

**WELL COMPLETION FORM**  
**WELL HISTORY - DESCRIPTION OF WELL & LEASE**

**ORIGINAL**

Operator: License # 4549  
Name: Anadarko Petroleum Corporation  
Address 1201 Lake Robbins Drive  
City/State/Zip The Woodlands, TX 77380  
Purchaser: \_\_\_\_\_  
Operator Contact Person: Jerry N. Blossom  
Phone ( 832 ) 636-3128  
Contractor: Name: Murfin Drilling Co., Inc.  
License: 30606

API NO. 15- 067-21567 - 00-00  
County Grant  
S/2 NW - NE - NE Sec. 13 Twp. 28 S. R. 37  E  W  
478 N Feet from S/N (circle one) Line of Section  
943 E Feet from E/W (circle one) Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW SW  
Lease Name Hammer Well # A-1  
Field Name \_\_\_\_\_

Wellsite Geologist: \_\_\_\_\_  
Designate Type of Completion  
**RECEIVED**  
**KANSAS CORPORATION COMMISSION**  
**APR 09 2004**  
**CONSERVATION DIVISION**  
**WICHITA, KS**  
 New Well  Re-Entry  Workover  
 Oil  SWD  SLOW  Temp. Abd.  
 Gas  ENHR  SIGW  
 Dry  Other (Core, WSW, Expl., Cathodic, etc.)

Producing Formation N/A  
Elevation: Ground 3020 Kelley Bushing 3027  
Total Depth 5685' Plug Back Total Depth \_\_\_\_\_  
Amount of Surface Pipe Set and Cemented at 1773' 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.

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. \_\_\_\_\_  
11-13-2003 11-20-03 11-21-2003  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date Recompletion Date

Drilling Fluid Management Plan ALT# P-1A KGR 5/29/07  
(Data must be collected from the Reserve Pit)  
Chloride content 2200 ppm Fluid volume 700 bbls  
Dewatering method used Evaporation  
Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name \_\_\_\_\_  
Lease Name \_\_\_\_\_ License No. \_\_\_\_\_  
Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  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 Jerry N. Blossom  
Title Staff, Envir. & Regulatory Analyst Date 4-8-04  
Subscribed and sworn to before me this 8th day of April  
**BERTHA COSTON**  
**NOTARY PUBLIC**  
**STATE OF TEXAS**  
Bertha Coston  
MY COMM. EXP. DEC. 3, 2005  
Date Commission Expires \_\_\_\_\_

**KCC Office Use ONLY**  
NO Letter of Confidentiality Attached  
If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution

Operator Name Anadarko Petroleum Corporation

Lease Name Hammer

Well # A-1

Sec. **ORIGINAL** 4  East  West

County Grant

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 checked="" type="checkbox"/> Log	Formation (Top), Depth and Datums		<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum	
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Chase</b>	<b>2395</b>	<b>625</b>	
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>Marmaton</b>	<b>4452</b>	<b>-1432</b>	
List All E.Logs Run:		<b>Morrow</b>	<b>4980</b>	<b>-1960</b>	
<b>Gamma, cement volume, Array Induction/Sp/GR, Neutron/Gamma Ray</b>		<b>St. Gen</b>	<b>5266</b>	<b>-2246</b>	
		<b>St. Louis</b>	<b>5384</b>	<b>-2364</b>	

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
<b>Surface casing</b>	<b>12-1/4"</b>	<b>8-5/8"</b>	<b>22.81</b>	<b>1773'</b>	<b>Premium</b>	<b>555</b>	<b>2%CaCl</b>

ADDITIONAL CEMENTING/SQUEEZE RECORD				
Purpose	Depth Top 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

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.	Producing Method				
<b>Dry Hole</b>	<input type="checkbox"/> Flowing <input 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	Gravity

Disposition of Gas:  Vented  Sold  Used on Lease  Open Hole  Perforation  Dually Comp.  Commingled

(If vented, submit ACO-18.)  Other (Specify) \_\_\_\_\_

METHOD OF COMPLETION \_\_\_\_\_

Production Interval \_\_\_\_\_