

ORIG.

SIDE ONE

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

Operator: License # 03688
Name _____
Address _____
4-D Petroleum Consultant
City/State/Zip Richard G. Armer
515 Watson Street
Pratt, KS 67124
Purchaser CLEAR CREEK
Operator Contact Person R. ARMER
Phone 316-672-3157

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

Date of Original Completion: 5-88 ? ORIG.
ACO-1 N/A

DATE OF RECOMPLETION:
11-1-89 11-5-89
Commenced Completed

Designate Type of Recompletion/Workover:
 Deepening Delayed Completion
 Plug Back Re-perforation
 Conversion to Injection/Disposal

Is recompleted production:
 Commingled; Docket No. _____
 Dual Completion; Docket No. _____
 Other (Disposal or Injection)?

API NO. 15- 151-21 881-00-01
County Pratt
Approx. W/2 NW SE Sec 27 Twp 29S Rge 13 East
 West

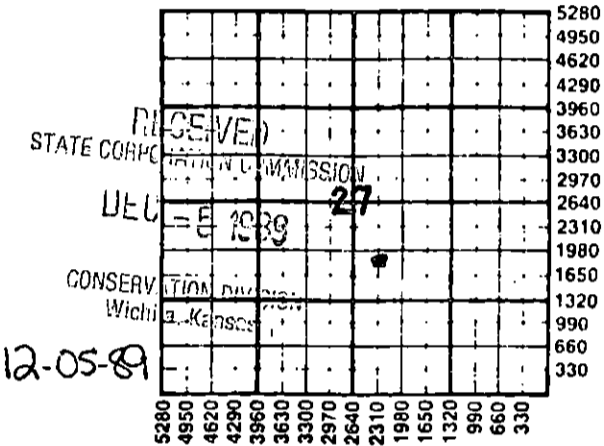
1970 Ft North from Southeast Corner of Section
2310 Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)

Lease Name MASON Well # 1

Field Name UNKNOWN SAWYER

Name of New Formation MARMATON

Elevation: Ground 1855' KB 1860'
Section Plat



K.C.C. OFFICE USE ONLY
 Letter of Confidentiality Attached
 Wireline Log Received
 Drillers Time Log 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 prior to or with this form for approval of commingling or dual completions. Submit CP-4 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 Richard Armer Title Proj. Eng. Date 12-4-89

Subscribed and sworn to before me this 4 day of Dec. 19 89

Notary Public _____ Date Commission Expires _____

Michael K. Johnston
State Notary Public
Pratt County, Kansas
Appointment Expires: 6/27/91 FORM ACO-2 5/88

Handwritten initials 'N P'

SIDE TWO

Operator Name A-D Petr. Lease Name MASON Well # 1
 Sec 27 Twp 29S Rge 13 East West County Prairie

RECOMPLETED FORMATION DESCRIPTION:

Log Sample

Name	Top	Bottom
MARMATON	4280' Approx.	4290' Approx.
Upper Viola	4450'	4500'

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth		Type of Cement	# Sacks Used	Type & Percent Additives
	Top	Bottom			
Perforate					
Protect Casing					
Plug Back TD					
Plug Off Zone					

Shots Per Foot	PERFORATION RECORD		Acid, Fracture, Shof, Cement Squeeze Record (Amount and Kind of Material Used)
	Specify Footage of Each Interval Perforated		
<u>2</u>	<u>42-82'</u>	<u>4286'</u>	<u>Acid. 500gal. MCA</u>
<u>2</u>	<u>4452'</u>	<u>4456'</u>	<u>Acid. 500gal. MCA</u>

PBTD 4540' Plug Type CIBP SET ON WIRE LINE BY Great Guns
8-16-88 according to records

TUBING RECORD:

Size 2 3/8" Set At 4513' Packer At O/E NONE Was Liner Run? Y N

Date of Resumed Production, Disposal or Injection 12-7-89 AFTER GAS TEST

Estimated Production Per 24 Hours 24 bbl/oil 24 bbl/water
300 MCF gas 12.5 gas-oil ratio