

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

API NO. 15- 055-21133 0001

County Finney **ORIGINAL**
W/2 W/2 SE Sec. 14 Twp. 24S Rge. 31 X E

Operator: License # 30269

1320 Feet from (S)N (circle one) Line of Section

Name: Argent Energy, Inc.

2600 Feet from (E)W (circle one) Line of Section

Address 110 South Main, Suite 810
Wichita KS 67202

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

City/State/Zip _____

Lease Name Harms Well # 1

Purchaser: Cibola

Field Name Hugoton

Operator Contact Person: James C. Remsberg

Producing Formation Krider

Phone (316) 262-5111

Elevation: Ground 2876 KB 2881

Contractor: Name: Red Tiger Drilling Co.

Total Depth 2770 PBDT _____

License: 5302

Amount of Surface Pipe Set and Cemented at 558 Feet

Wellsite Geologist: Warren Tomlinson

Multiple Stage Cementing Collar Used? _____ Yes X No

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

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

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

feet depth to _____ w/ _____ 9x cmt.

Drilling Fluid Management Plan ALT 1 JZ 10-26-93
(Data must be collected from the Reserve Pit)

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

Chloride content 5000± ppm Fluid volume 1400 bbls

Operator: _____

Dewatering method used evaporation

Well Name: _____

Location of fluid disposal if hauled offsite: _____

Comp. Date _____ Old Total Depth _____

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

Operator Name N/A

Lease Name _____ License No. _____

10/3/92 10/8/92 11/16/92 KCC JZ

Quarter _____ Sec. _____ Twp. _____ S Rng. _____ E/W _____

Spud Date _____ Date Reached TD _____ Completion Date _____

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 James C. Remsberg 9/7/93
James C. Remsberg President Date 9/7/93

Subscribed and sworn to before me this 7th day of September, 1993.

Notary Public Julie O. Koker

Date Commission Expires December 4, 1993

JULIE O. KOKER
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 12-4-93

K.C.C. OFFICE USE ONLY
F _____ Letter of Confidentiality Attached
C ✓ Wireline Log Received
C _____ Geologist Report Received
Distribution ✓ KCC _____
KGS _____
RECEIVED
STATE CORPORATION COMMISSION
SEP 08 1993
(Specify)

CONSERVATION DIVISION
Form ACO-1W-91
Wichita, Kansas

Operator Name Argent Energy, Inc. Lease Name Harms Well # 1
 Sec. 14 Twp. 24 Rge. 31 East County Finney
 West

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	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datums	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Krider	2710	+171
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

List All E.Logs Run:
 Cement Bond Log
 Gamma Ray - Neutron

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 casing	12 1/4"	8-5/8"	20# used	558	Pre-Plus Lite	125	2% CC
Producing csg.	7-7/8"	4 1/2"	10 1/2# new	2766	Hall Lite 40/60 Poz	425 200	1/4# flo-seal 5% KCL

ADDITIONAL CEMENTING/SQUEEZE RECORD					
Purpose:	Depth		Type of Cement	#Sacks Used	Type and Percent Additives
	Top	Bottom			
<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	Acid, Fracture, Shot, Cement Squeeze Record	Depth
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)	
2	2712-2722	1000 gal 15% HCL	2712-22
		15,000 lbs Brady 12-20	
		500 bbls gel water	

TUBING RECORD	Size <u>2-3/8</u>	Set At <u>2715</u>	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumed Production, SWD or Inj. <u>Aug. 2, 1993</u>	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls.	Gas 200 Mcf	Water 20 Bbls.	Gas-Oil Ratio	Gravity
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Disposition of Gas: <input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, submit ACO-18.)	METHOD OF COMPLETION <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify)	Production Interval <u>2712-22</u>
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