

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- 097-21,218-0001

County Kiowa
- NW - SW - SE Sec. 27 Twp. 29S Rge. 18 X E
W

Operator: License # 5171
Name: Marathon Oil Company
Address P.O. Box 689
7301 N.W. Expw'y, Suite #1075
City/State/Zip Oklahoma City, OK 73101

990 Feet from (S)N (circle one) Line of Section
1650 Feet from (E)W (circle one) Line of Section

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

Purchaser: _____
Operator Contact Person: Barry A. Hardy
Phone (405) 720-5555
Contractor: Name: _____
License: _____
Wellsite Geologist: _____

Lease Name SCHMIDT "H" Well # 1
Field Name Nichols

Producing Formation Mississippi/Marmaton commingled

Designate Type of Completion
 New Well Re-Entry Workover

Elevation: Ground 2208' KB 2217'
Total Depth 5025' PBDT 5010'

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

Amount of Surface Pipe Set and Cemented at 8 5/8 @259 Feet
Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cat.

If Workover/Re-Entry: old well info as follows:

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

Operator: TXO Production Corporation

Chloride content _____ ppm Fluid volume _____ bbls

Well Name: Schmidt "H" #1

Dewatering method used _____

Comp. Date 7-14-86 Old Total Depth 5025'

Location of fluid disposal if hauled offsite: _____

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

Operator Name _____

Lease Name _____ License No. _____

12-6-91 12-11-91
Spud Date Date Reached TD Completion Date

Quarter Sec. _____ Twp. _____ S Rng. _____ E/W

County _____ Docket No. _____

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 Barry Hardy
Title Production Engineer Date 4-27-92

Subscribed and sworn to before me this 27th day of April, 1992.

Notary Public Barbara Standridge
Date Commission Expires 11-1-95

K.C.C. OFFICE USE ONLY
F _____ Letter of Confidentiality Attached
C _____ Wireline Log Received
C _____ Geologist Report Received
Distribution
 KCC
 KGS
APR 29 1992
CORPORATION COMMISSION
WICHITA, KANSAS
P1

Operator Name Marathon Oil Company Lease Name Schmidt 'H' Well # 1
 Sec. 27 Twp. 29S Rge. 18 East West
 County Kiowa

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 type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input type="checkbox"/> No	Stotler	3488 -1271	
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Emporia	3564 -1347	
List All E.Logs Run:		Heebner	4139 -1922	
		LKC	4336 -2119	
		Drum	4508 -2291	
		BKC	47 -2527	
		Marmaton "X"	4806 -2589	
		Cherokee Sh	4882 -2665	
		Miss.	4950 -2733	
		RTD	5025	
		LTD	5028	

CASING RECORD <input 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	12 1/4"	8 5/8"	24#	259	Lite Class A	100 75	3% CaCl ₂ 3% CaCl ₂ 2% cel
PRODUCTION	7 7/8"	4 1/2"	10.5#	5024	Surefill	150	8#sk/Gilsonite

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
4	Mississippian 4953-4965	750 gals 10% HCl	
		750 gals 15% HCl	

TUBING RECORD	Size <u>2 3/8"</u>	Set At <u>4987'</u>	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj.	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
<u>2-1-92</u>				
Estimated Production Per 24 Hours	Oil Bbls. <u>2.4</u>	Gas Mcf <u>40</u>	Water Bbls. <u>49.5</u>	Gas-Oil Ratio <u>16,667</u>
				Gravity

Disposition of Gas:	<input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, submit ACO-18.)	METHOD OF COMPLETION	Production Interval
		<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input checked="" type="checkbox"/> Commingled	<u>4807-4814</u>
		<input type="checkbox"/> Other (Specify) _____	<u>4953-4965</u>