

SIDE ONE

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

Operator: License # 5952
Name: Amoco Production Company
Address P.O. Box 800, Rm. 2444
City/State/Zip Denver, CO 80201

Purchaser: _____
Operator Contact Person: Julie Victor
Phone (303) 830-4009

Contractor: Name: Cheyenne Drilling
License: 5382

Wellsite Geologist: _____

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

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

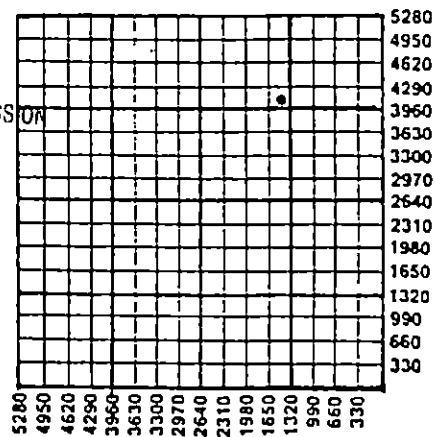
Drilling Method:
 Mud Rotary Air Rotary Cable
3/31/91 4/1/91
Spud Date Date Reached TD Completion Date

API NO. 15- 187-20564-0000
County Stanton

SE NW NE Sec. 32 Twp. 27 Rge. 39 East West
4030 Ft. North from Southeast Corner of Section
1425 Ft. West from Southeast Corner of Section
(NOTE: Locate well in section plat below.)

Lease Name Mayhew G.U. A Well # 3HI
Field Name Hugoton
Producing Formation Chase
Elevation: Ground 3180' KB 3192'
Total Depth 2536' PBD _____

RECEIVED
STATE CORPORATION COMMISSION
7-29-91
JUL 29 1991
CONSERVATION DIVISION
Wichita, Kansas



Amount of Surface Pipe Set and Cemented at 650 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 cmt.

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. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells. Any recompletion, workover or conversion of a well requires filing of ACO-2 within 120 days from commencement date of such work.

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 Julie A. Victor
Title Permitting Representative Date 7/26/91
Subscribed and sworn to before me this 26 day of July, 19 91.
Notary Public Suzanne Callahan
Date Commission Expires My Commission Expires August 02, 1994

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)

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SIDE TWO

Operator Name Amoco Production Company Lease Name Mayhew G. II A Well # 3HT
 Sec. 32 Twp. 27 Rge. 39 East West County Stanton

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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets.) Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Submit Copy.)	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3">Formation Description</th> </tr> <tr> <td></td> <td><input type="checkbox"/> Log</td> <td><input checked="" type="checkbox"/> Sample</td> </tr> <tr> <th>Name</th> <th>Top</th> <th>Bottom</th> </tr> <tr> <td>Chase</td> <td>2265'</td> <td>2540'</td> </tr> </table>	Formation Description				<input type="checkbox"/> Log	<input checked="" type="checkbox"/> Sample	Name	Top	Bottom	Chase	2265'	2540'
Formation Description													
	<input type="checkbox"/> Log	<input checked="" type="checkbox"/> Sample											
Name	Top	Bottom											
Chase	2265'	2540'											

CASING RECORD 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#	650'	Prem Plus	220	
					Prem Plus	150	
Production	7-7/8"	5-1/2"	15.5#	2536'	Prem Plus	450	
					Prem Plus	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

TUBING RECORD Size Set At Packer At Liner Run Yes No
 N/A

Date of First Production SI	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 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 Perforation Dually Completed Commingled
 Other (Specify) Slotted Casing Production Interval 2268'2536'

ORIGINAL

APT. NO. 15- 187-20564-0000

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

Operator: License # 5952
Name: Amoco Production Company
Address: P.O. Box 800, Rm. 2444
City/State/Zip Denver, CO 80201

Purchaser: _____
Operator Contact Person: Julie Victor
Phone (303) 830-4009
Contractor: Name: Cheyenne Drilling
License: 5382
Wellsite Geologist: _____

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIDW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-Entry: old well info as follows:
Operator: N/A
Well Name: _____
Comp. Date _____ Old Total Depth _____
Deepening Re-perf. Conv. to Inj/SWD
Plug Back P8TD
Commingled Docket No. _____
Dual Completion Docket No. _____
Other (SWD or Inj?) Docket No. _____
3/31/91 4/1/91 1/23/92
Spud Date Date Reached TD Completion Date

County Stanton
SE SE NW NE Sec. 32 Twp. 27 Rge. 39 E
 W
4030 Feet from SN (circle one) Line of Section
1425 Feet from EW (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
NE, (SE), NW or SW (circle one)
Lease Name Mayhew G.U. A Well # 3HI
Field Name Hugoton
Producing Formation Chase
Elevation: Ground 3180' KB 3192'
Total Depth 2536 P8TD _____
Amount of Surface Pipe Set and Cemented at 650 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 cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit) DIR
Chloride content 5800 ppm Fluid volume 2140 bbls
Dewatering method used dried and filled
Location of fluid disposal if hauled offsite: _____
Operator Name _____ STATE CORPORATION COMMISSION
Lease Name _____ License No. _____
JAN 5 1 1992
Quarter Sec. Twp. S Rng. E/W
County _____ CONSERVATION DIVISION
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 Julie Victor
Title Permitting Representative Date 1/27/92
Subscribed and sworn to before me this 27 day of January, 1992
Notary Public: Patricia M. Hood
Date Commission Expires December 26, 1994

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
Distribution
 KCC SWD/Rep NSPA
 KGS Plug Other
(Specify)

Operator Name Amoco Production Company

Lease Name Mayhew G.U. A

Well # 3HI

Sec. 32 Twp. 27 Rge. 39

East
 West

County Stanton

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
(Attach Additional Sheets.)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
(Submit Copy.)

Log Formation (Top), Depth and Datum Sample

Name	Top	Datum
Chase	2265'	KB

List All E.Logs Run:

CASING RECORD

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#	650'	Prem Plus	370	
Production	7-7/8"	5-1/2"	15.5#	2,536'	Prem Plus	550	

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
		Frac with 58,477 gals.	2268-2536
		gelling agent and 246,800#	
		12/20 sand	

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
N/A				
Date of First, Resumed Production, SWD or Inj.	Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
SI				
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio
		1500		

Disposition of Gas:

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

METHOD OF COMPLETION

Open Hole Perf. Dually Comp. Commingled
 Other (Specify) Slotted Casing

Production Interval

2268-2536

~~32-37-39W~~
32 27 39
W

DRILLERS LOG

K C C

APR 02 1991

AMOCO PRODUCTION COMPANY
MAYHEW GJ "A" NO. 3 HI
SECTION ~~32-37-39W~~ 32-27-39W
STANTON COUNTY, KANSAS

COMMENCED: 03-30-91
COMPLETED: 04-01-91

SURFACE CASING: 641' OF 8 5/8"
CMTD W/220 SX PREM PLUS LT WT, 2% C.C.,
1/4#/SX FLO-CELE; TAILED IN W/
150 SX PREM PLUS, 2% C.C., 1/4#/SX FLO-CELE

FORMATION	DEPTH
SURFACE HOLE	0 - 650
SAND	650 - 726
SAND & RED BED	726 - 1340
GLORIETTA SAND	1340 - 1540
SHALE	1540 - 1750
SHALE & LIME	1750 - 2216
SHALE	2216 - 2536 RTD

I DO HEREBY CERTIFY THAT THE FOREGOING STATEMENTS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

CHEYENNE DRILLING, INC.

A. J. JACQUES

STATE OF KANSAS :ss:

SUBSCRIBED AND SWORN TO BEFORE ME THIS 1ST DAY OF APRIL, 1991.

BECKY J. WHETSTONE
 NOTARY PUBLIC
 STATE OF KANSAS
 MY APPT. EXPIRES 4/29/91

Becky J. Whetstone

BECKY J. WHETSTONE, NOTARY PUBLIC

RECEIVED
STATE COMMISSION

APR 04 1991

COMM. OF NOTARY PUBLIC