

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: Anadarko Energy Services Company

Operator Contact Person: Diana Smart

Phone (832) 636-8380

Contractor: Name: Best Well Service, Inc.

License: 32564

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/Reentry: Old Well Info as follows:

Operator: Anadarko Production Company

Well Name: Lightcap A 1

Original Comp. Date 05/30/1973 Original Total Depth 3050'

Deepening Re-perf. Conv. to Enhr./SWD

Plug Back Plug Back Total Depth

Commingled Docket No. C-164

Dual Completion Docket No. _____

Other (SWD or Enhr?) Docket No. _____

11/07/08 11/15/08

Spud Date or Date Reached TD Completion Date or Recompletion Date

API NO. 15- 189-20139-0001

County Stevens

- - C - SE Sec. 27 Twp. 31 S. R. 37 E W

1390 FSL Feet from S/N (circle one) Line of Section

1250 FEL Feet from E/W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name Lightcap A Well # 1

Field Name Hugoton/Panama

Producing Formation Chase/Council Grove

Elevation: Ground 3094' Kelley Bushing _____

Total Depth 2960' Plug Back Total Depth 2955'

Amount of Surface Pipe Set and Cemented at 588' 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.

Drilling Fluid Management Plan w/o Dig 7/8/09
(Data must be collected from the Reserve Pit)

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. 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.

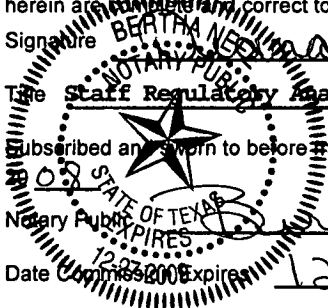
All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are true and correct to the best of my knowledge.

Signature Diana Smart
Title Staff Regulatory Analyst Date 12/31/2008

Subscribed and sworn to before me this 31st day of December.

Notary Public Bertha Neefe
Date Commission Expires 12-27-09

KCC Office Use ONLY
 Letter of Confidentiality Attached
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
Jim H (1/13)



JAN 09 2009

KANSAS CORPORATION COMMISSION

Operator Name Anadarko Petroleum Corporation Lease Name Light cap A Well # 1

Sec. 27 Twp. 31 S.R. 37 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 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			
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
List All E.Logs Run:				
No new logs				

CASING RECORD <input 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"	23	588'		500	
Production	7-7/8"	5-1/2"	15.5	2960'		600	

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
2	2852'-2941' existing perms	Acidize w/1950 gals 15% HCL acid	2552-2746
2	2552'-2556', 2586'-2592', 2634'-2640',	Frac w/116,667 gals X-Link	2552-2746
2	2684'-2694' & 2734'-2746' New perms	borate & 298,740# 12/20 sand.	

TUBING RECORD	Size 2-3/8"	Set At 2845'	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.	Producing Method			
11/15/2008	<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.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity
	0	138	24	N/A N/A

Disposition of Gas: Vented Sold Used on Lease Open Hole Perforation Dually Comp. Commingled 2552'-2941'

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