STATE CORPORATION COMMISSION OF KANSAS OIL & GAS CONSERVATION DIVISION RECOMPLETION FORM ACO-2 AMENDMENT TO WELL HISTORY

Operator: License # 30527							
Name <u>Genesis Petroleum, Inc.</u>							
Address P.O. Box 146							
City/State/Zip Jetmore, Ks. 67854							
Purchaser Texaco							
Operator Contact Person Arthur G. Ramos Phone (316) 357-6265							
Designate Type of Original Completion New Well Re-Entry X_ Workover							
X OII SWD Temp Abd							
X 011 SWD Temp Abd Gas inj Delayed Comp.							
Dry Other (Core, Water Supply etc.)							
Date of Original Completion: 7-15-85							
DATE OF RECOMPLETION:							
11-07-90 11-27-90 Completed							
Designate Type of Recompletion/Workover:							
Deepening Delayed Completion							
Plug BackRe-perforation							
Conversion to Injection/Disposal							
Is recompleted production:							
Commingled; Docket No.							
Dual Completion; Docket No.							
Other (Disposal or Injection)?							
•							

API NO. 15- 083-21,199-00-02 County Hodgeman East SE SE SW Soc 18 Twp 22S Rgo 23W 330 Ft North from Southeast Corner of Section 2970 Ft West from Southeast Corner of Section (Note: Locate well in section plat below) Lease Name Bradshaw ___ Well # <u>1 A</u> Fleid Name Nova Name of New Formation Same formation Elevation: Ground _ <u>2371</u> кв <u>2376</u> Section Plat 5280 4620 4290 **39**60 3300 2970 2640 2310 1980 1650 1320 990 660 K. C. C. OFFICE USE ONLY

Dual Completion; Docket No.	
Other (Disposal or Injection)?	
INSTRUCTIONS: This form shall be completed in tri	plicate and filed with the Kansas Corporation Commission,
200 Colorado Derby Building, Wichita, Kansas 67202,	within 120 days of the recompletion of any well. Rules
82-3-107 and 82-3-141 apply. Information on side to	wo of this form will be held confidential for a period of
	n the form. See rule 82-3-107 for confidentiality in
	al whreline logs and driller's time logs (not previously)
	t ACO-4 prior to or with this form for approval of
	th all plugged wells. Submit CP-111 with all temporarily
	disposal or injection must receive approval before use;

_ Letter of Confidentiality Attached

NGPA

Other (Specify)

__SWD/Rep

Plug

C ___ Wireline Log Received C ___ Drillers Timelog Received Distribution

KCC

, KGS

submit form U-1. All requirements of the statutes, rules and regulations promulgated to regulated to regulate it and gas industry have boen fully complied with and the statements herein are complete and goarectification became knowledge. 12-12-90 DEC 12 1990 Date 12-10-90.

Subscribed and sworn to before me this

CONSERVATION DIVISION _ day, of 🗘

Notary Public

Date Commission Expires 6-21-93

NOTARY PUBLIC - State of Kansas STACY C. OLSON II My Appt. Exp.

FORM ACO-2

SIDE TWO

Operator Name <u>G</u>	nesis Petroleum	, Inc.	Lease N	_{lame} <u>Bradshav</u>	<u>₹</u> Well #	1A
		P-a+			_	
Sec 18 Twp	22S Rge 23W	East .X West	County	Hodgeman		
			555,17			
				•		
	REC	OMPLETED FORMA	TION DESCR	HPTION		
	NEO	on Ecres Tolant	TION DESGR			
•		Log	Sa	mple		
	Ma a			-	5	
Acid.w/	$\frac{\text{Name}}{500 \text{ gals.}}$ same	orginal z	one ;	<u>Top</u> swabbed-bac	ck 94 barrels	
	oil, 70% wtr.)	J	•			
	:			•		
, 	ADE	ITIONAL CEMENT	'ING/SOUFF	ZE RECORD		
· i						
_	Depth				1 . 1	
Purpose:	Top Bottom	Type of Ce	ment	# Sacks Used	Type & Percent Ad	ditives
Perforate		-	ľ			
Protect Casl						
Plug Back TD	4					
Plug Off Zono	'					
	' <u></u> ' -				·	
	PERFORATION RECOR	n I				
	Specify Footage of	!	Acid, Fr	acture, Shot, C	ement Squeeze Record	
Shots Per Foot	Interval Perforate	ed [•		of Material Used)	•
1	,]				
		<u>500</u>	gals. N	Mca Acid_w/	inhibitors	
						
		{ -		<u> </u>		¦
			•			 ¦
						'
				•		
	Dia T.		1			
BTDnone	Plug Type					•
**		TUBING RE	ECORD:			
1 ze _ 2 3/8 !!	Set At <u>4644</u>	Packer /	' [†] <u>none</u>	, Was L	iner Run?Y	Х и
ate of Resumed Pro	duction, Disposal or Inj	ection 11-	27-90	.		
	• •			bbl/w		
stimated Production	n Per 24 Hours		/011	bb1/w	ater	
-		MCF	gas	gas-o	II ratio	
		· — – —	_			