County ___Seward

SIDE ONE

STATE CORPORATION COMMISSION OF KANSAS OIL & GAS CONSERVATION DIVISION RECOMPLETION FORM ACO-2 AMENDMENT TO WELL HISTORY

	N/2 N/2 NW Sec. 27 Twp. 338 Rge. 34 X west					
Operator: License # 4549	Ft. North from Southeast Corner of Sec .					
Name: <u>Anadarko Petroleum Corporation</u>	3960 Ft. West from Southeast Corner of Section					
Address: P. O. Box 351	(NOTE: Locate well in section plat below.)					
City/State/Zip: Liberal, KS 67905-0351	Lease Name <u>Etzold Unit South</u> Well # 4-3					
Purchaser:	Field Name <u>Etzold Unit South</u>					
Not Applicable	Producing Formation L. Chester					
Operator Contact Person: M. L Pease Phone: (316) 624-6253	Elevation: Ground <u>2901.8</u> KB <u>NA</u>					
Designate Type of Original Completion New Well Re-Entry Workover	5280 4950 4620					
Date of Original Completion 11-9-86	4290					
Name of Original Operator Anadarko Petroleum Corp.	3630					
Original Well Name	\$ \$\frac{1}{2} \frac{1}{2} \fr					
Date of Recompletion:	2310 2310 1980					
5-26-88 5-16-89 Completed	(C) [50 1]1					
Re-entry Workover	990					
	330					
Designate Type of Recompletion/Workover: OilSWDTemp. AbdGasX InjDelayed CompDryOther (Core, Water Supply, etc.)DeepeningRe-perforationPlug BackPBTDConversion to Injection/Disposal	K.C.C. OFFICE USE ONLY F Letter of Confidentiality Attached C Wireline Log Received C Drillers Timelog Received					
Is recompleted production:	Distribution KCC SWD/Rep NGPA					
Commingled Docket No. Dual Completion Docket No. Other (Disposal or Injection?) Docket No. E -24, 960	KGS Plug Other (Specify)					
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 recompletion of any well. Rules 82-3-107 and 82-3-141 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 any additional wireline logs and driller's time logs (not previously submitted) shall be attached with this form. Submit ACO-4 or ACO-5 prior to or with this form for approval of commingling or dual completions. Submit CP-1 with all plugged wells. Submit CP-111 with all temporarily abandoned wells. NOTE: Conversion of wells to either disposal or injection must receive approval before use; submit form U-1.						
All requirements of the statutes, rules and regulations promulg with and the statements herein are complete and correct to the	pated to regulate the oil and gas industry have been fully complied e best of my knowledge.					
Signature Quely & Williams Title	Engineering Technician Date 2-20-90					
Beverly 9. Williams Subscribed and sworp to before me this	February 19, 90					
Notary Public Ohlus Stells	Date Commission Expenses CHERYL STEERS					

•	SIDE TWO				12190		
Operator Name <u>Anad</u>	nriko Potroler	ım Corporati	-	Etzold Unit S	outh Vell	± 4−3	
operator name _ Anad		est	<u> </u>	3,000,20			
Sec. <u>27</u> Twp. <u>33S</u>	Rge. 34 🖼	lest	County	Seward	·		
RECOMPLETION FORMATION DESCRIPTION							
X Log Sample							
Name				Тор	Botto	ពា	
SEE ATT	ACHED LIST			# # *	মানু বিশ্বাস ক্ষিপ্ত ক্ষিপ্ত ক্ষ্মী ক্ষমী		
		4	: • • 			·	
ADDITIONAL CEMENTING/SQUEEZE RECORD							
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type a	nd Percent Addi	tives	
Perforate Protect Casing Plug Back TD Plug Off Zone							
					•		
	<u></u>		<u> </u>	L			
Shots Per Foot	PERFORATION RECORD Specify Footage of Each Interval Perforated			Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)			
2	6240-6308		A/3400 gal 7 1/2% MCA + 170 BS.				
				-			
						'	
					•		
рвтр6337	Plus	TypeNon	.e				
TUBING RECORD Size 2 3/8 Set At 6199 Packer At 6199 Was Liner Run Y X N							
Date of Resumed XXXXXXXX							
Estimated MANAGENERAL Injection	Per 24 Hours Oi	•	- -	850 Bbls.		Gas-Dil-Ratio	
Disposition of Gas: Vented Sold	Ga	s					