FORM MUST BE TYPED SIDE	E ONE
STATE CORPORATION COMMISSION OF KANSAS OIL & GAS CONSERVATION DIVISION	API NO. 15189-22348
WELL COMPLETION FORM	CountySTEVENS
ACO-1 WELL HISTORY	CountrySTEVENS
DESCRIPTION OF WELL AND FEASE	<u>SW - SW - NE</u> Sec. <u>34</u> Twp. <u>31S</u> Rge. <u>39</u> <u>X</u>
Operator: License # 4549 CUNFIDENTIAL	Feet from (N) X (circle one) Line of Section
Name:ANADARKO PETROLEUM CORPORATION	Feet from(E/X (circle one) Line of Section
Address P. O. BOX 351	Footages Calculated from Nearest Outside Section Corner: (NE) SE, NW or SW (circle one)
City/State/Zip LIBERAL, KANSAS 67905-0351	Lease Name HITTLE "A" FCC 6
	Field Name KINSLER EAST
Purchaser: ANADARKO ENERGY SERVICES	NOV 5 2000
Operator Contact Person:SHAWN_YOUNG	Producing Formation MORROW
Speciation Solitable For Solita	Elevation: Ground 3220 CONFIDENTIAL 3232
Phone (<u>316</u>) <u>624-6253</u>	
Contractor: Name:BIG "A" DRILLING	Total Depth 6200 PBTD 6060
CONTractor: Name: Bit "A" DRILLING S	Amagint of Surface Pipe Set and Cemented atFeet
License:	OIS
Wellsite Geologist:	Mu荃iale Stage Cementing Collar Used?X Yes No
≥§ 0	I 🕳 🕰, show depth set Feet
Designate Type of CompletionX_New WellRe-EntryWorkove	If is in the second completion, cement circulated from
OilSWDSIOWTemp. Abd. "	fe g depth to w/ sx cmt.
_X_GasENHRSIGW	3
DryOther (Core, WSW, Expl., Cathodi etc)	Drilling Fluid Management Plan RLTI 4/3/0/ SG
If Workover:	(Data must be collected from the Reserve Pit)
Operator:	Chloride content1000ppm Fluid volume700bbl
Well Name:	Dewatering method usedDRY_BACKFILL & RESTORE LOCATION.
Comp. DateOld Total Depth	Location of fluid disposal Financed offsite:

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.

Operator Name _

Lease Name

County .

_ Conv. to Inj/SWD

10-27-2000

Completion Date

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.

214	el e		
Signature J. Marc /	anung		
V. MARC HARVE	γ ' ()	,	
Title ENGINEERING TECH	NICIAN III	Date//>	16-2000
Subscribed and sworn to bef 20 00.	A A	day of Nover	nuer
Hotaly rubtre	71 0 0	<u> </u>	
Date Commission Expires	A NOTARY I	PUBLIC - State of Kansas	
		LEY J. CHILDERS	
	SHEURE My Apr	pt. Exp. 1//4/02	

Deepening _

Plug Back _

Commingled

9-1-2000

Spud Date

_ Dual Completion

_ Other (SWD or Inj?) Docket No.

_Re~perf. _

9-13-2000

Date Reached TD

Docket No.

Docket No.

F V Lette	C. OFFICE USE ONL r of Confidential ine Log Received gist Report Recei	ity Attached
KCC KGS	Distribution SWD/Rep Plug	NGPA Other (Specify)

_ Docket No_

Form ACO-1 (7-01)

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resident of the second	*				SIDE TWO					
Operator NameAN	ADARKO PET	ROLEUM CO	RPORATION		Lease N	Name <u>HITTLE</u>	"A"	Wel	l #	. 6
	. 1	г]· East							
Sec. <u>34</u> Twp. <u>3</u>	1 <u>S_</u> Rge	_39	_		Country	STEVENS	.,			······································
INSTRUCTIONS: Shinterval tested, hydrostatic pressu if more space is n	res, botto	m hole te	mperature,	formations owing ar fluid re	ons penetrated nd shut-in pre- ecovery, and i	Detail al essures, whet flow rates if	l cores. Repo her shut-in pi gas to surface	ort all dril ressure rea during test	ll stem to ached sta t. Attacl	ests giving atic level, n extra sheet
Drill Stem Tests T (Attach Additio			Yes 🗵	No	⊠ L	og Format	ion (Top), Dept	h and Datum	s 🗆	Sample
Samples Sent to Ge	ological S	urvey 🛛	Yes 🗌	No	Name	1 × 1 1	Тор	Ε	atum	
Cores Taken			Yes 🛛	No	CHASE COUNCIL O		2364 2682			
Electric Log Run (Submit Copy.)		×	Yes 🗌	No	B/HEEBNER MARMATON MORROW STE. GENE		3896 4644 5356 5950			
List All E.Logs Ru	n: CBL-CCL BHC SON		CNL-LDT, MI	-,	ST. LOUIS		6040			
							Charles Service Service Service			
			CASING F	RECORD	No.	□ Nood				
	Re	port all	strings set	-conduct	⊠ New tor, surface,	∪ Used intermediate,	production, e	c.		
Purpose of Strin	- ;	Hole lled	Size Cas Set (In (- 1	Weight Lbs./Ft.	Setting Depth	Type of Cement	# Sacks Used	Add	and Percent ditives
SURFACE	12-	1/4"	8-5/8"		24.0	1720	CLASS H/ CLASS H.	360/100	2CC, ¼#/9	
PRODUCTION	7-	7/8"	5-1/2"		15.5	6190	15/85 POZ C/ CLASS H.	90/240		#/SK CF/ ,10%A10,6% #/SK CF.
		*		F	PORT COLLAR @	2997	CLASS C/ 15/85 POZ.	50/50		10% SALT, 'SK CF/SAME.
	ADDITI	ONAL CEME	NTING/SQUEE	ZE RECOR	RD					
Purpose:		pth Bottom	Type of Cer	nent	#Sacks Used	Type and Percent Additives				
Perforate Protect Cas								•		
Plug Back T										
	DEDEO	PATION DE	COPD - Brid	ne Plums	Set/Type	Acid Er	acture Shot ('ement Salves	ze Pecoro	1
Shots Per Foot Specify Footage of Each Interval Perforat					Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) Depth					
4	6067-6080, CIBP a 6060.					ACID: 1400 GAL 15% HCL. 6067-6080				7-6080
6 5433- 6 448.				ACID: 1500 GAL 15% ACETIC. 5433-54			3-5448			
	,	j								
TUBING RECORD	Size		Set At		Packer At	Liner Run	1			
	2-3/8		54731				☐ Yes 🗵	No	· · · · · · · · · · · · · · · · · · ·	
Date of First, R	esumed Pro 0/12/2000	duction,	SWD or Inj.	Produc	cing Method] Flowing 🗵	Pumping 🗌	Gas Lift	☐ Other	(Explain)
Estimated Produc Per 24 Hours	tion	Oil	Bbls.	Gas	Mcf W	Vater Bbl 37	s. Gas-	Dil Ratio		Gravity
Disposition of Ga	is:				METHOD OF	COMPLETION			Product	ion Interval
☐ Vented ☒ So		sed on Le		☐ Oper] Commingle		
•		-		☐ Othe	r (Specify) _				5	433-5448