

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

API NO. 15- 097-201420001 **ORIGINAL**
County Kiowa
C.S/2.SW Sec. 1 Twp. 28S Rge. 20 ^E/_W

Operator: License # 31378

660 Feet from S (circle one) Line of Section

Name: Universal Resources Corp.

1320 Feet from E (circle one) Line of Section

Address 2601 N.W. Exp. Suite 700E

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

Oklahoma City

Lease Name SHERER F Well # 2

City/State/Zip Oklahoma 73112

Field Name Mullinville

Purchaser: Texaco Trading

Producing Formation Mississippian

Operator Contact Person: James Collings

Elevation: Ground 2285' KB 2290'

Phone (405) 840-2761

Total Depth 4883' PBTD _____

Contractor: Name: Kincaid Well Service

Amount of Surface Pipe Set and Cemented at 603 Feet

License: 727TN 7252

Multiple Stage Cementing Collar Used? _____ Yes X No

Wellsite Geologist: None

If yes, show depth set _____ Feet

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

If Alternate II completion, cement circulated from _____

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

feet depth to _____ w/ _____ sx cmt.

If Workover:

Drilling Fluid Management Plan REWORK 9/4 4-27-95
(Data must be collected from the Reserve Pit)

Operator: Petroleum, Inc.

Chloride content _____ ppm Fluid volume _____ bbls

Well Name: SHERER F #2

Dewatering method used _____

Comp. Date 11/12/78 Old Total Depth 4883'

Location of fluid disposal if hauled offsite: _____

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

Operator Name _____

Lease Name _____ License No. _____

9/17/94 10/06/94

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

Spud Date OF START OF WORKOVER 9/17/94 Date Reached TD 10/06/94 Completion Date OF WORKOVER

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 James R. Collings
Title Reservoir Engineer Date 11/04/94

Subscribed and sworn to before me this 4th day of November, 1994.

Notary Public Shirley L. Davis

Date Commission Expires October 15, 1997

K.C.C. OFFICE USE ONLY
F ____ Letter of Confidentiality Attached
C ____ Wireline Log Received
C ____ Geologist Report Received
Distribution
____ KCC ____ SWD/Rep
____ KGS ____ Plug
NGPA
Other (Specify) _____

STATE CORPORATION COMMISSION
RECEIVED
NOV 8 7 1994
OIL & GAS CONSERVATION DIVISION
WICHITA, KANSAS

11-7-94

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Operator Name Universal Resources Corp. Lease Name SHERER F Well # 2
 Sec. 1 Twp. 28S Rge. 20 East West
 County Kiowa

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	Formation (Top), Depth and Datums	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Heebner	4112	-1822
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Totonto	4128	-1839
List All E.Logs Run:		Lansing	4276	-1986
		B/Kansas City	4668	-2378
		Marmaton	4678	-2388
		FT. Scott	4810	-2520
		Mississippian	4870	-2580

CASING RECORD <input checked="" 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	12 1/4"	8 5/8"	20	603'	Common	425	2% GEL 3% CC
Production	7 7/8"	5 1/2"	14	4880'	Poz Mix	75	FRA 10% Salt

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 Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
Original:	OH 4881'-4883'	1250 Gal acid	
New perfs:			
2	4872'-4878'	3000 Gal acid	

TUBING RECORD		Size <u>2 3/8"</u>	Set At <u>4881'</u>	Packer At <u>None</u>	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj. <u>10/06/94</u>			Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)		
Estimated Production Per 24 Hours	Oil <u>13</u> Bbls.	Gas <u>-</u> Mcf	Water <u>0</u> Bbls.	Gas-Oil Ratio <u>-</u>	Gravity <u>36.2</u>

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled

Production Interval: 4872'-4883'

Other (Specify) _____

