

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 # 5952
Name Amoco Production Company
Address P.O. Box 800

City/State/Zip Denver, CO 80201

Purchaser _____

Operator Contact Person J.A. Victor
Phone (303) 830-4009

Contractor: License # 3098
Name Exeter Drilling

Wellsite Geologist _____
Phone _____

Designate Type of Completion
 New Well Re-Entry Workover

 Oil SWD Temp Abd
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply etc.)

If OWWO: old well info as follows:
Operator N/A
Well Name _____
Comp. Date _____ Old Total Depth _____

WELL HISTORY

Drilling Method:
 Mud Rotary Air Rotary Cable

<u>10-05-89</u>	<u>10-08-89</u>	<u>11-03-89</u>
Spud Date	Date Reached TD	Completion Date
<u>2644'</u>	PBTD	<u>AIT</u>
Total Depth		

Amount of Surface Pipe Set and Cemented at 638 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
Cement Company Name _____
Invoice # _____

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date of any well. Rule 82-3-130, 82-3-107 and 82-3-106 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.L. Hampton
J.L. Hampton
Title Sr. Staff Admin. Supv. Date 1-11-90

Subscribed and sworn to before me this 11 day of January, 1990.
Notary Public Julie A. Victor

Date Commission Expires 4/7/90

API NO. 15-067-20937-0000
County Grant
East _____
App.C- SW SW Sec 21 Twp 29 Rge 38 West
1250 Ft North from Southeast Corner of Section
4030 Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)

Lease Name Wilks G.U. Well # 3HI

Field Name Hugoton

Producing Formation Chase

Elevation: Ground 3128' KB 3140'

Section Plat										
										5280
										4950
										4620
										4290
										3960
										3630
										3300
										2970
										2640
										2310
										1980
										1650
										1320
										990
										660
										330

RECEIVED
STATE CORPORATION COMMISSION
Wichita, Kansas
JAN 16 1990
1-16-1990
CONSERVATION DIVISION

WATER SUPPLY INFORMATION

Disposition of Produced Water: _____ Disposal
_____ Repressuring
Docket # _____

Questions on this portion of the ACO-1 call:
Water Resources Board (913) 296-3717
Source of Water:
Division of Water Resources Permit # _____
_____ 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 of
Sec _____ Twp _____ Rge _____ East _____ West _____
 Other (explain) settled with surface owner
(purchased from city, R.W.D. #)

K.C.C. OFFICE USE ONLY		
<input type="checkbox"/> F	Letter of Confidentiality Attached	
<input type="checkbox"/> C	Wireline Log Received	
<input type="checkbox"/> C	Drillers Timelog Received	
Distribution		
<input checked="" type="checkbox"/>	KCC	SWD/Rep
	KGS	Plug
		NGPA
		Other
(Specify)		



SIDE TWO

Operator Name Amoco Production Company Lease Name Wilks G.U. Well # 3H1

Sec. 21 Twp. 29 Rge. 38 East X West County Grant

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

Formation Description
 X Log Sample

Name	Top	Bottom
Chase	2338	2598

CASING RECORD X New 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	12 1/4"	8 5/8"	24#	638'	Lite C	155	2% CACL
Production	7 7/8"	5 1/2"	15.5#	2644'	Premium C	150	2% cacl
					Neat C	100	

PERFORATION RECORD

ACID, FRACTURE, SHOT, CEMENT SQUEEZE RECORD

Shots Per Foot	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)	Depth
		Water Frac - 139,116 gals	2332-2644'
		Crosslink Gel, 8/16 sand	

TUBING RECORD Size None Set At Packer at Liner Run Yes X No

Date of First Production Producing Method X Flowing Pumping Gas Lift Other (explain)

SI-waiting on pipeline	Oil	Gas	Water	Gas-Oil Ratio	Gravity
Estimated Production Per 24 Hours	Bbls	1549 MCF	Bbls	CFPB	

METHOD OF COMPLETION

Production Interval

Disposition of gas: Vented Open Hole Perforation
 X Sold X Other (specify) slotted casing 2332-2598
 Used on Lease Dually Completed
 Commingled