

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

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: SHAWN D. YOUNG

Phone (316) 624-6253

Contractor: Name: NA

License: NA

Wellsite Geologist: NA

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover:

Operator: ANADARKO PETROLEUM CORPORATION

Well Name: GOWENS A-1

Comp. Date 7-14-67 Old Total Depth 6940

Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PBD
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

3-30-99 -- 4-5-99
Spud Date Date Reached TD Completion Date

API No. 15- NA SPUD 6-29-67 15-119-20006-0001

County MEADE

--- --- --- Sec. 16 Twp. 34 Rge. 30 X W

1250 Feet from X(N) (circle one) Line of Section

1250 Feet from X(W) (circle one) Line of Section

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

Lease Name GOWENS "A" Well # 1

Field Name NOVINGER

Producing Formation U. MORROW

Elevation: Ground 2697.6 KB --

Total Depth 6940 PBDT 5917

Amount of Surface Pipe Set and Cemented at 1546 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 OWWO, 4-19-99 U.C.
(Data must be collected from the Reserve Pit)
NOT APPLICABLE

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used _____

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 Shawn D. Young
SHAWN D. YOUNG

Title DIVISION PRODUCTION ENGINEER Date 4/8/99

Subscribed and sworn to before me this 8th day of April
19 99.

Notary Public Shirley J. Childers

STATE Date Commission Expires

NOTARY PUBLIC - State of Kansas
SHIRLEY J. CHILDERS
My Appt. Exp. 11/14/02

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
(Specify)

APR 13 1999

SIDE TWO

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

Sec. 16 Twp. 34 Rge. 30 East West County MEADE

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:

Log Formation (Top), Depth and Datums Sample
Name Top Datum

SEE ATTACHED DRILLERS LOG

** Original Completion CASING RECORD							
Report all strings set-conductor, <input checked="" type="checkbox"/> New <input type="checkbox"/> Used, 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"	--	1546	--	775	--
** PRODUCTION	7-7/8"	4-1/2"	--	5955	--	150	--

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	
	3	5825-5842		

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2-3/8"	5844		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumed Production, SWD or Inj. RESUMED: 3-31-99		Producing Method			
		<input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	0	97	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: 5825-5842

DRILLER'S LOG

WELL NAME: Gowans "A" 1 ; COMPANY OPERATING: Anadarko Production Company
 ADDRESS of COMPANY: Box 351 Liberal, Kansas 67901

WELL LOCATION: $\frac{1}{4}$ $\frac{1}{4}$ EW $\frac{1}{4}$,
4054.5 ft. North of South line,
1250 ft. East of West line: Sec. 16, Twp. 34S, Rge. 30W, Monte County, Kansas

DRILLING STARTED 6/29, 19 67; DRILLING COMPLETED 7/14, 19 67
 WELL COMPLETED 8/2, 19 67; WELL CONNECTED _____, 19 _____

ELEVATION: 2697.6 ft. Ground Level; CHARACTER OF WELL (Oil, Gas, or Dry Hole) Gas

OIL OR GAS SANDS OR ZONES - PERFORATIONS - ACIDIZING AND FRACTURING INFORMATION					
Name	From	To	No. of Shots	Gallons Used	Kind Used
Morrow	5525	38	20	750	10% H2A

CASING RECORD

Size	Amount Set	Sacks of Cement	Amount Pulled
6-5/8"	1546	775	None
4-1/2"	5955	150	None
2-3/8"	5368		None

FORMATION RECORD

Formation	Top	Bottom	Formation	Top	Bottom
Surface Sand, Shell,			Line & Shale	5807	5820
Red Bed & Gyp	0	821	Line	5840	6490
Anhydrite	821	1555	R.T.D.		6490
Sand & Shale	1555	2393			
Shale & Lime	2393	2710			
Lime	2710	2865			
Lime v/shale	2865	3255			
Lime, Shale	3255	3458			
Shale v/Lime	3458	3758			
Lime, Shale	3758	4615			
Lime	4615	5024			
Lime & Shale	5024	5290			
Lime	5290	5807			

RESULTS of INITIAL PRODUCTION TEST: 4 Point Test - WEAOP 33,000 MCFD.

RECEIVED

STATE OF KANSAS COMMISSION

APR 13 1967