

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 TRADING COMPANY

Operator Contact Person: DAVID W. KAPPLE

Phone (316) 624-6253

Contractor: Name: CHEYENNE DRILLING COMPANY

License: 5382

Wellsite Geologist: _____

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD SLOW 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. _____

2-3-97 2-5-97 3-14-97

Spud Date Date Reached TD Completion Date

API NO. 15- 129-21,491-00-08

County MORTON

NE - NE - SW - SE Sec. 29 Twp. 34 Rge. 39 E W

1250 Feet from (circle one) Line of Section

1390 Feet from (circle one) Line of Section

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

Lease Name HAYWARD "J" Well # 3

Field Name PANOMA COUNCIL GROVE

Producing Formation COUNCIL GROVE "A"

Elevation: Ground 3317.1 KB _____

Total Depth 3140 PBDT 3089

Amount of Surface Pipe Set and Cemented at 544 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 A14.1 12-24-97 U.C.
(Data must be collected from the Reserve Pit)

Chloride content 15,100 ppm Fluid volume 400 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. _____

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KANSAS CORP COM
M APR 25 11:50 AM '97

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 4-24-97

Subscribed and sworn to before me this 24 day of April 19 97.

Notary Public Freda L. Hinz

Date Commission Expires _____

FREDA L. HINZ
Notary Public - State of Kansas
My Appt. Expires 5-15-99

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)

SIDE TWO

Operator Name ANADARKO PETROLEUM CORPORATION Lease Name HAYWARD "J" Well # 3

Sec. 29 Twp. 34 Rge. 39 East County MORTON
 West

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 (Attach Additional Sheets.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run (Submit Copy.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No List All E.Logs Run: <u>CCL-GR-CBL</u>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datums <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Datum</th> </tr> <tr> <td>GLORIETTA</td> <td>1260 - 1436</td> <td></td> </tr> <tr> <td>B/STONE CORRAL</td> <td>1770</td> <td></td> </tr> <tr> <td>CHASE</td> <td>2580</td> <td></td> </tr> <tr> <td>KRIDER</td> <td>2604</td> <td></td> </tr> <tr> <td>WINFIELD</td> <td>2684</td> <td></td> </tr> <tr> <td>COUNCIL GROVE</td> <td>2916</td> <td></td> </tr> </table>	Name	Top	Datum	GLORIETTA	1260 - 1436		B/STONE CORRAL	1770		CHASE	2580		KRIDER	2604		WINFIELD	2684		COUNCIL GROVE	2916	
Name	Top	Datum																				
GLORIETTA	1260 - 1436																					
B/STONE CORRAL	1770																					
CHASE	2580																					
KRIDER	2604																					
WINFIELD	2684																					
COUNCIL GROVE	2916																					

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"	23.0	544	CLASS C	100/100	3%CC D29, 2%D46, 2% SALT & 1/4 PPS D29/ 2% SALT+1/4 PPS D29
PRODUCTION	7-7/8"	5-1/2"	15.5	3126	CLASS C	200/100	3% D79, 2%D46, 2%CC, 1/4#SK FLC/ 3% D79, 2%D46, 2%CC, 1/4#SK FLC.

ADDITIONAL CEMENTING/SQUEEZE RECORD					
Purpose:	Depth		Type of Cement	#Sacks Used	Type and Percent Additives
	Top	Bottom			
<input type="checkbox"/> Perforate					
<input type="checkbox"/> Protect Casing					
<input type="checkbox"/> Plug Back TD					
<input type="checkbox"/> Plug Off Zone					

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	2930-70	ACID: 2000 GAL 15% FEHCL 2930-70
		FRAC: 61,631 GAL N2 FOAMED X-LNKD GEL/ 2930-70
		170,000# 12/20 SND 2930-70
TUBING RECORD	Size <u>2 3/8</u> Set At <u>2973</u> Packer At _____	Liner Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj. <u>3-21-97</u>		Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
Estimated Production Per 24 Hours	Oil Bbls. _____ Gas Mcf <u>137</u> Water Bbls. <u>36</u>	Gas-Oil Ratio _____ Gravity _____

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: 2930-70

CEMENTING SERVICE REPORT

Schlumberger
Dowell

TREATMENT NUMBER 12 8936 DATE 2-3-97
STAGE DS DISTRICT 03 12 UKS

DS-496-A PRINTED IN U.S.A.

WELL NAME AND NO. Hayward J-3	LOCATION (LEGAL) Sec 29-345-39W	RIG NAME: Cheyenne #8
FIELD-POOZ Houston	FORMATION Surface	WELL DATA: BOTTOM TOP
COUNTY/PARISH Morton	STATE KS	BIT SIZE 12 1/4 CSG/Liner Size 8 5/8
NAME Anadarko	API NO.	TOTAL DEPTH WEIGHT 24
AND		PROT <input type="checkbox"/> CABLE FOOTAGE 544
ADDRESS		MUD TYPE GRADE
ZIP CODE		<input type="checkbox"/> BHST <input type="checkbox"/> BHCT THREAD 8 1/4
SPECIAL INSTRUCTIONS Safety Cut Surface Casing AS Directed by Customer		MUD DENSITY LESS FOOTAGE SHOE JOINT(S) 38.36
		MUD VISC. Disp. Capacity 32.3

ORIGINAL

IS CASING/TUBING SECURED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	LIFT PRESSURE 223 PSI	CASING WEIGHT - SURFACE AREA (3.14 x R ²)
PRESSURE LIMIT 1500 PSI	BUMP PLUG TO 827 PSI	TOP OR LW <input type="checkbox"/> NEW <input type="checkbox"/> USED
ROTATE RPM RECIPROCATE FT No. of Centralizers 4		BOT OR LW DEPTH

TIME	PRESSURE	VOLUME PUMPED wbl	JOB SCHEDULED FOR TIME: 15:00 DATE: 2-3-97	ARRIVE ON LOCATION TIME: 14:30 DATE: 2-3-97	LEFT LOCATION TIME: 07:30 DATE: 2-3-97
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TIME	TBG OR D.P.	CASING	INCREMENT	CUM	INJECT RATE	FLUID TYPE	FLUID DENSITY	SERVICE LOG DETAIL
1552								PRE-JOB SAFETY MEETING PSI TEST TO 1550 PSI
1554		130	10	10	5.5	H2O	8.3	START H2O Ahead
1558		165	57	10	5.5	cmf	11.1	START Lead cmf
1608		205	24	67	5.5	cmf	14.8	START Tail cmf
1613								Shutdown
1614		100	25	91	5.5	H2O	8.3	Drop Plug, START Displacement
1613		100			5.5	cmf	11.1	Returns to surface
1619		185	7.3	116	2.0	H2O	8.3	Lower Pump Rate
1624		827		123.3				Bump Plug, Shutdown
1625								Check PSI, float
1626								End Job

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DOWELL

REMARKS: **30 SKS TO Surface**

SYSTEM CODE	NO OF SACKS	YIELD CU. FT/SK	COMPOSITION OF CEMENTING SYSTEMS		SLURRY MIXED	
					BBLs	DENSITY
1	100	3.20	C+ 37% 29+ .2%	D46+ 29% S1 + 1/4 PPS 29	36.9	11.1
2	100	1.34	C+ 29% S1 + 1/4 PPS 29		23.8	14.8

BREAKDOWN FLUID TYPE	VOLUME	DENSITY	PRESSURE 827 MAX. 100 MIN.
<input type="checkbox"/> HESITATION SQ.	<input type="checkbox"/> RUNNING SQ.	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Cement Circulated To Surf. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO 17 Bbls.
BREAKDOWN PSI FINAL	PSI	DISPLACEMENT VOL. 32.3 Bbls	TYPE OF WELL <input type="checkbox"/> OIL <input type="checkbox"/> GAS <input type="checkbox"/> STORAGE <input type="checkbox"/> INJECTION <input type="checkbox"/> BRINE WATER <input type="checkbox"/> WILDCAT
Washed Thru Parts <input type="checkbox"/> YES <input type="checkbox"/> NO	TO FT	MEASURED DISPLACEMENT <input type="checkbox"/> WIRELINE	PERFORMATIONS
TO TO	TO TO	CUSTOMER REPRESENTATIVE Tommaso Castillo	DS SUPERVISOR Dann D. Miller

ORIGINAL

CEMENTING SERVICE REPORT

Schlumberger
Dowell

TREATMENT NUMBER 12-8943 DATE 2-97
STAGE DS DISTRICT 03 12 UKS

DS-496A PRINTED IN U.S.A.

WELL NAME AND NO. Hayward J-3 LOCATION (LEGAL) Sec 29-54S-39W RIG NAME: Cheyenne #8
FIELD-POOL Huoton FORMATION Chase
COUNTY/PARISH Moreton STATE KS API. NO.
NAME Anadarko
AND
ADDRESS
ZIP CODE

SPECIAL INSTRUCTIONS Safety Cmt Production
Casing AS Directed by Customer!!
IS CASING/TUBING SECURED? YES NO
LIFT PRESSURE 1800 PSI CASING WEIGHT + SURFACE AREA (3.14 x R^2)
PRESSURE LIMIT 2000 PSI BUMP PLUG TO PSI
ROTATE RPM RECIPROCATE FT No. of Centralizers 14
WELL DATA: BOTTOM TOP
BIT SIZE 7 7/8 OSG/Liner Size 5 1/2
TOTAL 3140 WEIGHT 14
ROT CABLE FOOTAGE 3133
MUD TYPE GRADE
MUD DENSITY LESS FOOTAGE SHOE JOINT(S) 3098 TOTAL
MUD VISC. Disp. Capacity 75.0
NOTE: Include Footage From Ground Level To Hoop In Disp. Capacity

JOB SCHEDULED FOR TIME: HSAI DATE: 2-97 ARRIVE ON LOCATION TIME: 12:20 DATE: 2-97 LEFT LOCATION TIME: DATE: 2-97

TIME	PRESSURE		VOLUME PUMPED BBL		JOB SCHEDULED FOR			ARRIVE ON LOCATION		LEFT LOCATION	
	TBG OR D.P.	CASING	INCREMENT	CUM	INJECT RATE	FLUID TYPE	FLUID DENSITY	TIME	DATE	TIME	DATE
0001 to 2400											
1632	1760		2			H10 9.3					
1634	560		8	5		11 11					
1636	470		10	5		11 11					
1640	500		8	5		11 11					
1644	500		110	5		COAT 11.1					
1700	225		75	5		COAT 12.8					
1705			171			H20 8.3					
1721	380		5			11 11					
1726	275		20	4		11 11					
1736	742		63	4		11 11					
1737	690		65	2		11 11					
1740	670		70	2		11 11					
1742	750		74	2		11 11					
1743	820		75	2		11 11					
1744											

REMARKS

SYSTEM CODE	NO. OF SACKS	YIELD CU. FT/SK	COMPOSITION OF CEMENTING SYSTEMS				SLURRY MIXED	
							BBLs	DENSITY
1.	200	3.2	C+3% 179+ .2% 846+ 2% 51+ 1/4 115 129				110.8	11.1
2.	100	2.0	C+3% 179+ .2% 846+ 2% 51+ 1/4 115 129				35.0	12.8
3.								
4.								
5.								
6.								

BREAKDOWN FLUID TYPE VOLUME DENSITY PRESSURE MAX. MIN.
HESITATION SQ. RUNNING SQ. CIRCULATION LOST YES NO Cement Circulated To Surf. YES NO
BREAKDOWN: PSI FINAL PSI DISPLACEMENT VOL. Bbls TYPE OF WELL OIL CAS STORAGE INJECTION BRINE WATER WILDCAT
Washed Thru Parts YES NO TO FT. MEASURED DISPLACEMENT WIRELINE
PERFORATIONS TO TO CUSTOMER REPRESENTATIVE DS SUPERVISOR
Domaso Castillo