

FORM MUST BE TYPED

SIDE USE

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

ORIGINAL

API NO. 15- 093-21044-0000

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 SLOW 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 _____ PBTB
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____
12/13/89 12/19/89 5/6/92
Spud Date Date Reached TD Completion Date

County Kearny
NE - NE - SW - SE Sec. 31 Twp. 24 Rge. 36 ^E _W
1250 Feet from ^N _S (circle one) Line of Section
1550 Feet from ^E _W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)
Lease Name Moser G.U. A Well # 3HI
Field Name Hugoton

Producing Formation Chase
Elevation: Ground 3060' KB 3072'
Total Depth 2647' PBTB _____

Amount of Surface Pipe Set and Cemented at 622 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)
Chloride content 5800 ppm Fluid volume 2140 bbls
Dewatering method used dried and filled

Location of fluid disposal if hauled offsite:
Operator Name _____
Lease Name _____ License No. _____
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 **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 5/7/92
Subscribed and sworn to before me this 7 day of May, 19 92.
Notary Public Sherril L. Stegman
Date Commission Expires 8-5-95

RECEIVED

KANSAS CORPORATION COMMISSION

MAY 12 1992

CONSERVATION DIVISION
WICHITA, KS. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
Distribution
 KCC SWD/Rep NGPA
 XGS Plug Other (Specify)

PI

Operator Name Amoco Production Company Lease Name Moser G.U. A Well # 3HI

Sec. 31 Twp. 24 Rge. 36 East West
 County Kearny

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 pressures 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 (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input checked="" type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Chase	2374'	
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
List All E.Logs Run:				

CASING RECORD <input checked="" 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#	622'	Class C	600	CACL3 2%
Production	7-7/8"	5-1/2"	15.5#	2,045'	Class C	930	CACL .20%

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 245,220# Colorado Silica and 37,750 gals. gelling agent	2374-2647'

TUBING RECORD	Size <u>N/A</u>	Set At	Packer At	Liner Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Top = 1,972' Bottom = 2,630'
Date of First, Resumed Production, SWD or Inj.	<u>SI</u>	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.	Gravity	

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Other (Specify)

Production Interval: 2374-2647'

RECEIVED MAY 20 1992 CONSERVATION DIVISION Wichita, Kansas

ORIGINAL

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. 1833

City/State/Zip Denver, CO 80201

Purchaser: _____

Operator Contact Person: J. A. Victor

Phone (303) 830-4009

Contractor: Name: Service Drilling

License: 5987

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: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Drilling Method:
 Mud Rotary Air Rotary Cable

12/13/89 12/19/89
Spud Date Date Reached ID Completion Date

API NO. 15- 093-21044-0000

County Kearny

NE SW SE Sec. 31 Twp. 24 Rge. 36 East West

1250 Ft. North from Southeast Corner of Section

1550 Ft. West from Southeast Corner of Section

(NOTE: Locate well in section plat below.)

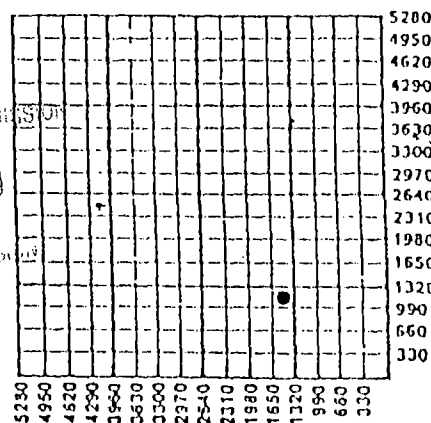
Lease Name Moser G.U. "A" Well # 3HI

Field Name Hugoton

Producing Formation Chase

Elevation: Ground 3060' KB 3072'

Total Depth 2614' PBTD _____



RECEIVED
AUG - 6 1990
STATE CORPORATION COMMISSION
CONSERVATION DIVISION
Wichita, Kansas

Amount of Surface Pipe Set and Cemented at 622 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 Cl Burton

Title SR. Admin. Analyst Date 7/20/90

Subscribed and sworn to before me this 20 day of July, 19 90.

Notary Public Julie A. Victor

Date Commission Expires 4/7/94

K.C.C. OFFICE USE ONLY

F Letter of Confidentiality Attached
C Wireline Log Received
C Drillers Time Log Received

Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other (Specify)

CONSERVATION DIVISION
Wichita, Kansas

SIDE TWO

Operator Name Amoco Production Company Lease Name Moser G.U. "A" Well # 3HI

Sec. 31 Twp. 24 Rge. 36 East West
 County Kearny

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 (Attach Additional Sheets.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 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 (Submit Copy.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3">Formation Description</th> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/> Log</td> <td colspan="2" style="text-align: center;"><input checked="" type="checkbox"/> Sample</td> </tr> <tr> <td style="text-align: center;">Name</td> <td style="text-align: center;">Top</td> <td style="text-align: center;">Bottom</td> </tr> <tr> <td style="text-align: center;">Chase</td> <td style="text-align: center;">2374'</td> <td></td> </tr> </table>	Formation Description			<input type="checkbox"/> Log	<input checked="" type="checkbox"/> Sample		Name	Top	Bottom	Chase	2374'	
Formation Description													
<input type="checkbox"/> Log	<input checked="" type="checkbox"/> Sample												
Name	Top	Bottom											
Chase	2374'												

CASING RECORD							
<input checked="" 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#	622'	Lite C	150	CACL3 2%
Production	7-7/8"	5-1/2"	15.5#	2045'	Premium C	450	CACL3 2%
					Lite C	470	CACL .20%
					Premium C	460	CACL .20%
PERFORATION RECORD				Acid, Fracture, Shot, Cement Squeeze Record			
Shots Per Foot	Specify Footage of Each Interval Perforated			(Amount and Kind of Material Used)			
TUBING RECORD				Liner Run			
Size	Set At	Packer At	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Date of First Production	Producing Method <input 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 Conningled Other (Specify) _____

Production Interval _____