

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

SIDE ONE

ORIGINAL

Operator: License # 5293

Name: Helmerich & Payne, Inc.

Address: P. O. Box 558

City/State/Zip: Garden City, Kansas 67846

Purchaser: Colorado Interstate Gas

Operator Contact Person: Ken Jehlik or Art Childers

Phone: (316) 276-3693

Contractor: Name: Cheyenne Drilling

License: 5382

Wellsite Geologist: None

Designate Type of Completion

New Well Re-Entry Workover

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

If Workover:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

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

04-27-96 04-30-96 05-28-96
 Spud Date Date Reached TD Completion Date
 State Test

API NO. 15- 093-21509-0000

County Kearny

SE - NE - NW Sec. 12 Twp 26s Rge. 35 X W

4030' Feet from SN (circle one) Line of Section

2860' Feet from EW (circle one) Line of Section

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

Lease Name White Well # 2-2

Field Name Hugoton

Producing Formation Hugoton Chase

Elevation: Ground 2983 KB 2994

Total Depth 2830 PBDT 2802'

Amount of Surface Pipe Set and Cemented at 435 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 2823

feet depth to Surface w/ 500 sx cmt.

Drilling Fluid Management Plan ALT 2 8/4 11-26-96
 (Data must be collected from the Reserve Pit)

Chloride content 56000 ppm Fluid volume 2000 bbls

Dewatering method used Evaporation

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

Quarter Sec. Twp. S Rng. _____

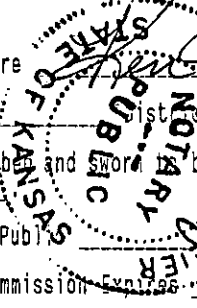
County _____ Docket No. _____

RECEIVED
 KANSAS CORP COM
 6/10/96
 1996 JUN 10 AM 11:55

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 1325 S. Market - Room 2078, 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 Ken Jehlik AC
 Title District Manager Date _____
 Subscribed and sworn to before me this 6th day of June, 1996
 Notary Public Wesley Richmeier
 Date Commission Expires August 15, 1996



K.C.C. OFFICE USE ONLY		
F	<input checked="" type="checkbox"/>	Letter of Confidentiality Attached
C	<input checked="" type="checkbox"/>	Wireline Log Received
C	<input type="checkbox"/>	Geologist Report Received
Distribution		
<input checked="" type="checkbox"/>	KCC	<input type="checkbox"/> SWD/Rep
<input type="checkbox"/>	KGS	<input type="checkbox"/> Plug
		<input type="checkbox"/> NGPA
		<input type="checkbox"/> Other
		(Specify)

Operator Name Helmerich & Payne, Inc.

SIDE TWO

Lease Name White Well # 2-2

Sec. 12 Twp. 26s Rge. 35 East West

County Kearny

ORIGINAL

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.)

List All E.Logs Run:
GR-CNL

Log Formation (Top), Depth and Datums Sample

Name	Top	Datum
Herrington	2516	+478
Krider	2538	+456
Winfield	2570	+424
U. Ft. Riley	2618	+376
L. Ft. Riley	2676	+318

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	28	435	65/35 Poz "C"	150	6% gel, 2% CaCl2
Production	7-7/8	5-1/2	14	2823	Class C	100	1/4#/sx flocele
					65/35 Poz "C"	375	6% gel, 1/4# sx flocele
					50/50 Poz "C"	125	2% gel, 10% salt, 0.75% D-60, 1/4#/sx flocele

ADDITIONAL CEMENTING/SQUEEZE RECORD

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

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		Amount and Kind of Material Used	Depth
2	Herrington	2518-2534'	Acidize w/ 3000 gallons 7-1/2% HCl. Frac w/ 32800 gallons 25# linear gel and 45000 gallons 25# x-link containing 6000# 30-70, 34500# 20-40, and 166000# 10-20 sand.	
2	Krider	2538-2554'		
2	Winfield	2572-2576'		
2	Winfield	2582-2590'		
2	Winfield	2594-2598'		
1	U. Ft. Riley	2618-2622'		
1 per 3	U. Ft. Riley	2639-2660'		
1 per 6	L. Ft. Riley	2680-2692'		

TUBING RECORD Size None Set At Set At Packer At Liner Run Yes No

Date of First, Resumed Production, SWD or Inj. State Test 5-28-96 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Oil - Bbls. Gas 454 Mcf Water 0 Bbls. 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

2518-2692' overall

DOWELL

A DIVISION OF SCHLUMBERGER TECHNOLOGY CORPORATION

P.O. BOX 4378 HOUSTON, TEXAS 77210

ORIGINAL

CUSTOMER

White 2-2 Surface

OILFIELD SERVICES

Dowell Service Order Receipt & Invoice No. 03-12-8310
 Dowell Service Location Name and Number Wylisses, Ks. 03-12

CUSTOMER'S NAME Cheyenne Drilling
 ADDRESS _____
 CITY, STATE AND ZIP CODE _____

Dowell will furnish and Customer shall purchase materials and services required in the performance of the following SERVICE INSTRUCTIONS in accordance with the general terms and conditions as printed on the reverse side of this service order and/or attached to this service order. This service order is subject to alternative dispute resolution.

IMPORTANT
 SEE OTHER SIDE FOR TERMS & CONDITIONS

ARRIVE LOCATION	MO.	DAY	YR.	TIME
	4	28	96	0430

SERVICE ORDER I authorize work to begin per service instructions in accordance with terms and conditions printed on the reverse side of this form and/or attached to this form and represent that I have authority to accept and sign this order.

SIGNATURE OF CUSTOMER OR AUTHORIZED REPRESENTATIVE
W.L. Brewer

JOB COMPLETION	MO.	DAY	YR.	TIME
	4	28	96	0730

SERVICE RECEIPT I certify that the materials and services listed were received and all services performed in a workmanlike manner.

SIGNATURE OF CUSTOMER OR AUTHORIZED REPRESENTATIVE
W.L. Brewer

CUSTOMER NUMBER	CUSTOMER PO/CONTRACT NUMBER	TYPE SERVICE CODE	WORKOVER NEW WELL OTHER	<input type="checkbox"/> W <input checked="" type="checkbox"/> N <input type="checkbox"/> O	AFE NUMBER
		271			

STATE	CODE	COUNTY/PARISH	CODE	CITY
Ks.	15	PARISH	93	

WELL NAME AND NUMBER/JOB SITE	LOCATION NAME AND NUMBER/OFFSHORE PLATFORM
White #2-2	Sec. 12-26s-35w

ACCOUNTING CODES	ROUND TRIP MILEAGE
	64

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
059200-002	mileage	mi.	30	2.95	88.50
059697-000	PUMP chg	EA	1	167.00	167.00
102871-005	PUMP chg	EA	1	670.00	670.00
048601-000	cnt. H.M.	EA	1	70.00	NC
049102-000	hauling	Ton/Mi.	362	1.05	380.10
049100-000	service chg	cu.Ft.	273	1.43	390.39
040003-000	0903 class C	SK.	199	10.42	2073.58
101545-000	D132 lit 202	SK.	52	4.39	228.28
045014-050	D20 gel	lb.	800	.17	136.00
067005-100	cells	lb.	454	.44	199.76
044003-025	D29 cell phone Flakes	lb.	63	1.77	111.51
056015-085	baffle plate	EA	1	89.00	89.00
056011-085	centralizers	EA	3	82.00	246.00
048501-085	top plug	EA	1	106.00	106.00
057499-001	THREADED LOCK	EA	1	28.00	28.00

RECEIPT

#3243.32
 RECEIVED
 ANSAS CORP COMM
 JUN 10 11 45

Thanks For using Dowell

Field esti. #4914.12

LICENSE/REIMBURSEMENT FEE	
LICENSE/REIMBURSEMENT FEE	
REMARKS:	

STATE	% TAX ON \$
COUNTY	% TAX ON \$
CITY	% TAX ON \$
SIGNATURE OF DOWELL REPRESENTATIVE	TOTAL \$
<u>James Equival</u>	

CEMENTING SERVICE REPORT

Schlumberger
Dowell

DOWELL SCHLUMBERGER INCORPORATED

TREATMENT NUMBER: **03-12-8310** DATE: **9-28-96**
STAGE: **DS** DISTRICT: **Ulysses, KS.**

DS-496-A PRINTED IN U.S.A.

WELL NAME AND NO. **White 2-2** LOCATION (LEGAL) **Sec. 12-26S-35W**
FIELD-POOL _____ FORMATION _____
COUNTY/PARISH **KEARNY** STATE **KC** API. NO. _____
NAME **Chayenne Drilling**
AND _____

RIG NAME: **Chayenne #1**
WELL DATA: BIT SIZE **7 7/8** CSGL/liner Size **8 1/2** BOTTOM _____ TOP _____
TOTAL DEPTH **505** WEIGHT **28**
 ROT CABLE FOOTAGE **505**
MUD TYPE _____ GRADE **ESS**
 BHST BHCT THREAD **820**
MUD DENSITY _____ LESS FOOTAGE (SHOE JOINTS) **40** TOTAL _____
MUD VISC. _____ Disp. Capacity **296**

ADDRESS _____ ZIP CODE _____

NOTE: Include Footage From Ground Level To Head In Disp. Capacity
FOOT TYPE **baffle plate** DEPTH **465**
SHOE TYPE **IX Pattern** DEPTH **505**

SPECIAL INSTRUCTIONS _____

Head & Plugs: Double Single Swage Knockoff
 TBG D.P. SQUEEZE JOB
TOOL TYPE _____ DEPTH _____
TAIL PIPE: SIZE _____ DEPTH _____
TUBING VOLUME _____ Bbls
CASING VOL. BELOW TOOL _____ Bbls
TOTAL _____ Bbls
ANNUAL VOLUME _____ Bbls

IS CASING/TUBING SECURED? YES NO
LIFT PRESSURE **270** PSI CASING WEIGHT + SURFACE AREA (3.14 x R²)
PRESSURE LIMIT _____ PSI BUMP PLUG TO **850** PSI
ROTATE _____ RPM RECIPROGATE _____ FT No. of Centralizers **3**

JOB SCHEDULED FOR TIME **4:30** DATE **9-28-96** ARRIVE ON LOCATION TIME **4:30** DATE **9-28-96** LEFT LOCATION TIME **08:30** DATE **9-28-96**

TIME	PRESSURE		VOLUME PUMPED BBL		INJECT RATE	FLUID TYPE	FLUID DENSITY	SERVICE LOG DETAIL
	TBG OR D.P.	CASING	INCREMENT	CUM				
0639	0	0	10		5.6	H2O		PRE-JOB SAFETY MEETING
0641	170	170	58		5.6	cmt	12.2	start H2O ahead
0648	180	180	42		5.6	cmt	12.2	start lead cmt.
0652	180	180	24		5.6	cmt	14.8	psi check
0654	230	230	15		5.5	cmt	14.8	start tail cmt.
0657	0	0						psi check
0657	0	0	29		5.4	H2O		shut down drop top plug
0700	110	110	10		5.3	H2O		start displacement
0702	180	180	20		5.3			psi check
0703	120	120	21		2.4			psi check
0704	150	150	28		2.4			lower rate
0705	850	850	24		2.4			psi check
								bump top plug
								shut in cmt. manifold
								bleed psi of
								end job

REMARKS _____

SYSTEM CODE	NO. OF SACKS	YIELD CU. FT/SK	COMPOSITION OF CEMENTING SYSTEMS			SLURRY MIXED			
			BBLS	DENSITY	BBLS	DENSITY			
1.	150	2.15	10SC	3500	6% gal	2% cact	4# 1079	57.4	12.2
2.									
3.	100	1.32	class C		2% cact		4# 1079	23.5	14.8
4.									
5.									
6.									

BREAKDOWN FLUID TYPE _____ VOLUME _____ DENSITY _____ PRESSURE _____ MAX. **135K** MIN. _____
 HESITATION SQ. RUNNING SQ. CIRCULATION LOST YES NO Cement Circulated To Surf. YES NO Bbls **5**
BREAKDOWN PSI FINAL _____ PSI _____ DISPLACEMENT VOL. **29** Bbls
Washed Thru Perfs YES NO TO _____ FT. MEASURED DISPLACEMENT _____ WIRELINE
PERFORATIONS _____ CUSTOMER REPRESENTATIVE **Joe Chorman** DS SUPERVISOR **James Fowler**

DOWELL

A DIVISION OF SCHLUMBERGER TECHNOLOGY CORPORATION

P.O. BOX 4378 HOUSTON, TEXAS 77210

DOWELL REPRESENTATIVE
White #2-2 Production

OILFIELD SERVICES

Dowell Service Order Receipt & Invoice No. 05-12-8312
Dowell Service Location Name and Number Ulysses 5 03-12

CUSTOMER'S NAME Helmreich - Payne Inc
ADDRESS _____
CITY, STATE AND ZIP CODE _____

IMPORTANT
SEE OTHER SIDE FOR TERMS & CONDITIONS
ARRIVE LOCATION 4 MO. 30 DAY 96 YR. 0700 TIME

SERVICE ORDER I authorize work to begin per service instructions in accordance with terms and conditions printed on the reverse side of this form and/or attached to this form and represent that I have authority to accept and sign this order.

SIGNATURE OF CUSTOMER OR AUTHORIZED REPRESENTATIVE _____

JOB COMPLETION 4 MO. 30 DAY 96 YR. 1130 TIME

SERVICE RECEIPT I certify that the materials and services listed were received and all services performed in a workmanlike manner.
SIGNATURE OF CUSTOMER OR AUTHORIZED REPRESENTATIVE _____

ORIGINAL

Dowell will furnish and Customer shall purchase materials and services required in the performance of the following SERVICE INSTRUCTIONS in accordance with the general terms and conditions as printed on the reverse side of this service order and/or attached to this service order. This service order is subject to alternative dispute resolution.

CUSTOMER NUMBER _____ CUSTOMER PO/CONTRACT NUMBER _____ TYPE SERVICE CODE 285 WORKOVER W NEW WELL N OTHER O AFE NUMBER _____

STATE X CODE 15 COUNTY/PARISH HOUSTON CODE 43 CITY _____

WELL NAME AND NUMBER/JOB SITE White # 2-2 LOCATION NAME AND NUMBER/OFFSHORE PLATFORM Spc. 12-265-35w

ACCOUNTING CODES _____ ROUND TRIP MILEAGE _____

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
059200-002	mileage	mi.	30	2.95	88.50
054641-000	PAVING chg	EA	1	167.00	167.00
102271-000	PUMP chg	EA	1	1460.00	1460.00
048601-000	chrt H&M	EA	1	70.00	N/C
044102-000	hauling	Ton/mi.	713	1.05	748.65
044100-000	storage chg	EA	551	1.43	787.93
040003-000	17903 class C	SK.	208	10.42	2204.36
101545-000	0132 tile 202	SK.	196	4.39	860.44
045014-050	030 gal	lb.	2320	.17	394.40
045004-050	064 salt	lb.	600	.13	78.00
044003-025	021 collection & Filter	lb.	125	1.77	221.25
044002-050	060 FINE	lb.	81	9.30	753.30
053003-054	insert float valve	EA	1	260.00	260.00
056011-054	center heads	EA	3	66.00	198.00
056702-054	top plug	EA	1	15.00	15.00
057444-001	Thread stock	EA	1	28.00	28.00

SERVICE ORDER RECEIPT

#5411.30

Thanks For using Dowell

Field esti: #9329.83

SUB TOTAL

LICENSE/REIMBURSEMENT FEE _____

REMARKS: _____ STATE _____ % TAX ON \$ _____
COUNTY _____ % TAX ON \$ _____
CITY _____ % TAX ON \$ _____
SIGNATURE OF DOWELL REPRESENTATIVE [Signature] TOTAL \$ _____

CEMENTING SERVICE REPORT

Schlumberger

Dowell

DOWELL SCHLUMBERGER INCORPORATED

TREATMENT NUMBER	8312	DATE	4-30-96
STAGE	DS	DISTRICT	Ulysses Kc

DS-496-A PRINTED IN U.S.A.

WELL NAME AND NO.	LOCATION (LEGAL)	
White 2-7	Sec 12-26s-35w	
FIELD-POOL	FORMATION	
Horton		
COUNTY/PARISH	STATE	API. NO.
Kearney	Kc	

RIG NAME:	Chaparral #1		
WELL DATA:	BOTTOM	TOP	
BIT SIZE	CSG/Liner Size		
7 7/8	5 1/2		
TOTAL DEPTH	WEIGHT		
2820	14		
<input type="checkbox"/> ROT <input type="checkbox"/> CABLE	FOOTAGE		
	2827		
MUD TYPE	GRADE		
	555		
<input type="checkbox"/> BHST <input type="checkbox"/> BHCT	THREAD		
	8AD		
MUD DENSITY	LESS FOOTAGE SHOE JOINT(S)		TOTAL
	16		
MUD VISC.	Disp. Capacity		
	68.5		

NAME: Holmrich Payne Trc

AND:

ADDRESS:

ZIP CODE:

ORIGINAL

SPECIAL INSTRUCTIONS:

IS CASING/TUBING SECURED? YES NO

LIFT PRESSURE: 1667 PSI CASING WEIGHT + SURFACE AREA (3.14 x R²)

PRESSURE LIMIT: PSI BUMP PLUG TO: 1400 PSI

ROTATE: RPM RECIPROCAT: 117 FT No. of Centralizers: 5

NOTE: Include Footage From Ground Level To Head In Disp. Capacity

Float	TYPE	INSPECT + Float Valve	TYPE	
	DEPTH	2811	DEPTH	
SHOE	TYPE	ENT HOSE	TYPE	
	DEPTH	2827	DEPTH	

Head & Plugs TBG D.P. SQUEEZE JOB

Double Single Swage Knockoff

SIZE WEIGHT GRADE THREAD

TAIL PIPE: SIZE DEPTH

TUBING VOLUME Bbls

CASING VOL. BELOW TOOL Bbls

TOTAL Bbls

ANNUAL VOLUME Bbls

ARRIVE ON LOCATION TIME: 0700 DATE: 4-30-96

LEFT LOCATION TIME: 1230 DATE: 4-30-96

TIME	PRESSURE		VOLUME PUMPED BBL		JOB SCHEDULED FOR			SERVICE LOG DETAIL			
	TBG OR D.P.	CASING	INCREMENT	CUM	INJECT RATE	FLUID TYPE	FLUID DENSITY	PRE-JOB SAFETY MEETING			
0001 to 2400								PRE-JOB SAFETY MEETING			
1031	0	10			5.6	420		START 420 ahead			
1033	100	142			5.6	cmf	12.2	START lead cmf			
1047	160	78			5.6	cmf	12.2	PSI check			
1058	100	24			2.8	cmf	14.4	START tail cmf			
1101	80	15			2.8	cmf	14.4	PSI check			
1105	0							SHUT DOWN wash pump line - decontaminate			
1108	0	69			5.7	420		START displacement			
1110	0	20			5.7	420		PSI check			
1114	250	30			5.7			" "			
1115	390	40			5.6			" "			
1117	580	50			5.6			" "			
1119	710	60			2.3			lower rate			
1121	700	65			2.3			PSI check			
1122	710	67			2.3			" "			
1129	1400	69			2.3			bump to 1400			
1124								bleed psi of check float holding			

REMARKS:

SYSTEM CODE	NO. OF SACKS	YIELD CU. FT/SK	COMPOSITION OF CEMENTING SYSTEMS				SLURRY MIXED	
							BBLs	DENSITY
1.	775	215	1.5C 2/3 spm + 6% gel + 1/4 #1029				142.5	12
2.								
3.	125	124	2/3 spm + 2% gel + 10% 044 + .75% D60 + 1/4 #1029				28.1	14
4.								
5.								
6.								

BREAKDOWN FLUID TYPE: HESITATION SQ. RUNNING SQ. CIRCULATION LOST

VOLUME: 68.5 Bbls

DENSITY: 168.5 Bbls

PRESSURE: MAX. 2 MIN: 2

Cement Circulated To Surf. YES NO

TYPE OF WELL: OIL STORAGE BRINE WATER GAS INJECTION WILDCAT

PERFORATIONS: TO TO

CUSTOMER REPRESENTATIVE: [Signature]

DS SUPERVISOR: James F...