

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, KS 67905-0351

Purchaser: None

Operator Contact Person: J. L. Ashton

Phone (316) 624-6253

Contractor: Name: Johnson Drilling Company

License: \_\_\_\_\_

Wellsite Geologist: NA

Designate Type of Completion

New Well  Re-Entry  Workover

Oil  SWD  Temp. Abd.

Gas  Inj  Delayed Comp.

Dry  Other (Core, Water Supply, etc.)

If OMMO: old well info as follows:

Operator: \_\_\_\_\_

Well Name: \_\_\_\_\_

Comp. Date \_\_\_\_\_ Old Total Depth \_\_\_\_\_

Drilling Method:

Mud Rotary  Air Rotary  Cable

5-21-80 6-1-80 6-19-80

Spud Date Date Reached TD Completion Date

API NO. 15- 175-20,470--0000

County Seward

NE SE Sec. 19 Twp. 33S Rge. 34  East  West

1980 Ft. North from Southeast Corner of Section

660 Ft. West from Southeast Corner of Section  
(NOTE: Locate well in section plat below.)

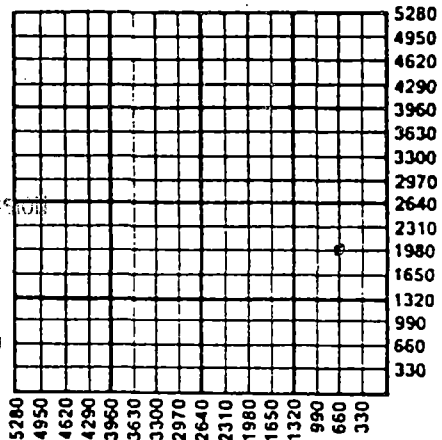
Lease Name Guttridge "A" Well # 5

Field Name Shuck

Producing Formation None

Elevation: Ground 2929 KB NA

Total Depth 6328 PBD 6282



RECEIVED  
STATE CORPORATION COMMISSION  
AUG - 9 1990  
WICHITA, KANSAS

Amount of Surface Pipe Set and Cemented at 1687 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.

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date of any well. Rule 82-3-130, 82-3-107 and 82-3-106 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 drillers time log 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. Any recompletion, workover or conversion of a well requires filing of ACO-2 within 120 days from commencement date of such work.

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 Beverly J. Williams

Title Engineering Technician Date 7-2-90

Subscribed and sworn to before me this 2nd day of July, 19 90.

Notary Public Cheryl Steers

Date Commission Expires \_\_\_\_\_



K.C.C. OFFICE USE ONLY  
F  Letter of Confidentiality Attached  
C  Wireline Log Received  
C  Drillers Timelog Received  
Distribution  
 KCC  SWD/Rep  NGPA  
 KGS  Plug  Other  
(Specify)

SIDE TWO

Operator Name Anadarko Petroleum Corporation Lease Name Guttridge "A" Well # 5

Sec. 19 Twp. 33S 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.

<p>Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets.)</p> <p>Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Cores Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Electric Log Run (Submit Copy.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p align="center"><b>Formation Description</b></p> <p><input checked="" type="checkbox"/> Log <input type="checkbox"/> Sample</p> <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%;">Bottom</th> </tr> </thead> <tbody> <tr> <td>Morrow Sd</td> <td>5954</td> <td></td> </tr> <tr> <td>Mississippi</td> <td>6014</td> <td></td> </tr> <tr> <td>Chester Sd</td> <td>6226</td> <td></td> </tr> </tbody> </table>	Name	Top	Bottom	Morrow Sd	5954		Mississippi	6014		Chester Sd	6226	
Name	Top	Bottom											
Morrow Sd	5954												
Mississippi	6014												
Chester Sd	6226												

Core #1: 6217-54, rec 57'.

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	1687	Pozmix & Common	800	4% gel 2% cc
Production	7 7/8	4 1/2	10.5	6328	LW & Pozmix	220	3% cc 5% CFR-2

Shots Per Foot	PERFORATION RECORD Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) Depth
2	6282-5000	A/1500 gals 7.5% MCA, 40 BS.

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
None				

Date of First Production	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) <span style="float:right">None</span>			
Never Produced				

Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Water	Bbls.	Gas-Oil Ratio	Gravity
					1			

Disposition of Gas:  Vented  Sold  Used on Lease (If vented, submit ACO-18.)

**METHOD OF COMPLETION**

Open Hole  Perforation  Dually Completed  Commingled

Other (Specify) \_\_\_\_\_

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

