FORM MUST BE TYPED

SIDE ONE

15-175-20043-0002

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: TEXACO TRADING AND TRANSPORTING, INC.

Operator Contact Person: SHAWN D. YOUNG

Phone (316) 624-6253

Contractor: Name: NA

License: NA

Wellsite Geologist: NA

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

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

If Workover:

Operator: ANADARKO PETROLEUM CORPORATION

Well Name: GANO A-2

Comp. Date 12-10-69 Old Total Depth 6020

____ Deepening ____ Re-perf. ____ Conv. to Inj/SWD
X Plug Back 5968 PBTD
____ Commingled Docket No. ____
____ Dual Completion Docket No. ____
____ Other (SWD or Inj?) Docket No. ____

5-26-99 | -- | 6-17-99
Spud Date | Date Reached TD | Completion Date

API NO. 15- NA(SPUD 11-9-68)

County SEWARD

____ - ____ - SW - SW Sec. 35 Twp. 32 Rge. 31 ____ E X W

660 Feet from S/X (circle one) Line of Section

660 Feet from X/W (circle one) Line of Section

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

Lease Name GANO "A" Well # 2

Field Name MASSONI

Producing Formation ST. LOUIS

Elevation: Ground 2773.7 KB --

Total Depth 6020 PBTD 5968

Amount of Surface Pipe Set and Cemented at 1619 Feet

Multiple Stage Cementing Collar Used? ____ Yes X No

If yes, show depth set ____ Feet

If Alternate II completion, cement circulated from ____

feet depth to ____ w/ ____ sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
NOT APPLICABLE

Chloride content ____ ppm Fluid volume ____ bbls

Dewatering method used ____

Location of fluid disposal if hauled offsite:

Operator Name ____

Lease Name ____ License No. ____

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

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 [signature]
SHAWN D. YOUNG
Title DIVISION PRODUCTION ENGINEER Date 7/14/99

Subscribed and sworn to before me this 14th day of July 19 99.

ary Public [signature]

Date Commission Expires ____

NOTARY PUBLIC - State of Kansas
SHIRLEY J. CHILDERS
My Appt. Exp. 11/14/02

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)
IJ

Form ACO-1 (7-91)