

15-009-16621-00-01

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

Operator: License # 5565
Name NCRA
Address Box 6

City/State/Zip Great Bend, KS 67530

Purchaser KAW Pipeline

Operator Contact Person I. J. Gotsche
Phone 316 793-7824

Designate Type of Original Completion
 New Well Re-Entry Workover

Oil SWD Temp Abd
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply etc.)

Date of Original Completion: 2/7/63

DATE OF RECOMPLETION:
6/20/88 6/29/88
Commenced Completed

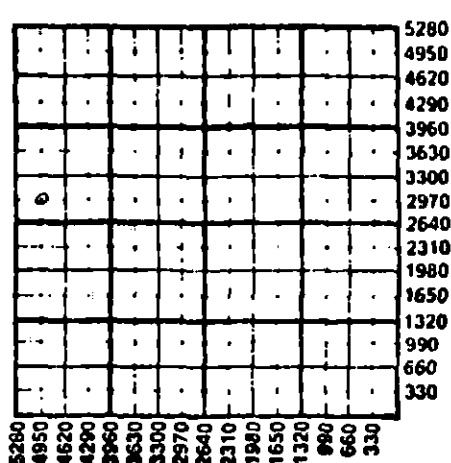
Designate Type of Recompletion/Workover:
 Deepening Delayed Completion
 Plug Back Re-perforation
 Conversion to Injection/Disposal

Is recompleted production:
 Commingled; Docket No. _____
 Dual Completion; Docket No. _____
 Other (Disposal or Injection)?

API NO. 15- 63
County Barton
SW SW NW Sec 5 Twp 16 Rge 12 East West
2970 Ft North from Southeast Corner of Section
4950 Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)

Lease Name NW Beaver Unit Well # Tr2-W4
Field Name Hall Gurney
Name of New Formation Topeka
Elevation: Ground 1818 KB 1823

Section Plat



K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Drillers Timelog Received
Distribution
 KCC SWD/Rap NGPA
 KGS Plug Other
(Specify)
.....
.....
7-25-88

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 recompletion of any well. Rules 82-3-107 and 82-3-141 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 any additional wireline logs and driller's time logs (not previously submitted) shall be attached with this form. Submit AOO-4 prior to or with this form for approval of commingling or dual completions. Submit OP-4 with all plugged wells. Submit OP-111 with all temporarily abandoned wells. NOTE: Conversion of wells to either disposal or injection must receive approval before use; submit form U-1.

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 I. J. Gotsche Title District Supt. Date 7/21/88

Subscribed and sworn to before me this 21st day of July 19 88

Notary Public Patricia Schultz Date Commission Expires January 29, 1989

RECEIVED
STATE CORPORATION COMMISSION

NOTARY PUBLIC - State of Kansas
1 PATRICIA SCHULTZ
My Appt. Exp. 1-29-89

FORM AOO-2
5/88

JUL 25 1988

7-25-88

CONSERVATION DIVISION
Wichita, Kansas

10-00-11-01-12-571

SIDE TWO

Operator Name National Cooperative Refinery Association Lease Name NWBU Well # Tr. 2-W4
 Sec 5 Twp 16 Rge 12 East West County Barton

RECOMPLETED FORMATION DESCRIPTION:

Log Sample

Name	Top	Bottom
Topéka	2604	2880

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth		Type of Cement	# Sacks Used	Type & 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 Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)
2	2844-50	Acidized w/1,000 gal 15% NE
2	*2828-36	
4	*2985-87	
4	*3008-14	
4	*3047-51	
4	*3057-65	
4	*3114-22	
	*Orig. Perf.	

PBD 3190 Plug Type Cast Iron Bridge Plug - Cement on Top

TUBING RECORD:

Size 2 7/8" Set At 3140 Anchor Catcher @ 3110
 -Packer At- _____ Was Liner Run? Y X N

Date of Resumed Production, Disposal or Injection 6/30/88

Estimated Production Per 24 Hours 5.24 bbl/oil 257 bbl/water
 --- MCF gas --- gas-oil ratio