

SIDE ONE

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
RECOMPLETION FORM
ACO-2 AMENDMENT TO WELL HISTORY

ORIGINAL

API NO. 15- 151-21,966-60-41

County Pratt

SE SW SE Sec. 20 Twp. 29S Rge. 12W XX East West

330 Ft. North from Southeast Corner of Section

1650 Ft. West from Southeast Corner of Section

(NOTE: Locate well in section plat below.)

Lease Name WRAY Well # 1-20

Field Name Wildcat

Producing Formation Mississippi

Elevation: Ground 1901 KB 1913

Operator: License # 5056

Name: F. G. Holl Company

Address: 6427 E. Kellogg

P.O. Box 780167

City/State/Zip: Wichita, KS 67278-0167

Purchaser: Clear Creek, Inc.

Operator Contact Person:

Phone: (316) 684-8481

Designate Type of Original Completion

 New Well Re-Entry X Workover

Date of Original Completion 1/31/90

Name of Original Operator F. G. Holl Company

Original Well Name WRAY #1-20

Date of Recompletion:

10/26/90 11/2/90

Commenced Completed

Re-entry Workover

Designate Type of Recompletion/Workover:

X Oil SWD Temp. Abd.

 Gas Inj Delayed Comp.

 Dry Other (Core, Water Supply, etc.)

 Deepening Re-perforation

X Plug Back 4470' PBTD

 Conversion to Injection/Disposal

Is recompleted production:

 Commingled Docket No.

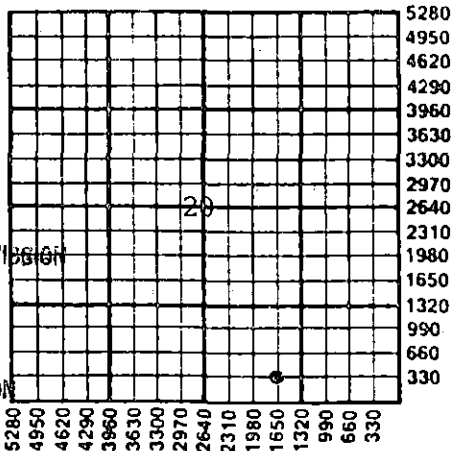
 Dual Completion Docket No.

 Other (Disposal or Injection?) Docket No.

RECEIVED
STATE CORPORATION COMMISSION

JAN 23 1991

CONSERVATION DIVISION
Wichita, Kansas



K.C.C. OFFICE USE ONLY

F Letter of Confidentiality Attached

C Wireline Log Received

C Drillers Timelog Received

Distribution

KCC SWD/Rep NGPA

KGS Plug Other (Specify)

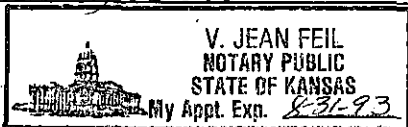
INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the recompletion of any well. Rules 82-3-107 and 82-3-141 apply. Information on side two of this form will be held confidential 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 any additional wireline logs and driller's time logs (not previously submitted) shall be attached with this form. Submit ACO-4 or ACO-5 prior to or with this form for approval of commingling or dual completions. Submit CP-1 with all plugged wells. Submit CP-111 with all temporarily abandoned wells. NOTE: Conversion of wells to either disposal or injection must receive approval before use; submit form U-1.

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 Elwyn H. Nagel Title Elwyn H. Nagel/Manager Date 1/22/91

Subscribed and sworn to before me this 23rd day of January 19 91

Notary Public V. Jean Feil Date Commission Expires 8-31-93



SIDE TWO

Operator Name F. G. Holl/ Company Lease Name WRAY Well # 1-20
 Sec. 20 Twp. 29S Rge. 12W East West
 County Pratt

RECOMPLETION FORMATION DESCRIPTION

Log Sample

Name Top Bottom

Same as on Original ACO-1 submitted 4/27/90

ADDITIONAL CEMENTING/SQUEEZE RECORD					
Purpose:	Depth		Type of Cement	# Sacks Used	Type and Percent Additives
	Top	Bottom			
<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 Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)
4 SPF	4364-4375, 4342-4356 (MISSISSIPPI)	AC:1134gls 15%DSFE
		FR:28,410gls My-T-Gell L.T. X-Link 150sks 100MESH, 130 sks 20/40, 90 sks 12/20.
		SWB: Ave 30 BPH, 15% Oil

PBTD 4470' Plug Type Cast Iron Plug

TUBING RECORD

Size 2 3/8" Set At 4425' Packer At None Was Liner Run Y N

Date of Resumed Production, Disposal or Injection _____

Estimated Production Per 24 Hours Oil 13 Bbls. Water 70 Bbls. _____ Gas-Oil-Ratio
 Gas _____ Mcf

Disposition of Gas:

Vented Sold Used on Lease (If vented, submit ACO-18.)