

FORM MUST BE TYPED

SIDE ONE

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

API NO. 15-033-20,043-0002

Operator: License # 4549

County COMANCHE

Name: ANADARKO PETROLEUM CORPORATION

- C - NW - NE Sec. 25 Twp. 31S Rge. 18 X E W

Address P.O. BOX 351

4620 Feet from S(circle one) Line of Section

City/State/Zip LIBERAL, KANSAS 67905-0351

3305 Feet from E(circle one) Line of Section

Purchaser: TEXACO TRADING & TRANSPORTATION

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

Operator Contact Person: J. L. ASHTON

Lease Name EMERICK "B" Well # 1

Phone (316) 624-6253

Field Name WILMORE

Contractor: Name: NA

Producing Formation MISSISSIPPIAN

License: NA

Elevation: Ground 2146' KB --

Wellsite Geologist: NA

Total Depth 5280' PBDT 5236'

Designate Type of Completion  
     New Well      Re-Entry   X   Workover

Amount of Surface Pipe Set and Cemented at 1079 Feet

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

Multiple Stage Cementing Collar Used?      Yes   X   No

If Workover:

If yes, show depth set      -- Feet

Operator: ANADARKO PETROLEUM CORPORATION

If Alternate II completion, cement circulated from     

Well Name: EMERICK "B" NO 1

feet depth to      w/      sx cmt.

Comp. Date 1/13/69 Old Total Depth 5280'

Drilling Fluid Management Plan REWORK JH 3-1-96  
(Data must be collected from the Reserve Pit)  
NOT APPLICABLE

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

Chloride content      ppm Fluid volume      bbls

Dewatering method used     

Location of fluid disposal if hauled offsite:     

Operator Name     

Lease Name      License #     

     Quarter      Sec.      Twp.      S Rng.      E/W

County      Docket No.     

1/09/96 NA 1/22/96  
~~SPUD~~ Date OF START Date Reached TD Completion Date OF  
OF WORKOVER WORKOVER

RECEIVED  
KANSAS CORP COM  
1996 MAR -1 A 11:33

**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 *John M. Dolan*  
JOHN M. DOLAN

Title SENIOR TECHNICAL ASSISTANT Date 2/20/96

Subscribed and sworn to before me this 20<sup>th</sup> day of February 19 96.

Notary Public *Freda L. Hinz*

Date Commission Expires     

**FREDA L. HINZ**  
Notary Public - State of Kansas  
My Appt Expires 5-15-99

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

COPY 2-31-82

**SIDE TWO**

Operator Name ANADARKO PETROLEUM CORPORATION Lease Name EMERICK "B" Well # 1  
 Sec. 25 Twp. 31S Rge. 18  East  West  
 County SEWARD

**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  Yes  No  
 (Attach Additional Sheets.)  
 Samples Sent to Geological Survey  Yes  No  
 Cores Taken  Yes  No  
 Electric Log Run  Yes  No  
 (Submit Copy.)  
 List All E.Logs Run:

Log  Sample  
 Formation (Top), Depth and Datum  
 Name Top Datum  
 (SEE ORIGINAL DRILLERS LOG - ATTACHED)

<b>CASING RECORD</b> <input type="checkbox"/> New <input type="checkbox"/> Used <b>** ORIGINAL COMPLETION</b> 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	1079'	POZMIX/COMMON	400/400	4%GEL2%CC/3%HA-5
** PRODUCTION	7-7/8 "	4-1/2"	10.5	5279'	SALT SAT POZ	125	.5% CFR-2

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	
2	PERFORATE 5132-5158, 5164-5180 (ADDITIONAL PERFS TO MISSISSIPPI)	ACIDIZE W/4090 GAL 15% FEHCL	5116-5180 OA

TUBING RECORD		Size	Set At	Packer At	Liner Run		
		2-3/8"	5165'	--	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Date of First, Resumed Production, SWD or Inj. 1/16/96				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	Bbls.	Gas	Mcf	Water	Bbls.	Gas-Oil Ratio
	6		0		16		0
							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) \_\_\_\_\_

Production Interval 5116-5180 O.A.