

ORIGINAL

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

API NO. 15- 075-20522 - 0000
County HAMILTON
Appx. NE - SE - SW - Sec. 35 Twp. 22S Rge. 41W X E

Operator: License # 3871

1250 FSL Feet from (S) (circle one) Line of Section

Name: Hugoton Energy Corporation

2970 FEL Feet from (E) (circle one) Line of Section

Address: 301 N. Main, Suite 1900

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

City/State/Zip Wichita, KS 67202

Lease Name SHOUP Well # 2-35

Purchaser: N/A

Field Name BRADSHAW

Operator Contact Person: Jimmy W. Gowens

Producing Formation CHASE

Phone (316) 262-1522

Elevation: Ground 3531' KB 3540'

Contractor: Name: Murfin Drilling Co., Inc.

Total Depth 2680' PBD

License: 30606

Amount of Surface Pipe Set and Cemented at 343' Feet.

Wellsite Geologist: Joe Brouger

Multiple Stage Cementing Collar Used? Yes X No

Designate Type of Completion
X New Well Re-Entry Workover

If yes, show depth set _____ Feet

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

If Alternate II completion, cement circulated from 2679

feet depth to surface w/ 700 sx cmt.

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

Drilling Fluid Management Plan ALT 2 894 11-21-95
(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 PBD
Commingled Docket No. _____
Dual Completion Docket No. _____
Other (SWD or Inj?) Docket No. _____

Operator Name _____

12/14/93 12/17/93 12/17/93
Spud Date Date Reached TD Completion Date

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 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.

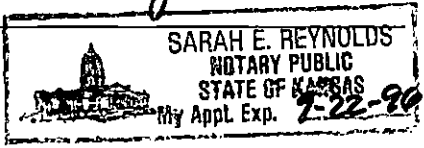
Signature Jimmy W. Gowens

Title Jimmy W. Gowens, V.P. Exploration Date _____

Subscribed and sworn to before me this 14 day of February 1995

Notary Public Sarah E Reynolds

Date Commission Expires _____



K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received 2-15-95
RECEIVED Distribution
STATE CORPORATION COMMISSION
KGS _____ Plug _____ NGPA _____
Other (Specify) _____
FEB 15 1995

CONSERVATION DIVISION Form ACO-1 (7-91)
WICHITA, KANSAS

15-075-20522-0000

SIDE TWO

Operator Name Hugoton Energy Corporation Lease Name SHOUP Well # 2-35

Sec. 35 Twp. 22S Rge. 41W
 East
 West

County HAMILTON

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 (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	B/SC	2160	+1380
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	WINFIELD	2614	+926
List All E. Logs Run:	GRN ONLY			

CASING RECORD							
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"		343'	60/40 POZ	175	3% SI + 2% D20
PRODUCTION	7-7/8"	4-1/2"	9.5#	2679'	65/35 POZ Class C	550 150	6% Gel + 2% Cacl2 + 1/4#/D29 1.35% Cacl2 + .4%D60 + 1/4#/D29

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 Specify Footage of Each Interval Perforated		Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	
				Depth

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj. <u>None Yet</u>				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: **METHOD OF COMPLETION**

Vented Sold Used on Lease
(If vented, submit ACO-18)

Open Hole Perf. Dually Comp. Commingled
 Other (Specify) _____

RECEIVED
STATE CORPORATION COMMISSION
Production Interval _____
FEB 15 1995

CONSERVATION DIVISION
WICHITA, KANSAS

CEMENTING SERVICE REPORT



15-075-20522-0000

TREATMENT NUMBER 03-12-5791 DATE 12-11-93
 STAGE Surf. DS DISTRICT WYSSSES, KS

DOWELL SCHLUMBERGER INCORPORATED

DS-496 PRINTED IN U.S.A.

WELL NAME AND NO. Shoup 2-35 LOCATION (LEGAL) sec. 35-225-41W RIG NAME: Murfin Rig 20
 FIELD-POOL FORMATION WELL DATA: BIT SIZE 12 1/4" CSG/Liner Size 8 5/8" TOTAL DEPTH 338 WEIGHT 24
 COUNTY/PARISH Hamilton STATE Kansas API. NO. MUD TYPE WB GRADE FOOTAGE 343
 NAME Hugoton Energy AND THREAD 8" MUD DENSITY 9.0 LESS FOOTAGE SHOE JOINT(S) 1.5 MUD VISC. Disp. Capacity 327' TOTAL 20.8

ORIGINAL

ADDRESS ZIP CODE

SPECIAL INSTRUCTIONS Provide materials and services to safely cement the 8 5/8" surface csg per customer's orders.

IS CASING/TUBING SECURED? YES NO
 LIFT PRESSURE 140 PSI CASING WEIGHT ÷ SURFACE AREA (3.14 x R²)
 PRESSURE LIMIT 500 PSI BUMP PLUG TO PSI
 ROTATE RPM RECIPROCATE FT No. of Centralizers 0

JOB SCHEDULED FOR TIME: 1800 DATE: 12-11-93 ARRIVE ON LOCATION TIME: 1800 DATE: 12-11-93 LEFT LOCATION TIME: 2230 DATE: 12-14-93

TIME	PRESSURE		VOLUME PUMPED BBL		INJECT RATE	FLUID TYPE	FLUID DENSITY	SERVICE LOG DETAIL
	TBG OR D.P.	CASING	INCREMENT	CUM				
0001 to 2400								PRE-JOB SAFETY MEETING
2122		220	10		5	H ₂ O	8.34	Start water to line out the tub.
2126		200	4/0	10	5	cmf	13.6	Start cement.
2134				5/0				Shutdown / Drop Plug.
2137		210	20.8	5/0	5	H ₂ O	8.34	Start Displacement.
2142		210		76.8				Shutdown close in head. Release Dowell.

REMARKS

SYSTEM CODE	NO. OF SACKS	YIELD CU. FT/SK	COMPOSITION OF CEMENTING SYSTEMS		SLURRY MIXED		
			BBL	DENSITY	BBL	DENSITY	
1.	175	1.48	60% 40 #/po2	+ 3% 51	+ 2% 020	46	13.6
2.							
3.							
4.							
5.							
6.							

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FEB 15 1995

BREAKDOWN FLUID TYPE VOLUME DENSITY PRESSURE MAX. 320 MIN. 0
 HESITATION SQ. RUNNING SQ. CIRCULATION LOST YES NO Cement Circulated To Surf. YES NO 5 Bbls.
 BREAKDOWN PSI FINAL PSI DISPLACEMENT VOL. 20.8 Bbls TYPE OF WELL OIL STORAGE BRINE WATER
 Washed Thru Perfs YES NO TO FT. MEASURED DISPLACEMENT WIRELINE GAS INJECTION WILDCAT
 PERFORATIONS TO TO CUSTOMER REPRESENTATIVE Rodney Farf DS SUPERVISOR Stwe Merach

CEMENTING SERVICE REPORT



DOWELL SCHLUMBERGER INCORPORATED

15-075-20522-0000
 TREATMENT NUMBER 03-12-5796 DATE 12-17-93
 STAGE D9 DISTRICT Ulysses, Ks

DS-496 PRINTED IN U.S.A.

WELL NAME AND NO. Shoup 2-35 LOCATION (LEGAL) Sec. 35-225-41w RIG NAME MURFIN DRILLING 20
 FIELD-POOL _____ FORMATION _____ WELL DATA: BIT SIZE 7 7/8 CSG/Liner Size 4 1/2 BOTTOM TOP
 COUNTY/PARISH HAMILTON STATE Ks. API NO. _____ TOTAL
 NAME Hugoton Energy Corp WEIGHT 9.5
 AND _____ FOOTAGE 2679.84
 MUD TYPE GRADE SSS
 MUD DENSITY LESS FOOTAGE SHOE JOINT(S) _____
 MUD VISC. Disp. Capacity _____

NOTE: Include Footage From Ground Level To Head In Disp. Capacity
 ADDRESS _____
 ZIP CODE _____

SPECIAL INSTRUCTIONS _____
 IS CASING/TUBING SECURED? YES NO
 LIFT PRESSURE 1602 PSI CASING WEIGHT SURFACE AREA (3.14 x R²)
 PRESSURE LIMIT _____ PSI BUMP PLUG TO 1630 PSI
 ROTATE RPM _____ RECIPROCATE _____ FT. No. of Centralizers 4

Head & Plugs: TBG D.P. SQUEEZE JOB
 Double SIZE _____ TOOL TYPE _____
 Single WEIGHT _____ TOOL DEPTH _____
 Swage GRADE _____ TAIL PIPE: SIZE DEPTH _____
 Knockoff THREAD _____ TUBING VOLUME _____ Bbls
 TOP OR CW NEW USED CASING VOL. BELOW TOOL _____ Bbls
 BOT OR CW DEPTH _____ TOTAL _____ Bbls
 ANNUAL VOLUME _____ Bbls

JOB SCHEDULED FOR TIME 9:50 AM DATE 12-17-93 ARRIVE ON LOCATION TIME 10:00 DATE 12-17-93 LEFT LOCATION TIME 10:30 DATE 12-17-93

TIME	PRESSURE		VOLUME PUMPED BBL		JOB SCHEDULED FOR			ARRIVE ON LOCATION			LEFT LOCATION		
	TBG OR D.P.	CASING	INCREMENT	CUM	TIME	DATE	TIME	DATE	TIME	DATE	TIME	DATE	
0001 to 2400													
1242		0	12		7		H20						
1244		350	205		7		cmf 12.2						
1258		250		103	7		cmf 12.2						
1313		210	35		7		cmf 14.8						
1315		280		21	7		cmf 14.8						
1318		0											
1321		0	434		6		H20						
1323		300		10	6		H20						
1325		500		20	6								
1326		810		31	6								
1327		840		35	2								
1329		860		40	2								
1331		1630		43	2								
1332													

REMARKS _____

SYSTEM CODE	NO. OF SACKS	YIELD CU. FT/SK	COMPOSITION OF CEMENTING SYSTEMS				SLURRY MIXED	
			BBLs	DENSITY	BBLs	DENSITY		
1.	550	2.10	65%	25% spore + 0% gel + 2% crch ₂ + 1/4% D29	205	17.2		
2.								
3.	150	1.32		class C + 1.35% crch + .4% D60 + 1/4% D29	35	14.8		
4.								
5.								
6.								

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BREAKDOWN FLUID TYPE _____ VOLUME _____ DENSITY _____ PRESSURE MAX. 850 MIN. _____
 HESITATION SQ. RUNNING SQ. CIRCULATION LOST YES NO Cement Circulated To Surf. YES NO 3 Bbls.
 BREAKDOWN PSI FINAL PSI DISPLACEMENT VOL. 43.4 Bbls TYPE OF WELL OIL STORAGE BRINE WATER
 GAS INJECTION WILDCAT
 Washed Thru Perfs YES NO TO _____ FT. MEASURED DISPLACEMENT WIRELINE
 PERFORATIONS _____ CUSTOMER REPRESENTATIVE Joe Brougher DS SUPERVISOR James Esquivel