

E 24, 960

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

ORIGINAL

Operator: License # 4549

Name: Anadarko Petroleum Corporation

Address P.O. Box 351

City/State/Zip Liberal, Kansas 67905-0351

Purchaser: Not applicable

Operator Contact Person: M. L. Pease *Jim Ashton*

Phone (316) 624-6253

Contractor: Name: Gabbert-Jones, Inc.

License: 5842

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 **OWWO**: old well info as follows:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Drilling Method:

Mud Rotary Air Rotary Cable

9-26-89 10-7-89 4-2-90
Spud Date Date Reached TD Completion Date

API NO. 15- 175-21,106-0000

County Seward

App C S/2 Sec. 22 Twp. 33S Rge. 34 East West

KCC/KG(2300)1320 Ft. North from Southeast Corner of Section

2740 Ft. West from Southeast Corner of Section

(NOTE: Locate well in section plat below.)

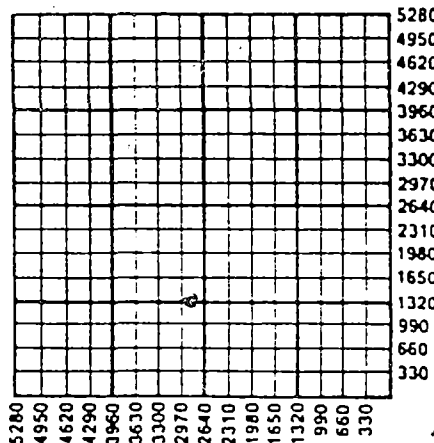
Lease Name Etzold Unit North Well # 3-7

Field Name Etzold Unit North

Producing Formation L. Chester

Elevation: Ground 2911 KB NA

Total Depth 6460 PBDT 6365



RECEIVED
MAY 04 1990

Amount of Surface Pipe Set and Cemented at 1630 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.

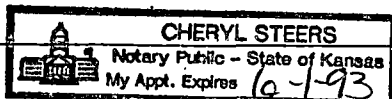
All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature Beverly J. Williams
Beverly J. Williams
Title Engineering Technician Date 5-2-90

Subscribed and sworn to before me this 2th day of May, 1990.

Notary Public Cheryl Steers

Date Commission Expires _____



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

Handwritten marks: 'B' and 'X'.

Operator Name Anadarko Petroleum Corporation Lease Name Etzold Unit North Well # 3-7

Sec. 22 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy.)</p>	<p style="text-align: center;">Formation Description</p> <p style="text-align: center;"><input checked="" type="checkbox"/> Log <input type="checkbox"/> Sample</p> <p>Name Top Bottom</p> <p style="text-align: center;">SEE ATTACHMENT</p>
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CASING RECORD New 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	1630	Pozmix & Common	875	4% Tot gel 2% cc 3% cc
Production	7 7/8	5 1/2	15.5	6374	Pozmix	200	6% tot gel 1#/sx flocele; 10% salt 1#/sx flocele 5#/sx gilsonite

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	6262-80	Brk dwn w/2250 gals ds1 + 45 BS.	6262-80

TUBING RECORD	Size <u>2 3/8</u>	Set At <u>6201</u>	Packer At <u>6201</u>	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First Production 4-2-90 Producing Method Flowing Pumping Gas Lift Other (Explain) Injection

Estimated Production Per 24 Hours	Oil <u>-</u> Bbls.	Gas <u>-</u> Mcf	Water <u>300</u> Bbls.	Gas-Oil Ratio <u>-</u>	Gravity <u>-</u>
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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 6262-80

