

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 701 S TAYLOR, STE 400

City/State/Zip AMARILLO, TX 79101

Purchaser: ANADARKO ENERGY SERVICES

Operator Contact Person: CRAIG R. WALTERS, P.E.

Phone (806) 457-4600

Contractor: Name: NA

License: NA

Wellsite Geologist: NA

Designate Type of Completion
 New Well Re-Entry Workover

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

If Workover:

Operator: ANADARKO PETROLEUM CORPORATION

Well Name: SHAFFER D-2

Comp. Date 7-10-2000 Old Total Depth 6400

Deepening Re-perf. Conv. to Inj.
 Plug Back 6324 PBD
 Commingled Docket No. PENDING
 Dual Completion Docket No.
 Other (SWD or Inj?) Docket No.

12-09-2000 -- 12-22-2000
Spud Date Date Reached TD Completion Date

API NO. 15- 189~~2557~~

County STEVENS

70 N & 80 W OF E

5 NE - SW Sec. 30 Twp. 32 Rge. 38 X W

2050 ^{NW} 2137 Feet from S/X (circle one) Line of Section

1900 3394 Feet from X/W (circle one) Line of Section

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

Lease Name SHAFFER "D" Well # 2

Field Name CIMARRON GAP

Producing Formation MORROW, ST. LOUIS

Elevation: Ground 3202 KB --

Total Depth 6400 PBD 6324

Amount of Surface Pipe Set and Cemented at 1670 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set 3075 Feet

If Alternate II completion, cement circulated from

feet depth to w/ sx cmt.

Drilling Fluid Management Plan OWWO KQR 12/21/07
(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.

STATE CORPORATION COMMISSION
RECEIVED

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.

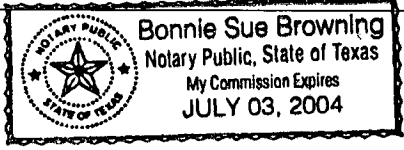
All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature Craig R. Walters
Title DIVISION PRODUCTION ENGINEER Date 3/20/2001

Subscribed and sworn to before me this 21 day of March
01

Notary Public Bonnie Sue Browning

Date Commission Expires



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)

Operator Name ANADARKO PETROLEUM CORPORATION Lease Name SHAFFER "D" Well # 2*

Sec. 30 Twp. 32 Rge. 38 East County STEVENS
 West

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 Yes No
 (Attach Additional Sheets.)
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No
 Electric Log Run Yes No
 (Submit Copy.)
 List All E.Logs Run:

Log Formation (Top), Depth and Datums Sample
 Name Top Datum
 SEE ATTACHED ORIGINAL ACO-1

** Original Completion 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"	24.0	1670		520	
** PRODUCTION	7-7/8"	5-1/2"	15.5	6385		565	
** CONDUCTOR	17-1/2"	13-3/8"	DV TOOL @ 40.0	5308 547		50 290	

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose: ___ Perforate ___ Protect Casing ___ Plug Back TD ___ Plug Off Zone	Depth		Type of Cement	#Sacks Used	Type and Percent Additives
	Top	Bottom			

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	
		DO CIBP TO 6324		

TUBING RECORD	Size 2-7/8"	Set At 6259	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---------------	----------------	----------------	-----------	--

Date of First, Resumed Production, SWD or Inj. RESUMED: 12-15-2000 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil 59 Bbls.	Gas 0 Mcf	Water 180 Bbls.	Gas-Oil Ratio NA	Gravity
-----------------------------------	--------------	-----------	-----------------	------------------	---------

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.) METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled 5886-6260 OA
 Other (Specify) _____

STATE CORPORATION COMMISSION OF KANSAS
 OIL & GAS CONSERVATION DIVISION
 WELL COMPLETION FORM
 ACO-1 WELL HISTORY
 DESCRIPTION OF WELL AND LEASE

API NO. 15-189-22337
 County STEVENS
 70' N & 80' W OF:
 - C - NE - SW Sec. 30 Twp. 32S Rge. 38 X W

ORIGINAL COPY

Operator: License # 4549
 Name: ANADARKO PETROLEUM CORPORATION
 Address P. O. BOX 351
 City/State/Zip LIBERAL, KANSAS 67905-0351
 Purchaser: NATIONAL COOPERATIVE REFINING ASSOCIATION
 Operator Contact Person: SHAWN YOUNG
 Phone (316) 624-6253
 Contractor: Name: BIG "A" DRILLING
 License: 31572

Wellsite Geologist: _____
 Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover:
 Operator: _____
 Well Name: _____
 Comp. Date _____ Old Total Depth _____
 Deepening Re-perf. Conv. to Inj/SWD
 Plug Back _____ PBDT
 Commingled _____ Docket No. _____
 Dual Completion _____ Docket No. _____
 Other (SWD or Inj?) _____ Docket No. _____
5/9/2000 5/31/2000 7/10/2000
 Spud Date Date Reached TD Completion Date

RECEIVED STATE CORPORATION COMMISSION

2050 Feet from X(5) (circle one) Line of Section
1900 Feet from X(10) (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE, SE, NW or (SW) (circle one)
 Lease Name SHAFFER "D" Well # 2
 Field Name WILDCAT
 Producing Formation MORROW
 Elevation: Ground 3202 KB _____
 Total Depth 6400 PBDT 6000
 Amount of Surface Pipe Set and Cemented at 1670 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set 3075 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)
 Chloride content 4200 ppm Fluid volume 700 bbls
 Dewatering method used DRY, BACKFILL & RESTORE LOCATION
 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 L. Marc Harvey
 Title DRILLING TECHNICAL ASSISTANT Date 8-7-2000
 Subscribed and sworn to before me this 7th day of August
 2000.
 Notary Public Shirley J. Childers
 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)

Operator Name ANADARKO PETROLEUM CORPORATION Lease Name SHAFER Well # 2

Sec. 30 Twp. 32S Rge. 38
 East
 West

County STEVENS

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.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run (Submit Copy.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No List All E.Logs Run: CBL-CCL-GR, DIL, CNL-LDT, ML, LS SONIC.	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datums <input type="checkbox"/> Sample <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:60%;">Name</th> <th style="width:20%;">Top</th> <th style="width:20%;">Datum</th> </tr> </thead> <tbody> <tr><td>CHASE</td><td>2434</td><td></td></tr> <tr><td>COUNCIL GROVE</td><td>2761</td><td></td></tr> <tr><td>B/HHEEBNER</td><td>3988</td><td></td></tr> <tr><td>MARMATON</td><td>4756</td><td></td></tr> <tr><td>MORROW</td><td>5524</td><td></td></tr> <tr><td>CHESTER</td><td>6028</td><td></td></tr> <tr><td>STE. GENEVIEVE</td><td>6144</td><td></td></tr> <tr><td>ST. LOUIS</td><td>6226</td><td></td></tr> </tbody> </table>	Name	Top	Datum	CHASE	2434		COUNCIL GROVE	2761		B/HHEEBNER	3988		MARMATON	4756		MORROW	5524		CHESTER	6028		STE. GENEVIEVE	6144		ST. LOUIS	6226	
Name	Top	Datum																										
CHASE	2434																											
COUNCIL GROVE	2761																											
B/HHEEBNER	3988																											
MARMATON	4756																											
MORROW	5524																											
CHESTER	6028																											
STE. GENEVIEVE	6144																											
ST. LOUIS	6226																											

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
CONDUCTOR	17-1/2"	13-3/8"	40.0	547	CLASS C/C.	190/100	3D29, 2D46, .5D29/2S1, .25D29.
SURFACE	12-1/4"	8-5/8"	23.0	1670	CLASS C/C.	420/100	3D29, 2D46, .5D29/2S1, .25D29.
PRODUCTION	7-7/8"	5-1/2"	15.5 DV TOOL @	6385 5308	50/50 POZ/ P+ MIDCON/ P+ MIDCON	275/ 290/ 50	1) 10% SALT, 4% CALSEAL .75% H322, 1/4#/SK CF/ 2) 2CC, 1/2#/SK CF/ 2CC, 1/4#/SK CF.

ADDITIONAL CEMENTING/SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing	1670-1852	CLASS C	100/50	3% D79, .2% D46/3% S1.
___ Plug Back TD				
<u>X</u> Plug Off Zone	1670-2088	CLASS C	100/50	NEAT/3% CC.

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	6250-60, CTBP @ 6240.	
4	6005-12, CMT RET @ 6000.	
6	5886-96.	ACID: 1000 GAL 7-1/5% HCL. 5886-96.
		FRAC: 25000 GAL GEL & 72000# 16/30 SD. 5886-96.

TUBING RECORD	Size 2 7/8"	Set At 5896	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj. 7/13/2000		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 50 Bbls.	Gas 59 Mcf	Water 93 Bbls.	Gas-Oil Ratio 1180 Gravity 42.5

Disposition of Gas: <input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, submit ACO-18.)	METHOD OF COMPLETION <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	Production Interval <u>5886-96.</u>
---	--	-------------------------------------