

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form must be Typed

ORIGINAL

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 4549
Name: Anadarko Petroleum Corporation
Address 1201 Lake Robbins Drive
City/State/Zip The Woodlands, TX 77380
Purchaser: NCRA
Operator Contact Person: Jim LaFevers
Phone (832-) 636-3127
Contractor: Name: Murfin Drilling
License: 30606
Wellsite Geologist: _____
Designate Type of Completion

API NO. 15- 129-21704-00-00
County Morton
____ - SE - SE - NW Sec. 3 Twp. 33 S. R. 40 ☐ E ☒ W
2309.8 Feet from SW (circle one) Line of Section
2618.4 Feet from EW (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name SERU Well # 9-6
Field Name Stirrup
Producing Formation Morrow
Elevation: Ground 3219.5 Kelley Bushing 3230.5
Total Depth 5350 Plug Back Total Depth _____
Amount of Surface Pipe Set and Cemented at 1485 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.

☒ New Well _____ Re-Entry _____ Workover
☒ Oil _____ SWD _____ SIOW _____ Temp. Abd.
_____ Gas ☒ ENHR _____ SIGW
_____ Dry _____ Other (Core, WSW, Expl., Cathodic, etc.)
If Workover/Reentry: Old Well Info as follows:

Operator: _____
Well Name: _____
Original Comp. Date _____ Original Total Depth _____
_____ Deepening _____ Re-perf. _____ Conv. to Enhr./SWD
_____ Plug Back _____ Plug Back Total Depth _____
_____ Commingled _____ Docket No. _____
_____ Dual Completion _____ Docket No. _____
☒ Other (SWD or Enhr?) Docket No. 03-CONS-203-CUNI
7/2/03 7/10/03 12/24/03
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content 700 ppm Fluid volume 500 bbls
Dewatering method used evaporation
Location of fluid disposal if hauled offsite: _____
Operator Name _____
Lease Name _____ License **RECEIVED**
Quarter _____ Sec. _____ Twp. _____ S R. **KANSAS CORPORATION COMMISSION**
County _____ Docket No. **JAN 12 2004**
CONSERVATION DIVISION
WICHITA, KS

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 Jim LaFevers
Title Environmental & Regulatory Affairs Date 1/9/04

Subscribed and sworn to before me this 9th day of January,
20 04
BERTHA COSTON
NOTARY PUBLIC, STATE OF KANSAS
MY COMMISSION EXPIRES
DEC 3, 2005 - 3-05

KCC Office Use ONLY	
<input checked="" type="checkbox"/> Letter of Confidentiality Attached	<input checked="" type="checkbox"/> Date: <u>01-13-04</u>
<input type="checkbox"/> Wireline Log Received	
<input type="checkbox"/> Geologist Report Received	
<input type="checkbox"/> UIC Distribution	

Side Two

Operator Name Anadarko Petroleum Corporation Lease Name SERU Well # 9-6

Sec. 3 Twp. 33 S.R. 40 ☐ East ☒ West County Morton

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 all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datums		<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum	
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Chase	2183	1047	
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Heebner	3652	-422	
List All E.Logs Run:		Marmaton	4432	-1202	
CNLD/GR Micro/GR AI/SP/LC/GR		Morrow D	5194	-1964	

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	22.18	1485	P+MC+P	545	see cmt rpt
Production	7-7/8	5-1/2	15.5	5350	50/50 POZ	125	see cmt rpt

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
4	5196' - 5230'	3500 gal 15% MCA	5196' -
		1324 bbl Delta140XL Gel	5230'
		107,000# 16/30 sd	

TUBING RECORD		Size 2-7/8	Set At 5151	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. 12/24/03			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. 1	Gas Mcf 20	Water Bbls. 4	Gas-Oil Ratio 20000	Gravity

Disposition of Gas: ☐ Vented ☒ Sold ☐ Used on Lease ☐ Open Hole ☒ Perforation ☐ Dually Comp. ☐ Commingled 5196-5230

(If vented, submit ACO-18.) ☐ Other (Specify) _____