

SIDE ONE

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

Operator: License # 4742
Name: Texaco E & P, Inc.
Address P.O. Box 2700

City/State/Zip Pampa, TX 79066-2700
Purchaser: None

Operator Contact Person: Sylvia Porter
Phone (806) 669-8456

Contractor: Name: _____
License: _____

Wellsite Geologist: Phil Schreiner

Designate Type of Completion
New Well Re-Entry _____ Workover _____
Oil _____ SWD _____ SIOW _____ Temp. Abd. _____
Gas ENHR SIGW _____
Dry _____ Other (Core, WSW, Expl., Cathodic, etc.) _____

If Workover/Re-Entry: old well info as follows:
Operator: Texaco E & P Inc.

Well Name: Maud Collingwood #3
Comp. Date 4-10-93 Old Total Depth 5800'

Deepening perf. _____ Conv. to Inj/SWD _____
 Plug Back _____ PBTB _____
Commingled _____ Docket No. _____
Dual Completion _____ Docket No. _____
Other (SWD or Inj?) _____ Docket No. _____

10-3-95 10-8-95 10-27-95
Date of REENTRY Date Reached TD Completion Date

API NO. 15- 175-213050001
County Seward

_____, _____, C, SE Sec. 11 Twp. 31S Rge. 32 X E W
1320 Feet from S/N (circle one) Line of Section

1320 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 Maud Collingwood Well # 11-3
Hugoton

Producing Formation Herrington, Krider, Winfield

Elevation: Ground 2835' KB 2846'

Total Depth 2862' PBTB 2838'

Amount of Surface Pipe Set and Cemented at 1711' 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 ~~REENTRY~~ REENTRY 1-29-96
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used _____ RECEIVED STATE CORPORATION COMMISSION

Location of fluid disposal if hauled offsite: 1-23-96
JAN 25 1996

Operator Name _____

Lease Name _____ License No. _____

Quarter _____ Sec. _____ Twp. _____ S Rge. _____ 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 [Signature]

Title Operations Manager Date 1-19-96

Subscribed and sworn to before me this 22nd day of JANUARY
19 96

Notary Public Merle W. Jewell

Date Commission Expires 2-23-99

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

Operator Name Texaco E & P Inc. Lease Name Maud Collingwood Well # 11-3
 County Seward
 Sec. 11 Twp. 31S Rge. 32 East 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.) Yes No Log Formation (Top), Depth and Datums Sample

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run (Submit Copy.) Yes No

List All E.Logs Run:

Name Top Datum
 See Attached

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"	24#	1,711'	Prem. +	660	2%CC
Production	7-7/8"	4-1/2"	10.5#	2860'	Class C	425	3%D79+.2D46 2%B28+2%S1

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
1	2612' - 2620'	4500 Gal. 15% HCL	
1	2640' - 2654'		
1	2660' - 2686'		

TUBING RECORD Size 2-3/8" Set At 2704' Packer At _____ Liner Run Yes No

Date of First Resumed Production, SWD or Inj. Production Shut-in - No p. Producing Method Flowing Pumping Gas Lift Other (Explain)

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 Perforation Dually Completed Commingled Other (Specify) _____ Production Interval 2612 - 2686'

ORIGINAL

MAUD COLLINGWOOD #11-3

API #15-175-213050001

Section 11-31S-32W

Seward County, Kansas

Formation Tops and Datum

(KB Elevation = +2846.5')

<u>Formation</u>	<u>Top</u>	<u>Datum</u>
Herrington	2612'	+234.5
U. Krider	2640'	+206.5
L. Krider	2660'	+186.5

RECEIVED
STATE CORPORATION COMMISSION
JAN 21 1993
WALTERS

Schlumberger

Dowell

REMIT TO: P O BOX 201556
HOUSTON TX 77216

INVOICE

0312

INVOICE DATE

10/09/95

633668
TEXACO SERVICES INC 239382138

PAGE

INVOICE NUMBER

03-12-7657

P O BOX 2700
PAMPA

TX 79066

ORIGINAL

TYPE SERVICE

CEMENTING
CEMENT PRODUCTIO

WELL NAME / JOB SITE	STATE	COUNTY / CITY	SERVICE FROM LOCATION	SHIPPED VIA	CUSTOMER P.O. NO./REF.
H. COLLINGWOOD 3	KS	SEWARD	ULYSSES	DOWELL	HBO 192081
LOCATION / PLANT ADDRESS			DATE OF SERVICE ORDER	CUSTOMER OR AUTHORIZED REPRESENTATIVE	
SEC 11-31S-32W 433 977			10/09/95	J. ROBERTSON	

ITEM CODE	DESCRIPTION	UOM	QTY	LIST PRICE	LIST AMOUNT	% OFF	NET PRICE	NET AMOUNT	
102871030	CSNG CMNT 2501-3000' 1ST 8HR	8HR	1	1,390.0000	1,390.00	60.0	556.0000	556.00	
049102000	TRANSPORTATION CMNT TON MILE	MI	979	1.0000	979.00	60.0	.4000	391.60	
049100000	SERVICE CHG CEMENT MATL LAND	CFT	443	1.3600	602.48	60.0	.5440	240.99	
059697000	PACR TREAT ANALYSIS RECORDER	JOB	1	159.0000	159.00	60.0	63.6000	63.60	
059200002	MILEAGE, ALL OTHER EQUIPMENT	MI	47	2.9500	138.65	60.0	1.1800	55.46	
040003000	D903, CEMENT CLASS C	CFT	426	9.0600	3,859.56	60.0	3.6240	1,543.82	
045041100	D79, CHEMICAL EXTENDER	LBS	776	1.4400	1,117.44	60.0	.5760	446.98	
103368050	B28, EXPANDING CEMENT ADD	LB	282	3.3400	941.88	60.0	1.3360	376.75	
044003025	D29, CELLOPHANE FLAKES	LBS	69	1.7700	122.13	60.0	.7080	48.85	
044002050	D60, FLAC FLUID LOSS ADDITIV	LBS	85	8.6100	731.85	60.0	3.4440	292.74	
047002050	D46, ANTIFOAM	LBS	80	3.4100	272.80	60.0	1.3640	109.12	
067005100	S1, CALCIUM CHLORIDE	LBS	282	.4000	112.80	60.0	.1600	45.12	
100282000	D826, CHEMICAL WASH CW7	BBL	10	28.5000	285.00	60.0	11.4000	114.00	
050101044	SHOE CEM TYPE GUIDE 4-1/2"	EA	1	120.0000	120.00	60.0	48.0000	48.00	
053003044	INSERT DRIFICE FILL 4-1/2"	EA	1	220.0000	220.00	60.0	88.0000	88.00	
056011044	CENTR REG 4-1/2, B DIA 7-3/4"	EA	10	58.0000	580.00	60.0	23.2000	232.00	
056702044	PLUG CENG 4-1/2" TOP PLASTIC	EA	1	49.0000	49.00	60.0	19.6000	19.60	
048601000	CEMENT HEAD RENTAL	JOB	1	70.0000	70.00	100.0	.0000	N/C	
057499001	K232, THD LKG COMPOUND KIT	EA	1	28.0000	28.00	60.0	11.2000	11.20	
048020000	CEMENT PUMP-ADDL HR ON LOCAT	HR	3	220.0000	660.00	60.0	88.0000	264.00	
						12,439.59	60.2	SUB TOTAL --	4,947.83
M C	STATE TAX ON							3,755.78	184.04
M F C	LOCAL TAX ON							3,755.78	37.56
							AMOUNT DUE --	5,169.43	

WITH QUESTIONS CALL 316-356-1272
 FEDERAL TAX ID # 22-1692661
 TERMS -- NET 30 DAYS DUE ON OR BEFORE NOV 08, 1995

THANK YOU. WE APPRECIATE YOUR BUSINESS.

** WE CAN INVOICE YOU VIA EDI. CALL (713)275-8414 FOR INFORMATION **

WELL NAME AND NO. **M. Collinswood #3**
 LOCATION (LEGAL) **sec.**
 FIELD-POOL **Hugoton**
 COUNTY/PARISH **seward**
 STATE **KS**
 APL. NO.

RIG NAME: **Pat Rick wall serv.**
 WELL DATA: **4 1/2** BOTTOM TOP
 BIT SIZE **7 3/8** CSQ/Liner Size **4 1/2**
 TOTAL DEPTH **10.5** WEIGHT
 ROT CABLE FOOTAGE
 MUD TYPE GRADE **ORIGINAL**
 BHST BHCT THREAD **8RD**
 MUD DENSITY LESS FOOTAGE SHOE JOINT(S)
 MUD VISC. Disp. Capacity

NAME **Texaco**
 AND
 ADDRESS
 ZIP CODE

SPECIAL INSTRUCTIONS
Deflex 6MT, 4 1/2 L/S 95 Per customers specs

NOTE: Include Footage From Ground Level To Head In Disp. Capacity

Float	TYPE	auto fill float	TYPE
	DEPTH		DEPTH
Shoe	TYPE	CMT nose	TYPE
	DEPTH		DEPTH

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

IS CASING/TUBING SECURED? YES NO
 LIFT PRESSURE **1850** PSI CASING WEIGHT + SURFACE AREA (3.14 x R²)
 PRESSURE LIMIT **2000** PSI BUMP PLUG TO **1200** PSI
 ROTATE RPM RECIPROCATE FT No. of Centralizers **10**

JOB SCHEDULED FOR TIME: **13:00** DATE: **10-9** ARRIVE ON LOCATION TIME: **13:00** DATE: **10-9** LEFT LOCATION TIME: DATE:

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
16:18		40		X		H2O	8.3	Break lift at surf casing bot.
16:19		40		1		"	"	shut down
19:31		30	10		5.8	"	"	start H2O
19:34		270	10	10	5.8	"	"	start CW 7
19:36		330	5	20	5.8	"	"	start H2O
19:37		300	135	25	5.6	CMT	11.5	start 4D CMT
20:00		150	27	160	5.8	CMT	14.5	start TC CMT
20:07				197		H2O	8.3	shut down wash robot
20:11		100	46	X	5.8	"	"	drop plug start disp
20:18		550		35	5.8	"	"	check patch check
20:19		460		37		"	"	lower rate
20:23		1200		45	2	"	"	bump plug
20:25								bleed pres. check float

REMARKS

SYSTEM CODE	NO. OF SACKS	YIELD CU. FT/SK	COMPOSITION OF CEMENTING SYSTEMS		SLURRY MIXED	
					BBLs	DENSITY
1.	275	2.75	C' + 3% 0-79 + 0.2% 0-46 + 1/4" 0-29		136	11.5
2.						
3.	150	1.37	C' + 2% 0-28 + 2% 5-11 + 0.6% 0-60 + 0.2% 0-46		37	14.8
4.						
5.						
6.						

BREAKDOWN FLUID TYPE VOLUME DENSITY PRESSURE **1200** MAX MIN:
 HESITATION SQ. RUNNING SQ. CIRCULATION LOST YES NO Cement Circulated To Surf. YES NO Bbls
 BREAKDOWN PSI FINAL PSI DISPLACEMENT VOL. **46** Bbls TYPE OIL STORAGE BRINE WATER
 Washed Thru Perfs YES NO TO FT. MEASURED DISPLACEMENT WIRELINE GAS INJECTION WILDCAT
 PERFORATIONS CUSTOMER REPRESENTATIVE **John Robertson** DS SUPERVISOR **Pat Pearson**