

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

Operator: License # 5614

Name: Hutchinson Oil Co.

Address P.O. Box 521

City/State/Zip Derby, KS 67037-0521

Purchaser: N/A

Operator Contact Person: Steve Hutchinson

Phone (316) 788-5440

Contractor: Name: G & L Well Service

License: _____

Wellsite Geologist: N/A

Designate Type of Completion

New Well Re-Entry Workover

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

If Workover:

Operator: Hutchinson Oil Co.

Well Name: #2-19 Krankenberg

Comp. Date 6/10/96 Old Total Depth 3640'

Deepening Re-perf. Conv. to (Inj) SWD
 Plug Back _____ PBTD
 Commingled _____ Docket No. _____
 Dual Completion _____ Docket No. _____
 Other (SWD or (Inj)) Docket No. E-27,240

6/10/96 6/10/96

Date OF START OF WORKOVER 6/10/96 **Date Reached TD** _____ **Completion Date OF WORKOVER** 6/10/96

API NO. 15- 185-21,408A

County Stafford

- SE - NW - SE sec. 19 Twp. 22S Rge. 12 W

1650 Feet from (S)N (circle one) Line of Section

1650 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 Krankenberg Well # 2-19

Field Name Krankenberg

Producing Formation Injection well L. KC

Elevation: Ground 1870 KB 1875

Total Depth 3851 PBTD 3640

Amount of Surface Pipe Set and Cemented at 271 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 REWORK 97% 11-25-96
(Data must be collected from the Reserve Pit) ALT 1

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used 82-96

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, 130 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 [Signature]

Title Owner Date 6/20/96

Subscribed and sworn to before me this 20th day of June, 19 96.

Notary Public [Signature]

Date Commission Expires 9-15-97

K.C.C. OFFICE USE ONLY		
F	Letter of Confidentiality Attached	
C	Wireline Log Received	
C	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"/>		<input type="checkbox"/> NGPA
<input type="checkbox"/>		<input type="checkbox"/> Other
(Specify)		



SIDE TWO

Operator Name Hutchinson Oil Co. Lease Name Krankenbergl Well # 2-19
 Sec. 19 Twp. 22S Rge. 12 East County Stafford 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 type="checkbox"/> Log	<input checked="" type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Formation (Top), Depth and Datums	
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top Datum
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Anhydrite	682 + 1193
List All E.Logs Run:		Heebner	3190 - 1315
		Lansing	3342 - 1467
		BKC	3568 - 1693
		Simpson Shale	3692 - 1817
		Arbuckle	3752 - 1877
		RTD	3851 - 1976

CASING RECORD <input type="checkbox"/> New <input checked="" 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
Production (Inj.)	7-7/8ths	5-1/2"	14#	3848	50/50 Poz	125	10% gilsonite
Surface	12-1/4"	8-5/8ths	24#	271.50	60/40 Poz	225	3% c/c 2% gel

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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	Depth
4 SPF	3710-14' & 3719-24'		1000 gals 20% FE	3710 & 3724'
	Set cast iron bridge plug 3640'			
4 SPF	3512-16', 3478-82', 3430-34',		1500 gals 15% NE	3405'
	3414-18' & 3405-08'			3516'

TUBING RECORD	Size <u>2-3/8ths</u> <u>duo-lined</u>	Set At <u>3348'</u>	Packer At <u>3352'</u>	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or (Inj.)	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
<u>6/20/96</u>				
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 Perf. Dually Comp. Commingled Other (Specify) 3405' - 3516'