

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

API NO. 15- 15-055-20993-0000 ORIGINAL

County FINNEY

NE SW SW Sec. 11 Twp. 25S Rge. 32W ~~WW~~

Operator: License # 3871

990 FSL Feet from S/N (circle one) Line of Section

Name: Hugoton Energy Corporation

4290 FEL Feet from E/W (circle one) Line of Section

Address 229 E. William, # 500

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

City/State/Zip Wichita, KS 67202

Lease Name HICKS Well # 2-11

Purchaser: SPOT

Field Name _____

Operator Contact Person: Jim Gowens

Producing Formation CHASE

Phone (____) (316) 262-1522

Elevation: Ground 2855 KB 2864

Contractor: Name: MURFIN DRILLING

Total Depth 5130 PBDT 3020

License: 6033

Amount of Surface Pipe Set and Cemented at 1939 Feet

Wellsite Geologist: KARL OSTERBUHR

Multiple Stage Cementing Collar Used? Yes XX No

Designate Type of Completion
XXX New Well _____ Re-Entry _____ Workover

If yes, show depth set _____ Feet

____ Oil _____ SWD _____ SIOW _____ Temp. Abd.
____ Gas _____ ENHR SIGWIGW
____ Dry _____ Other (Core, WSW, Expl., Cathodic, etc)

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

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

Drilling Fluid Management Plan ALT 1 JH 2-17-94
(Data must be collected from the Reserve Pit)

Operator: _____

Chloride content _____ ppm Fluid volume _____ bbls

Well Name: _____

Dewatering method used _____

Comp. Date _____ Old Total Depth _____

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. _____
04/19/91 05/02/91 09/23/91

Operator Name _____

Lease Name _____ License No. _____

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 _____
Title Exploration Manager Date 02/20/92

Subscribed and sworn to before me this 20th day of February, 19 92.

Notary Public Garry D. Walker

Date Commission Expires September 18th, 1995

Garry D. Walker
NOTARY PUBLIC
State of Kansas
MY APPT. EXPIRES

K.C.C. OFFICE USE ONLY
F _____ Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
STATE RECEIVED
Distribution _____
KCC _____ SWD/Rep _____ NGPA
KGS _____ Plug _____ Other _____
JUN 12 1992
CONSERVATION DIVISION
Wichita, Kansas
Form 800-1

SIDE TWO

Operator Name Hugoton Energy Corporation Lease Name HICKS Well # 2-11
 Sec. 11 Twp. 25 Rge. 32W East West
 County FINNEY

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy.) List All E.Logs Run: DIL,ML,C/R,CND,PE(ROSEL)	<input checked="" type="checkbox"/> Log <input type="checkbox"/> Sample Formation (Top), Depth and Datum <table border="0" style="width:100%"> <tr> <td style="width:60%">Name</td> <td style="width:20%">Top</td> <td style="width:20%">Datum</td> </tr> <tr> <td>KRIDER</td> <td>2551</td> <td></td> </tr> <tr> <td>WINFIELD</td> <td>2612</td> <td></td> </tr> <tr> <td>COUNCIL GROVE</td> <td>2836</td> <td></td> </tr> <tr> <td>HEEBNER</td> <td>3898</td> <td></td> </tr> <tr> <td>LANSING</td> <td>3978</td> <td></td> </tr> <tr> <td>MARMATON</td> <td>4466</td> <td></td> </tr> <tr> <td>CHEROKEE SHALE</td> <td>4589</td> <td></td> </tr> <tr> <td>ST LOUIS</td> <td>4804</td> <td></td> </tr> </table>	Name	Top	Datum	KRIDER	2551		WINFIELD	2612		COUNCIL GROVE	2836		HEEBNER	3898		LANSING	3978		MARMATON	4466		CHEROKEE SHALE	4589		ST LOUIS	4804	
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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	1939	LITE	1050	3% CC
Production	7 7/8	4 1/2	10.5	3069	CLASS 'A'	380	

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
2	2554-68		
2	2586-91	ACIDIZE W/ 2,000 GAL 15% HCL; FRAC W/ 35,000 # 12-20 SAND + 5,000 # RESIN COATED SAND	28,898 GAL +

TUBING RECORD		Size <u>2 3/8</u>	Set At <u>2620</u>	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj. <u>/ /</u>		Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf <u>150</u>	Water Bbls. <u>41</u>	Gas-Oil Ratio	Gravity

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18:)
 METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled Other (Specify) _____
 Production Interval: 2554-2591 OA



P.O. Box 4442
Houston, Texas 77210

CEMENTING LOG

2-11
STAGE NO.

ORIGINAL

Date 5-9-91 District Oakley Ticket No. 609839
 Company Houston Energy Rig 17421
 Lease Hicks Well No. 2215
 County Finnay State KS
 Location _____ Field _____

CASING DATA: PTA Squeeze
 Surface Intermediate Production Liner
 Size 4 1/2 Type _____ Weight _____ Collar _____

Casing Depths: Top _____ Bottom _____

Drill Pipe: Size _____ Weight _____ Collars _____

Open Hole: Size _____ T.D. _____ ft. P.B. to _____ ft.

CAPACITY FACTORS:

Casing: Bbls/Lin. ft. .0159 Lin. ft./Bbl. _____

Open Holes: Bbls/Lin. ft. _____ Lin. ft./Bbl. _____

Drill Pipe: Bbls/Lin. ft. _____ Lin. ft./Bbl. _____

Annulus: Bbls/Lin. ft. _____ Lin. ft./Bbl. _____

Bbls/Lin. ft. _____ Lin. ft./Bbl. _____

Perforations: From _____ ft. to _____ ft. Amt. _____

CEMENT DATA:
 Spacer Type: Surefill
 Amt. 85 Sks Yield _____ ft³/sk Density _____ PPG _____

LEAD: Pump Time _____ hrs. Type Lite
 Excess _____

Amt. 110 Sks Yield 1.84 ft³/sk Density 10.9 PPG _____

TAIL: Pump Time _____ hrs. Type Surefill
 Excess _____

Amt. 270 Sks Yield 1.41 ft³/sk Density 14.9 PPG _____

WATER: Lead _____ gals/sk Tail 6.65 gals/sk Total _____ Bbls. _____

Pump Trucks Used _____

Bulk Equip. _____

Float Equip: Manufacturer Baker 4 1/2

Shoe: Type Cement Depth 3069

Float: Type Auto Fill Depth 3037

Centralizers: Quantity 6 Plugs Top _____ Btm. _____

Stage Collars _____

Special Equip. _____

Disp. Fluid Type _____ Amt. _____ Bbls. Weight _____ PPG _____

Mud Type _____ Weight _____ PPG _____

COMPANY REPRESENTATIVE _____

CEMENTER _____

TIME	PRESSURES PSI		FLUID PUMPED DATA			REMARKS
	DRILL PIPE CASING	ANNULUS	TOTAL FLUID	Pumped Per Time Period	RATE Bbls. Min.	
4:45	am					On Location & Set up Tools Safety Meeting
7:30	am					Spot plug @ 3323 w/ 85 sks Surefill
7:45	am					plug Down @
						Run 4 1/2 float equipment
3:00	pm					Mix Lead & Tail Cements Release pump & Lines
4:30	pm					Release plug & Displace to Front
5:30	pm					Plug Down Job finished

RECEIVED
STATE CORPORATION COMMISSION

JUN 12 1991

CONSERVATION DIVISION
Wichita, Kansas THANK YOU
BBLs.



PO Box 4442
Houston, Texas 77210

CEMENTING LOG

2-11

STAGE NO
ORIGINAL

Date 4-21-91 District Oakley Ticket No 609835
 Company Houston Energy Rig Maulin 20
 Lease Hicks Well No 2-15
 County Finnay State LS
 Location Garden City 185-25-145 Field _____

CEMENT DATA
 Spacer Type _____
 Amt _____ Sks Yield _____ ft³/sk Density _____ PPG _____

CASING DATA PTA Squeeze
 Surface Intermediate Production Liner
 Size 7 7/8 Type _____ Weight 24 Collar _____

LEAD Pump Time _____ hrs Type 68/35/6
3200 4500 Excess _____
 Amt 750 Sks Yield 1.84 ft³/sk Density 13.7 PPG _____

Casing Depths Top _____ Bottom _____

TAIL Pump Time _____ hrs Type A 2200 Excess _____
 Amt 150 Sks Yield 1.17 ft³/sk Density 15.2 PPG _____
 WATER Lead 7.9 gals/sk Tail 5.2 gals/sk Total 13.1 Bbls

Drill Pipe Size _____ Weight _____ Collars _____
 Open Hole Size _____ T D _____ ft P B to _____ ft

Pump Trucks Used 4463
 Bulk Equip 2752 - 272

CAPACITY FACTORS
 Casing Bbls/Lin ft .0637 Lin ft /Bbl _____
 Open Holes Bbls/Lin ft _____ Lin ft /Bbl _____
 Drill Pipe Bbls/Lin ft _____ Lin ft /Bbl _____
 Annulus Bbls/Lin ft _____ Lin ft /Bbl _____
 Perforations From _____ ft to _____ ft Amt _____

Float Equip Manufacturer Baker
 Shoe Type TX Pattern Depth _____
 Float Type Auto fill Depth _____
 Centralizers Quantity 3 Plugs Top _____ Btm _____
 Stage Collars _____
 Special Equip Locking + Basket
 Disp Fluid Type H₂O Amt 121 Bbls Weight 8.4 PPG _____
 Mud Type _____ Weight _____ PPG _____

COMPANY REPRESENTATIVE _____

CEMENTER Fitz

TIME	PRESSURES PSI		FLUID PUMPED DATA			REMARKS
	AM/PM	DRILL PIPE CASING	ANNULUS	TOTAL FLUID	Pumped Per Time Period	
8:30	pm		4-21-91			On location & set up, Take Rig Safety Meeting
6:45	pm		4-22-91			Mix Lead + Tail Cements Release Plug & Displace To Insert Plug Down Cement Did not Circulate
2:30	am		4-23-91			Run 100 ft 1" Tbs Cement with 150 sk A 3200 Cement Did Circulate Job finished

RECEIVED
 STATE COMMISSION
 JUN 12 1991
 [Signature]

CONSERVATION DIVISION
 Wichita, Kansas
 BBLs THANK YOU

FINAL DISP. PRESS _____ PSI BUMP PLUG TO _____ PSI BLEEDBACK _____