

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

Operator: License # 4549

Name: ANADARKO PETROLEUM CORPORATION

Address P. O. BOX 351

City/State/Zip LIBERAL, KANSAS 67905-0351

Purchaser: NATIONAL COOPERATIVE REFINING ASSOCIATION

Operator Contact Person: SHAWN YOUNG

Phone (316) 624-6253

Contractor: Name: NORSEMAN DRILLING

License: 3779

Wellsite Geologist: _____

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:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

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

8-4-2000 8-17-2000 9-13-2000
Spud Date Date Reached TD Completion Date

API NO. 15- 067-21466

County GRANT

5' N & 5' W OF _____ E

C - SE - SE Sec. 35 Twp. 29S Rge. 35 X W

335 Feet from X (circle one) Line of Section

335 Feet from E (circle one) Line of Section

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

Lease Name HJV CROCKER "A" Well # 1

Field Name RYUS E. **KCC**

Producing Formation KANSAS CITY "A" **OCT 16 2000**

Elevation: Ground 3021.4 **CONFIDENTIAL**

Total Depth 5700 PBSD 5350

Amount of Surface Pipe Set and Cemented at 1840 Feet

Multiple Stage Cementing Collar Used? Yes No

If SE, show depth set 3238 Feet

If alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan ALT 1 5/19/01 LB
(Data must be collected from the Reserve Pit)

Chloride content 2500 ppm Fluid volume 700 bbls

Dewatering method used DRY, BACKFILL & RESTORE LOCATION.

Location of fluid disposal if hauled offsite:

RELEASED

Operator Name _____

Lease Name NOV 12 2002 License No. _____

Quarter 1 Sec. 35 Twp. 29S Rng. 35 E/W

County _____ Docket No. _____ **FROM CONFIDENTIAL**

CONSERVATION DIVISION
Wichita, Kansas

OCT 18 2000

STATE CORPORATION COMMISSION
RELEASED

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.

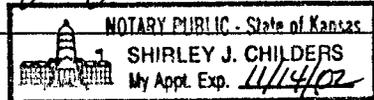
All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature L. Marc Harvey 10-16-00
L. MARC HARVEY
Title ENGINEERING TECHNICIAN III Date 10-16-00

Subscribed and sworn to before me this 16th day of October
20 00.

Notary Public Shirley J Childers

Date Commission Expires _____



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

Operator Name ANADARKO PETROLEUM CORPORATION Lease Name HJV CROCKER "A" Well # 1

Sec. 35 Twp. 29S Rge. 35 East County GRANT 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets.) Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy.) List All E.Logs Run: CBL-CCL-GR, DIL, CNL-LDT-ML, SONIC.	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datums <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Datum</th> </tr> </thead> <tbody> <tr> <td>CHASE</td> <td>2506</td> <td></td> </tr> <tr> <td>COUNCIL GROVE</td> <td>2834</td> <td></td> </tr> <tr> <td>B/HEEBNER</td> <td>4000</td> <td></td> </tr> <tr> <td>MARMATON</td> <td>4706</td> <td></td> </tr> <tr> <td>MORROW</td> <td>5283</td> <td></td> </tr> <tr> <td>STE. GENEVIVE</td> <td>5606</td> <td></td> </tr> </tbody> </table>	Name	Top	Datum	CHASE	2506		COUNCIL GROVE	2834		B/HEEBNER	4000		MARMATON	4706		MORROW	5283		STE. GENEVIVE	5606	
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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"	24.0	1840	CLASS C/ CLASS C.	450/100	3%D29, .2%D46, 1/4#/SK CF/2%D29, 1/4#/SK CF.
PRODUCTION	7-7/8"	5-1/2"	15.5	6365	15/85 POZ C/ CLASS H.	190/75	8%GEL, 10%SALT, 1/4#/SK CF/2%GEL, 10%SALT, 1/4#/SK CF.
			PORT COLLAR @	3238	15/85 POZ C/ 50/50 POZ C.	50/50	NONE/.75%FLAC, 10% SALT, 2%GEL, 1/4#/SK CF.

ADDITIONAL CEMENTING/SQUEEZE RECORD					
Purpose:	Depth		Type of Cement	#Sacks Used	Type and 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 - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated		Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) Depth		
	4	5380-98, RBP @ 5350.		ACID: 1800 GAL 15% HCL.	5380-98.
			FRAC: 29,000 GAL GEL & 46,000# 12/20 SD.	5380-98.	
6	4540-60		ACID: 2000 GAL 15% HCL.	4540-60.	
TUBING RECORD	Size	Set At	Packer At	Liner Run	
	2-7/8"	4647'		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or Inj.		Producing Method			
10/4/2000		<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 Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio TSTM	Gravity
	376	0	205		41.5

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

METHOD OF COMPLETION

Open Hole Perf. Dually Comp. Commingled
 Other (Specify) _____

Production Interval 4540-4560 DA.