

15-175-21744-0000

FORM MUST BE TYPED

SIDE ONE

ORIGINAL

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

API NO. 15- 175-21744-0000
County SEWARD
130'S & 130' W OF _____ E
_____ - _____ - NE - SW Sec. 9 Twp. 33 Rge. 33 X W

Operator: License # 4549

860 Feet from X (S) (circle one) Line of Section

Name: ANADARKO PETROLEUM CORPORATION

860 Feet from X (W) (circle one) Line of Section

Address P. O. BOX 351

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

City/State/Zip LIBERAL, KANSAS 67905-0351

Lease Name HOLIDAY "A" Well # 1

Purchaser: NONE-D&A

Field Name EVALYN-CONDIT

Operator Contact Person: DAVID W. KAPPLE

Producing Formation NONE

Phone (316) 624-6253

Elevation: Ground 2833.0 KB _____

Contractor: Name: CHEYENNE DRILLING

Total Depth 6300 PBDT 0

License: 5382

Amount of Surface Pipe Set and Cemented at 1591 Feet

Wellsite Geologist: _____

Multiple Stage Cementing Collar Used? _____ Yes X No

Designate Type of Completion

If yes, show depth set _____ Feet

X New Well _____ Re-Entry _____ Workover

If Alternate II completion, cement circulated from _____

_____ Oil _____ SWD _____ SIOW _____ Temp. Abd.

feet depth to _____ w/ _____ sx cmt.

_____ Gas _____ ENHR _____ SIGW

X Dry _____ Other (Core, WSW, Expl., Cathodic, etc)

Drilling Fluid Management Plan D+R, 9-8-98 U.C.
(Data must be collected from the Reserve Pit)

If Workover:

Chloride content 800 ppm Fluid volume 700 bbls

Operator: _____

Dewatering method used DRY, BACKFILL & RESTORE LOCATION.

Well Name: _____

Location of fluid disposal if hauled offsite: _____

Comp. Date _____ Old Total Depth _____

Operator Name _____

_____ Deepening _____ Re-perf. _____ Conv. to Inj/SWD

_____ Plug Back _____ PBDT

_____ Commingled _____ Docket No. _____

_____ Dual Completion _____ Docket No. _____

_____ Other (SWD or Inj?) _____ Docket No. _____

Lease Name _____ License No. _____

8-7-98 8-16-98 8-17-98

_____ Quarter Sec. _____ Twp. _____ S Rng. _____ E/W

Spud Date Date Reached TD Completion Date

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 09/02/98

Subscribed and sworn to before me this 2nd day of September 19 98.

Notary Public Freda L. Hinz

Date Commission Expires _____

K.C.C. OFFICE USE ONLY		
F	Letter of Confidentiality Attached	
C	<input checked="" type="checkbox"/> Wireline Log Received	
C	Geologist Report Received	
Distribution		
<input checked="" type="checkbox"/> KCC	_____ SWD/Rep	_____ NGPA
_____ KGS	_____ Plug	_____ Other (Specify)

FREDA L. HINZ
Notary Public - State of Kansas
My Appt. Expires 5-15-99

Operator Name **ANADARKO PETROLEUM CORPORATION** Lease Name **HOLIDAY "A"** Well # **1**

Sec. **9** Twp. **33** Rge. **33** East County **SEWARD** 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets.) 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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy.) List All E.Logs Run: DIL, CNL-LDT, ML.	<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>2556</td><td></td></tr> <tr><td>COUNCIL GROVE</td><td>2890</td><td></td></tr> <tr><td>HEEBNER</td><td>4183</td><td></td></tr> <tr><td>TORONTO</td><td>4218</td><td></td></tr> <tr><td>LANSING</td><td>4342</td><td></td></tr> <tr><td>MARMATON</td><td>4996</td><td></td></tr> <tr><td>CHEROKEE</td><td>5202</td><td></td></tr> <tr><td>MORROW</td><td>5572</td><td></td></tr> <tr><td>CHESTER</td><td>5794</td><td></td></tr> <tr><td>STE. GENEVIEVE</td><td>6120</td><td></td></tr> <tr><td>ST. LOUIS</td><td>6200</td><td></td></tr> </tbody> </table>	Name	Top	Datum	CHASE	2556		COUNCIL GROVE	2890		HEEBNER	4183		TORONTO	4218		LANSING	4342		MARMATON	4996		CHEROKEE	5202		MORROW	5572		CHESTER	5794		STE. GENEVIEVE	6120		ST. LOUIS	6200	
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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"	23.0	1591	P+ MIDCON 2/ P+.	295/100	3%CC, 1/4#SK FLC/ 2%CC, 1/4#SK FLC.

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

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumed Production, SWD or Inj. <i>D&A</i>	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil <i>N-A</i> Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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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 NONE-D&A



JOB SUMMARY

ORIGINAL

TICKET # 384084
 TICKET DATE 8-8-98
 ORDER NO. 20086
 REGION North America
 NWA/COUNTRY USA
 BDA / STATE KS
 COUNTY Jewett
 MBU ID / EMP # MCL10103 F4550
 EMPLOYEE NAME Tyce David.
 PSL DEPARTMENT ZI
 LOCATION Liberal
 COMPANY WPC
 CUSTOMER REP / PHONE JR. Stuck.
 TICKET AMOUNT
 WELL TYPE 02
 API / UWI # 15-175-21744-0000
 WELL LOCATION Land
 DEPARTMENT ZI
 JOB PURPOSE CODE 010
 LEASE / WELL # Holiday A-1
 SEC / TWP / RNG 9-33-23

HES EMP NAME/EMP#/(EXPOSURE HOURS) HRS	HES EMP NAME/EMP#/(EXPOSURE HOURS) HRS	HES EMP NAME/EMP#/(EXPOSURE HOURS) HRS	HES EMP NAME/EMP#/(EXPOSURE HOURS) HRS
T. Davis F4550			
B. McIntyre H2308			
I Teal H4564			
O. Humphries H9692			

HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES
54038-77941	22						
52827-75237	25						
52947-6612	25						

Form Name _____ Type: _____
 Form Thickness _____ From _____ To _____
 Packer Type _____ Set At _____
 Bottom Hole Temp. _____ Pressure _____
 Misc. Data _____ Total Depth _____

DATE	CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
8-8-98	1000	8-8-98	1630	1730

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
Float Collar Insect 8 5/8	1	H
Float Shoe Fin 11	1	
Guide Shoe Reg 11	1	O
Centralizers SH 11	4	
Bottom Plug		W.
Top Plug 5W	1	
Head P.C.	1	C
Packer		
Other Basket 11	1	

WELL DATA

	NEW/USED	WEIGHT	SIZE	FROM	TO	MAX ALLOW
Casing	N.	23	8 5/8	KB	1605	
Liner						
Liner						
Tbg/D.P.						
Tbg/D.P.						
Open Hole						SHOTS/FT.
Perforations						
Perforations						
Perforations						

MATERIALS

Treat Fluid	Density	Lb/Gal
Disp. Fluid	Density	Lb/Gal
Prop. Type	Size	Lb.
Prop. Type	Size	Lb.
Acid Type	Gal.	%
Acid Type	Gal.	%
Surfactant	Gal.	In
NE Agent	Gal.	In
Fluid Loss	Gal/Lb	In
Gelling Agent	Gal/Lb	In
Fric. Red.	Gal/Lb	In
Breaker	Gal/Lb	In
Blocking Agent	Gal/Lb	
Perpac Balls	Qty.	
Other		
Other		
Other		
Other		

HOURS ON LOCATION		OPERATING HOURS		DESCRIPTION OF JOB
DATE	HOURS	DATE	HOURS	
				CIP 8 5/8 58
TOTAL		TOTAL		

HYDRAULIC HORSEPOWER

ORDERED Avail. Used

TREATED AVERAGE RATES IN BPM

FEET 42 CEMENT LEFT IN PIPE Overall Reason S.T

CEMENT DATA

STAGE	SACKS	CEMENT	BULK/SKS	ADDITIVES	YIELD	LBS/GAL
1	295	Ptmc	B	3% CC 1/4" Flourep.	3.22	11.1
1	100	Pt	B	2% CC 1/4" Flourep.	1.32	14.8

Circulating _____ Displacement _____ Preflush: Gal - BBI _____ Type _____
 Breakdown _____ Maximum _____ Load & Bkdn: Gal - BBI _____ Pad: BBI - Gal _____
 Average _____ Frac Gradient _____ Treatment Gal - BBI _____ Disp: BBI Gal 169 100
 Shut In: Instant _____ 5 Min _____ 15 Min _____ Cement Slurr Gal - BBI 169 L.C. 235 F.L.
 Total Volume Gal - BBI _____

Frac Ring #1 _____ Frac Ring #2 _____ Frac Ring #3 _____ Frac Ring #4 _____

THE INFORMATION STATED HEREIN IS CORRECT
 CUSTOMER'S REPRESENTATIVE SIGNATURE
 J. A. Stuck

210014

8-1-98

REGION North America	NW/COUNTRY USA	BDA / STATE LA	COUNTY Iberia
MBU ID / EMP # 411013 F4550	EMPLOYEE NAME Tye Davi	PSL DEPARTMENT T.E.	
LOCATION L. 10101	COMPANY HPL	CUSTOMER REP / PHONE J.R. JAWA	
TICKET AMOUNT	WELL TYPE O2	API / UWI # 13-175-21744-0500	
WELL LOCATION L. 1010	DEPARTMENT ZI	JOB PURPOSE CODE 010	
LEASE / WELL # Hobbs 4-1	SEC / TWP / RNG 7 35 33		

HES EMP NAME/EMP#(EXPOSURE HOURS)	HRS	HES EMP NAME/EMP#(EXPOSURE HOURS)	HRS	HES EMP NAME/EMP#(EXPOSURE HOURS)	HRS	HES EMP NAME/EMP#(EXPOSURE HOURS)	HRS
T. Davis F4550							
Hobbs 411013							
411013							
411013							

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL)(GAL)	PUMPS		PRESS. (psi)		JOB DESCRIPTION / REMARKS
				T	C	Tbg	Csg	
	1000							called out for job.
	1200							on loc rig drill.
	1400							start SBOP.
	1500							out of hole with rig up cokers.
	1510							start 8 5/8 csg & FF.
	1603							csg on bit hook up 8 5/8 RL & c/c iron
	1600							hook cill w/ RL.
	1612							cill to pit
	1623							then cill hook iron to p.t.
	1626	6.5	169		✓	100		pump 2957x ptmc 1st 11.1 (1/2)
	1652	6.5	23.5		✓	120		pump 1007x pt pt wt 14.8 (1/2)
	1658	0			✓	0		shut down stop pump.
	1659	6.0	100		✓	100		pump disp.
	1713	6.0	100		✓	200		80 bbls in cmt to pit ✓
	1717							
	1717	2.0	100		✓	300		90 bbls in 5th rate.
	1720	2.0	100		✓	320		land plug.
	1721	0	100		✓	500		release float - held.
	1730							job over
								J
								Thanks for calling us.
								Tye Brian & crew



JOB SUMMARY 4239-1

ORIGINA

TICKET #	TICKET DATE
384008	8-17-98
BDA / STATE	COUNTY
Kansas	SEWARD
PSL DEPARTMENT	
5001	
CUSTOMER REP / PHONE	
JKE	
API / UWI #	
15-175-21744	
JOB PURPOSE CODE	
115	

REGION	NWA/COUNTRY
North America	U.S.A.
MBU ID / EMP #	EMPLOYEE NAME
MCLEIGOS D-4360	ROBERT ELWOOD
LOCATION	COMPANY
Lebanon Kansas	AMARANTO PET. CORP.
TICKET AMOUNT	WELL TYPE
	02
WELL LOCATION	DEPARTMENT
Lebanon Kansas	5001
LEASE / WELL #	SEC / TWP / RNG
HOLIDAY A-1	9-335-330

HES EMP NAME/EMP#/(EXPOSURE HOURS) HRS	HES EMP NAME/EMP#/(EXPOSURE HOURS) HRS	HES EMP NAME/EMP#/(EXPOSURE HOURS) HRS	HES EMP NAME/EMP#/(EXPOSURE HOURS) HRS
Robert Elwood 0-4360			
Brian Tomlinson 0-1832			
R. Ferguson 0-5600			

HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES
420041 P.O.	2.6						
50334 78202	2.6						
52803 10610	2.5						

Form Name _____ Type: _____
 Form Thickness _____ From _____ To _____
 Packer Type _____ Set At _____
 Bottom Hole Temp. _____ Pressure _____
 Misc. Data _____ Total Depth _____

DATE	CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
8-17-98	01:00	03:15	05:40	09:50

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY	MAKE
Float Collar		
Float Shoe		
Guide Shoe		
Centralizers		
Bottom Plug		
Top Plug		
Head		
Packer		
Other		

WELL DATA

	NEW/USED	WEIGHT	SIZE	FROM	TO	MAX ALLOW
Casing						
Liner						
Liner						
Tbg/D.P.	0	16.6	4 1/2	K.R.	3200	
Tbg/D.P.						
Open Hole			7 7/8	6L		SHOTS/FT.
Perforations						
Perforations						
Perforations						

MATERIALS

Treat Fluid	Density	Lb/Gal
Disp. Fluid	Density	Lb/Gal
Prop. Type	Size	Lb.
Prop. Type	Size	Lb.
Acid Type	Gal.	%
Acid Type	Gal.	%
Surfactant	Gal.	In
NE Agent	Gal.	In
Fluid Loss	Gal/Lb	In
Gelling Agent	Gal/Lb	In
Fric. Red.	Gal/Lb	In
Breaker	Gal/Lb	In
Blocking Agent	Gal/Lb	
Perfpac Balls	Qty.	
Other		
Other		
Other		
Other		

HOURS ON LOCATION		OPERATING HOURS		DESCRIPTION OF JOB
DATE	HOURS	DATE	HOURS	
				Plug to Remover!
TOTAL		TOTAL		

HYDRAULIC HORSEPOWER

Avail. _____ Used _____

AVERAGE RATES IN BPM

Disp. _____ Overall _____

CEMENT LEFT IN PIPE

Reason _____

CEMENT DATA

STAGE	SACKS	CEMENT	BULK/SKS	ADDITIVES	YIELD	LBS/GAL
	210	40160 Poz	B	6% Total GC!	114'	13.2

Circulating _____	Displacement _____	Preflush: Gal - BBI _____	Type _____
Breakdown _____	Maximum _____	Load & Bkdn: Gal - BBI _____	Pad: BBI - Gal _____
Average _____	Frac Gradient _____	Treatment Gal - BBI _____	Disp: BBI - Gal _____
Shut In: Instant _____	5 Min _____ 15 Min _____	Cement Slurr Gal - BBI _____	
		Total Volume Gal - BBI _____	

Frac Ring #1 _____ Frac Ring #2 _____ Frac Ring #3 _____ Frac Ring #4 _____

THE INFORMATION STATED HEREIN IS CORRECT

CUSTOMER'S REPRESENTATIVE SIGNATURE: *Van...*



JOB LOG 4239-5

ORIGINAL

TICKET #	384008	TICKET DATE	7-17-92
REGION	North America	BDA / STATE	Kansas
NWA/COUNTRY	U.S.A.	COUNTY	SEWARD
MBU ID / EMP #	24360	PSL DEPARTMENT	5001
EMPLOYEE NAME	Robert E. Wood	CUSTOMER REP / PHONE	FKL
LOCATION	Trancon Kansas	API / UWI #	15-175-21744
TICKET AMOUNT		DEPARTMENT	5001
WELL LOCATION	Trancon Kansas	JOB PURPOSE CODE	115
LEASE / WELL #	Hartman A-1	SEC / TWP / RNG	9-33 S. - 23 W.

HES EMP NAME/EMP#/(EXPOSURE HOURS)	HRS	HES EMP NAME/EMP#/(EXPOSURE HOURS)	HRS	HES EMP NAME/EMP#/(EXPOSURE HOURS)	HRS	HES EMP NAME/EMP#/(EXPOSURE HOURS)	HRS
Robert E. Wood							

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL)(GAL)	PUMPS		PRESS. (psi)		JOB DESCRIPTION / REMARKS
				T	C	Tbg	Csg	
	01:00							CALLED OUT READY 05:00
	03:00							DEPART BASE
	03:15							ON LOC RIG L.D.D.P.
	04:30							SARTY MEETING
	05:04							HOOK UP TO CIRCULATE WITH RIG @ 3200 FT
	05:06							RIG BROKE CIRCULATION
	05:40							HOOK TO HALLIBURTON
								SET 1 ST PLOG 100 S ^{MS} @ 3200 FT
	06:44	2.5	10			180		START H ₂ O AHEAD
	06:48	5.8	29			365		START CMT @ 13.2 #/GAL
	06:53	3.5	3.5			160		START H ₂ O BEHIND
	06:54	5.75	34.5			400		START MUD DISPLACEMENT
	06:00					VAC		SHOT DOWN
	06:04							L.D.D.P.
								2 ND PLOG 50 S ^{MS} @ 1620'
	06:45							HOOK TO HALLIBURTON
	06:49	3.3	10			480		START H ₂ O AHEAD
	06:52	5.6	14.6			365		START CMT @ 13.2 #/GAL
	06:56	3.5	3.5			250		START H ₂ O BEHIND
	06:57	5	15.7			VAC		START MUD DISPLACEMENT
	07:00					VAC		SHOT DOWN
	07:02							L.D.D.P.
								3 RD PLOG 25 S ^{MS} @ 600 FT
	07:33	8	40			80		START H ₂ O AHEAD
	07:32	7.3	7.3			80		START CMT @ 13.2 #/GAL
	07:39	3.3	6.6			80		START H ₂ O DISPLACEMENT
	07:41					VAC		SHOT DOWN
	07:44							L.D.D.P.
	08:40		3					PLOG SURFACE WITH 10 S ^{MS} @ 46 FT
	08:44		3					PLOG MOUSE HOLE 10 S ^{MS}
	08:47		4					PLOG RAT HOLE 15 S ^{MS}