIGINAL

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

Float	TYPE	Baffle Plate	DEPTH	628
Shoe	TYPE	CMT NOSE	DEPTH	670

SPECIAL INSTRUCTIONS  
 Safely Cement 8 3/8 SURFACE CASING WITH 215SKS OF LEAD and 150SKS OF TAIL CEMENT AS DIRECTED BY THE CUSTOMER.

IS CASING/TUBING SECURED?  YES  NO

LIFT PRESSURE 237 PSI CASING WEIGHT ÷ SURFACE AREA (3.14 x R<sup>2</sup>)

PRESSURE LIMIT 500 OVER PSI BUMP PLUG TO 950 PSI

ROTATE RPM RECIPROCATE FT No. of Centralizers

JOB SCHEDULED FOR TIME: 2030 DATE: 9-16-95 ARRIVE ON LOCATION TIME: 2015 DATE: 9-16-95 LEFT LOCATION TIME: 0500 DATE: 9-17-95

TIME	PRESSURE		VOLUME PUMPED BBL		INJECT RATE	FLUID TYPE	FLUID DENSITY	SERVICE LOG DETAIL
	TBG OR D.P.	CASING	INCREMENT	CUM				
0300								PRE-JOB SAFETY MEETING
0336	3000					H <sub>2</sub> O 8.33		PRESSURE TEST LINES
0339		ø	25		5.9	H <sub>2</sub> O 8.33		START H <sub>2</sub> O SPACER
0344		280	72	25	5.9	CMT 12.8		START LEAD SLURRY
0356		270	32	97	5.8	CMT 14.6		START TAIL SLURRY
0402				129				SHUTDOWN / DROP TOP PLUG
0404		ø	40		6.0	H <sub>2</sub> O 8.33		START Displacement
0406		320		20	6.5	H <sub>2</sub> O 8.33		PSI check
0413		270		38	1.7	H <sub>2</sub> O 8.33		PSI check
0415		750		40				STOP PUMPING / Plug Down
0416		250						Bleed Lines / Shut manifold

REMARKS

SYSTEM CODE	NO. OF SACKS	YIELD CU. FT/SK	COMPOSITION OF CEMENTING SYSTEMS		SLURRY MIXED	
					BBLs	DENSITY
1.	215	1.89	50% 50 P07	+ 6% D20 + 3% S1 + 5% D44 (BLOW) + 1/4 #1SK D29	72.3	12.8
2.	150	1.22	50% 50 P07	+ 7.5% S1 + 1/4 #1SK D29	32.5	14.6
3.						
4.						
5.						
6.						

BREAKDOWN FLUID TYPE:  HESITATION SQ.  RUNNING SQ. CIRCULATION LOST  YES  NO

BREAKDOWN PSI FINAL PSI DISPLACEMENT VOL. Bbls

Washed Thru Perfs  YES  NO TO FT. MEASURED DISPLACEMENT  WIRELINE

PERFORATIONS TO TO CUSTOMER REPRESENTATIVE: DENNIS RUSSELL DS SUPERVISOR: Jon Sosa

**CEMENTING SERVICE REPORT**

Schlumberger

Dowell

**DOWELL SCHLUMBERGER INCORPORATED**

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

TREATMENT NUMBER 03-12-7550	DATE 9-19-95
STAGE DS	DISTRICT Ulysses, KS
03-12	

WELL NAME AND NO. <b>SCHMIDT 1-3</b>	LOCATION (LEGAL) <b>SEC 3-33S-37W</b>	RIG NAME: <b>MURFIN 24</b>
FIELD-POOL <b>HUGOTON</b>	FORMATION <b>CHASE</b>	WELL DATA:
COUNTY/PARISH <b>STEVENS</b>	STATE <b>KS</b>	API NO.
NAME <b>MOBIL OIL CORP.</b>	WELL DATA: BIT SIZE CSG/Liner Size	
AND	TOTAL DEPTH 3000 WEIGHT 14	
ADDRESS	MUD TYPE GRADE	
ZIP CODE	MUD DENSITY LESS FOOTAGE SHOE JOINT(S)	
SPECIAL INSTRUCTIONS	MUD VISC. Disp. Capacity	

**ORIGINAL**

IS CASING/TUBING SECURED? <input type="checkbox"/> YES <input type="checkbox"/> NO	IS CASING/TUBING SECURED? <input type="checkbox"/> YES <input type="checkbox"/> NO	IS CASING/TUBING SECURED? <input type="checkbox"/> YES <input type="checkbox"/> NO	IS CASING/TUBING SECURED? <input type="checkbox"/> YES <input type="checkbox"/> NO
LIFT PRESSURE PSI	CASING WEIGHT ÷ SURFACE AREA (3.14 x R <sup>2</sup> )	TOP <input type="checkbox"/> R <input type="checkbox"/> W	NEW <input type="checkbox"/> USED
PRESSURE LIMIT 500 ORF PSI	BUMP PLUG TO 1127 PSI	BOT <input type="checkbox"/> R <input type="checkbox"/> W	DEPTH
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	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		CASING VOL. BELOW TOOL		Bbls
BOT <input type="checkbox"/> R <input type="checkbox"/> W		TOTAL		Bbls
		ANNUAL VOLUME		Bbls

IS CASING/TUBING SECURED? <input type="checkbox"/> YES <input type="checkbox"/> NO	IS CASING/TUBING SECURED? <input type="checkbox"/> YES <input type="checkbox"/> NO	IS CASING/TUBING SECURED? <input type="checkbox"/> YES <input type="checkbox"/> NO	IS CASING/TUBING SECURED? <input type="checkbox"/> YES <input type="checkbox"/> NO
LIFT PRESSURE PSI	CASING WEIGHT ÷ SURFACE AREA (3.14 x R <sup>2</sup> )	TOP <input type="checkbox"/> R <input type="checkbox"/> W	NEW <input type="checkbox"/> USED
PRESSURE LIMIT 500 ORF PSI	BUMP PLUG TO 1127 PSI	BOT <input type="checkbox"/> R <input type="checkbox"/> W	DEPTH
ROTATE RPM	RECIPROCATATE FT	No. of Centralizers	

TIME	PRESSURE	VOLUME PUMPED BBL	JOB SCHEDULED FOR	ARRIVE ON LOCATION	LEFT LOCATION
0001 to 2400	TBG OR D.P. CASING	INCREMENT CUM	TIME: 1300 DATE: 9-19-95	TIME: 1300 DATE: 9-19-95	TIME: 1300 DATE: 9-19-95
			INJECT RATE	FLUID TYPE	FLUID DENSITY

TIME	TBG OR D.P.	CASING	INCREMENT	CUM	INJECT RATE	FLUID TYPE	FLUID DENSITY	SERVICE LOG DETAIL
1510								PRE-JOB SAFETY MEETING
1523	2700					H <sub>2</sub> O	8.33	PRESSURE TEST LINES
1554	280	25			5.9	H <sub>2</sub> O	8.33	START H <sub>2</sub> O SPACER
1553	280	136	25		5.9	CMT	11.5	START LEAD CEMENT
1621	100	40	161		3.6	CMT	14.8	START TAIL SLURRY
1632	Ø			201				SHUTDOWN / WASH LINES / DROP TOP PLUG
1636	Ø				6.0	H <sub>2</sub> O	8.33	START DISPLACEMENT
1637	20	72.5	5		3.7	H <sub>2</sub> O	8.33	LOWER RATE
1652	620		62		3.4	H <sub>2</sub> O	8.33	PSI CHECK
1659	650		70		4.13	H <sub>2</sub> O	8.33	PSI CHECK
1659	1120		12.5					STOP PUMP / PLUG DOWN
1700	Ø							Bled Lines / Check FLOAT / Holding
NOTE: LAST RETURNS LAST 9561 of Dispo. MAINTAINED 600 PSI LIFT PRESSURE TO 650 PSI								

REMARKS

SYSTEM CODE	NO. OF SACKS	YIELD CU. FT/SK	COMPOSITION OF CEMENTING SYSTEMS				SLURRY MIXED	
			BLLS	DENSITY	BLLS	DENSITY		
1.	300	2.75	C + 3% D79 + 0.2% D46 + 1/4#/SK D29	147	11.5			
2.	150	1.37	C + 2% B23 + 0.2% D46 + 0.6% D60 + 2% SI	36.5	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 7621	<input type="checkbox"/> YES <input type="checkbox"/> NO	Cement Circulated To Surf. <input type="checkbox"/> YES <input type="checkbox"/> NO	Bbls
BREAKDOWN	PSI	FINAL	PSI	DISPLACEMENT VOL.	Bbls
Washed Thru Perfs <input type="checkbox"/> YES <input type="checkbox"/> NO	TO	FT.	MEASURED DISPLACEMENT <input type="checkbox"/>	<input type="checkbox"/> WIRELINE	
PERFORATIONS	TO	TO	CUSTOMER REPRESENTATIVE	DS	SUPERVISOR
			Dennis Russell		Russ WAGSTAFF