

15-175-21690-0000

FORM MUST BE TYPED

ORIGINAL

SIDE ONE

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, KANSAS 67905-0351

Purchaser: ANADARKO ENERGY SERVICES

Operator Contact Person: DAVID W. KAPPLE

Phone (316) 624-6253

Contractor: Name: BIG "A" DRILLING

License: 31572

Wellsite Geologist: _____

Designate Type of Completion
 New Well Re-Entry Workover

Oil SWD S1OW 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 PBD
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

1-3-98 1-12-98 1-30-98
Spud Date Date Reached TD Completion Date

API NO. 15- 175-21690-0000

County SEWARD

SE - SE - NW Sec. 25 Twp. 33 Rge. 33 X E
W

2310 Feet from NX (circle one) Line of Section

2310 Feet from XW (circle one) Line of Section

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

Lease Name WYATT "A" Well # 1

Field Name EVALYN-CONDIT

Producing Formation L. MORROW/CHESTER

Elevation: Ground 2803 KB _____

Total Depth 6400 PBD 5890

Amount of Surface Pipe Set and Cemented at 1611 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 AH. 1-6-2-98 U.C.
(Data must be collected from the Reserve Pit)

Chloride content 1100 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.

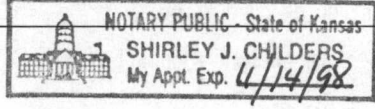
Signature L. Marc Harvey
L. MARC HARVEY

Title DRILLING TECHNICAL ASSISTANT Date 3-20-98

Subscribed and sworn to before me this 20th day of March 19 98.

Notary Public Shirley J. Childers

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
RECEIVED
STATE CORPORATION COMMISSION
Form ACO-1 (7-91)

Operator Name ANADARKO PETROLEUM CORPORATION Lease Name WYATT "A" Well # 1

Sec. 25 Twp. 33 Rge. 33 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.

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: SBT-CCL-GR, DIL, CNL-LDT-ML.

Log Formation (Top), Depth and Datums Sample

Name	Top	Datum
CHASE	2602	
COUNCIL GROVE	2962	
HEEBNER	4254	
TORONTO	4288	
LANSING	4412	
MARMATON	5078	
CHEROKEE	5280	
MORROW	5634	
CHESTER	5824	
STE. GENEVIEVE	6156	
ST. LOUIS	6212	

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"	23.0	1611	P+ MIDCON 2/ P+	315/100	3%CC, 1/4#SK FLC/ 2%CC, 1/4#SK FLC.
PRODUCTION	7/7/8"	5-1/2"	15.5	6021	P+ MIDCON 2/ VERSASET	165/85	2%CC, 1/4#SK FLC/ 1/4#SK FLC.

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	
		2	5812-5818, 5850-5886.
		FRAC: 45000 GAL FOAMED GEL & 83750# 20/40	5812-5886 (OA)
		SD.	

TUBING RECORD	Size	Set At	Packer At	Liner Run
				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumed Production, SWD or Inj. 2-10-98 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	0	540	0		

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: 5812-5886 (OA)

TICKET #	TICKET DATE
BDA / STATE	COUNTY
PSL DEPARTMENT	
CUSTOMER REP / PHONE	
API / UWI #	
JOB PURPOSE CODE	

REGION North America	NWA/COUNTRY
MBU ID / EMP #	EMPLOYEE NAME
LOCATION	COMPANY
TICKET AMOUNT	WELL TYPE
WELL LOCATION	DEPARTMENT
LEASE / WELL #	SEC / TWP / RNG

ORIGINAL

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

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL)(GAL)	PUMPS		PRESS. (psi)		JOB DESCRIPTION / REMARKS
				T	C	Tbg	Csg	
	1500							Called out for J 20
	1800							on loc. for 50 UP
	1840							OUT OF HOLE WITH HIGH UP (0.1 PSI)
	1900							Start 8th CSG and FE.
	2025							CSG ON BOT HOOK UP 8th CSG & C-1100
	2033							bot circ. W/100
	2037							They circ HOOK UP ON 10 FT
	2042	7.0	180.6		✓	100		PUMP 315X 8th HT 11.1770
	2110	6.0	23.5		✓	130		PUMP 100X 8th HT 14.8770
	2113	0	204		✓	0		Shut down PROF PUMP.
	2114	6.0	102.1		✓	70		PUMP OUT
	2128	6.0	102.1		✓	220		72 bbls in CMT to PIT
	2130	2.0	102.1		✓	300		93 bbls in SIO gate.
	2135	2.0	102.1		✓	300		Laid PUMP.
	2136	0	102.1		✓	700		Release FLOW - HOLD.
	2140		102.1					Job over
								Thanks for calling HES.
								TYPE BITUM & CFW
								(30 bbls CMT TO PIT)
								(523X CMT TO PIT)

10/24/01



JOB SUMMARY 4239-1

TICKET #	234508	TICKET DATE	1-14-98
BDA / STATE	KS	COUNTY	Sevier
PSL DEPARTMENT	CMT	CUSTOMER REP / PHONE	
API / UWI #		JOB PURPOSE CODE	035
WELL TYPE	02	SEC / TWP / RNG	25-33-32

REGION	North America	NWA/COUNTRY	USA
MBU ID / EMP #	L10103 F4550	EMPLOYEE NAME	Tyce Davis
LOCATION	Liberals	COMPANY	APC
TICKET AMOUNT		DEPARTMENT	CMT
WELL LOCATION	Land	DEPARTMENT	CMT
LEASE / WELL #	WY98 A-1	SEC / TWP / RNG	25-33-32

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
B. Mc Intyre H2308			
D. Hamilton G3090			

ORIGINAL

HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES
54038-75374	28						
52276-75009	29						
420042	28						

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
1-13-98	1930	1-13-98	2230	1-14-98
			0630	0730

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY	MAKE
Float Collar 5 1/2	1	W
Float Shoe 5 1/2	1	
Guide Shoe 5 1/2	1	O
Centralizers SW	21	
Bottom Plug		W
Top Plug 5 1/2	1	
Head p.c	1	C
Packer		
Other		O

WELL DATA

	NEW/USED	WEIGHT	SIZE	FROM	TO	MAX ALLOW
Casing	N1	15.5	5 1/2	103	6020	
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	
Perfpac Balls	Qty.	
Other		
Other		
Other		
Other		

HOURS ON LOCATION		OPERATING HOURS		DESCRIPTION OF JOB
DATE	HOURS	DATE	HOURS	
				CMT
				5 1/2 C.S.J.
TOTAL		TOTAL		

ORDERED	HYDRAULIC HORSEPOWER	Used
	Avail.	
TREATED	AVERAGE RATES IN BPM	Overall
	Disp.	
FEET 45	CEMENT LEFT IN PIPE	S.J
	Reason	

CEMENT DATA

STAGE	SACKS	CEMENT	BULK/SKS	ADDITIVES	YIELD	LBS/GAL
1	1605	94 MC	B	270cc 1/4" F10	12.8	12.8
1	55	94 MC	B	0.675 Hylab 332, 5% KCL, 92.4cc 1/4" F10	14.2	14.5

Circulating _____	Displacement _____	Preflush: Gal - BBI 26	Type U.S.J.F
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 59000 Kan 2 1/2 F.C	
		Total Volume Gal - BBI	

Frac Ring #1	Frac Ring #2	Frac Ring #3	Frac Ring #4
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THE INFORMATION STATED HEREIN IS CORRECT

CUSTOMER'S REPRESENTATIVE SIGNATURE
Steve Anderson

REGION North America	NWA/COUNTRY USA	BDA / STATE KS	COUNTY Seward
MBU ID / EMP # L10103 F4550	EMPLOYEE NAME Tyce Davis	PSL DEPARTMENT CMT	
LOCATION Liberty	COMPANY IAPC	CUSTOMER REP / PHONE	
TICKET AMOUNT	WELL TYPE 02	API / UWI #	
WELL LOCATION Lords	DEPARTMENT CMT	JOB PURPOSE CODE 035	
LEASE / WELL # WY9# A-1	SEC / TWP / RNG 25-33-33		

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
ORIGINAL			

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL)(GAL)	PUMPS		PRESS. (psi)		JOB DESCRIPTION / REMARKS
				T	C	Tbg	Csg	
	1900							Called out for job.
	2230							on loc rig LDDP
	0120							out of hole with rig up casing.
	0130							Start str CSY & FR.
	0625							CSY on down hook up str & c. c/cite even.
	0538							blk cite. work.
	0540							CITE TO PIT
	0625							Thru cite. Hook iron to pit
	0630	7.0	8.0			300		Pump spacer H ₂ O
	0632	6.5	10			300		PUMP STR.
	0635	6.5	18			150		PUMP H ₂ O
	0638	6.5	54			300		PUMP 140x pipe #11.171201
	0648	6.5	215			150		PUMP 85x pipe vers. #114.57341
	0653	0	215			0		Shut down drop plug wash up
	0656	6.0	142			90		PUMP DISK
	0711	5.0	142			150		98 bbls in lift cmt 510 rate.
	0721	2.0	142			870		665 in 510 rate to 2.0 bpm
	0722	2.0	142			300		Lands plot - test casing
	0724	0	142			300		Release psi - Plug held.
	0730							Job over
								Thanks for calling HES
								Tyce Brian & crew

REVISION
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