COPY

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

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

RECEIVED
STATE CORPORATION COMMISSION
JAN 14 1999
CONSERVATION DIVISION
Wichita, Kansas

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: BOLES F-3

Comp. Date 3-7-98 Old Total Depth 6750

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

10-27-98 -- 11-2-98
Spud Date Date Reached TD Completion Date

API NO. 15- 175-21708-0002

County SEWARD

____ E
____ - ____ - NE - NW Sec. 2 Twp. 35 Rge. 34 _X_ W

660 Feet from X(N) (circle one) Line of Section

1980 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 BOLES "F" Well # 3

Field Name ARCHER

Producing Formation ST. LOUIS

Elevation: Ground 2896.6 KB --

Total Depth 6750 PBTD 6668

Amount of Surface Pipe Set and Cemented at 1622 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 Re-work, 1-28-99 U.C.
(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 Shawn D. Young
SHAWN D. YOUNG
Title DIVISION PRODUCTION ENGINEER Date 1/11/99

Subscribed and sworn to before me this 11th day of January 1999.

Notary Public Shirley J. Childers

Date Commission Expires ____

NOTARY PUBLIC - State of Kansas
SHIRLEY J. CHILDERS
My Appt. Exp. 4/14/02

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)
IS

Form ACO-1 (7-91)

Computer Inventoried

SIDE TWO

Operator Name ANADARKO PETROLEUM CORPORATION Lease Name BOLES "F" Well # 3

Sec. 2 Twp. 35 Rge. 34 ☐ 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 (Attach Additional Sheets.) ☐ Yes ☒ No

Samples Sent to Geological Survey ☐ Yes ☒ No

Cores Taken ☐ Yes ☒ No

Electric Log Run (Submit Copy.) ☐ Yes ☒ No

List All E.Logs Run:

☒ Log Formation (Top), Depth and Datums ☐ Sample

Name Top Datum

SEE ATTACHED ORIGINAL ACO-1.

** Original Completion CASING RECORD

☒ New ☐ 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"	23.0	1622	CLASS C	320/ 100	3%CC, ¼#SK CELLFLK/ 3%CC, ¼#SK CELLFLK, .2% D46, 3# D79.
** PRODUCTION	7-7/8"	5-1/2"	15.5	6750	50/50 POZ	25/ 90	.75% HALAD 322, 10% SALT, ¼#SK FLC/ SAME

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth Top	Depth Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate					
___ Protect Casing					
___ Plug Back TD					
___ 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	6531-6538	ACID W/ 1750 GAL 20% HCl	6531-6538

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2-7/8"	6565'		☐ Yes ☒ No

Date of First, Resumed Production, SWD or Inj. RESUMED: 10-31-98

Producing Method ☐ Flowing ☒ Pumping ☐ Gas Lift ☐ Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	69	24	90	347.826087	

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

6531-3538

6542-6568