

ORIGINAL

FORM MUST BE TYPED

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: PANHANDLE EASTERN PIPELINE

Operator Contact Person: J. L. ASHTON

Phone (316) 624-6253

Contractor: Name: NA

License: NA

Wellsite Geologist: NA

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 Workovers:

Operator: ANADARKO PETROLEUM CORPORATION

Well Name: LITTELL NO. 1-25

Comp. Date 2/04/50 Old Total Depth 2736

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

10/09/95 NA 10/19/95
Spud Date of START Date Reached TD Completion Date of
OF WORKOVER WORKOVER

API NO. 15-129-00385-00-00 NA (DRILLED 1950)

County MORTON

 - NW - NW - SE Sec. 25 Twp. 34S Rge. 40 X E

2540 Feet from (S)x (circle one) Line of Section

2540 Feet from (E)x (circle one) Line of Section

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

Lease Name LITTELL Well # 1-25

Field Name HUGOTON

Producing Formation CHASE

Elevation: Ground 3345 KB --

Total Depth 2736' PBD 2736'

Amount of Surface Pipe Set and Cemented at 520 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 REWORK JR 7-9-96
(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. 1695

_____ Quarter Sec. _____ Twp. _____ S Rng. _____ E/W

County _____ Docket No. _____

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OIL & GAS CONSERVATION DIVISION
WICHITA, KS

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 John M. Dolan
JOHN M. DOLAN
Title SENIOR TECHNICAL ASSISTANT Date 11/15/95

Subscribed and sworn to before me this 15th day of November
19 95.

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)

ORIGINAL

SIDE TWO

Operator Name ANADARKO PETROLEUM CORPORATION Lease Name LITTELL Well # 1-25
 Sec. 25 Twp. 34S Rge. 40 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	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datums	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	(SEE ORIGINAL WELL LOG RECORD - ATTACHED)		
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
List All E.Logs Run:				

** ORIGINAL COMPLETION STRING		CASING RECORD		<input 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"	10-3/4"	32.75	520'	COMMON	300		
PRODUCTION **	9-3/4"	7"	20.0	2510'	COMMON	600		
PROD. LINER (USED)	(IN 7" CSG.)	4-1/2"	11.6	2300'	MIDCON	100	1/4#FLOC, 2%CC	

Purpose:		Depth		Type of Cement	#Sacks Used	Type and Percent Additives
		Top	Bottom			
<input type="checkbox"/> Perforate						
<input checked="" type="checkbox"/> Protect Casing		50	2300	MIDCON	100	1/4# FLOCELE, 2% CACL (4-1/2" LINER CMTD INSIDE 7"
<input type="checkbox"/> Plug Back TD						CASING, TEMP. SURVEY ATTACHED)
<input type="checkbox"/> Plug Off Zone						

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used) Depth	

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Date of First, Resumed Production, SWD or Inj.	Producing Method							
10/18/95	<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	Water	Bbls.	Gas-Oil Ratio	Gravity
	0		200		0		--	--

Disposition of Gas: **METHOD OF COMPLETION** Production Interval

Vented Sold Used on Lease (If vented, submit ACO-18.)

Open Hole Perf. Dually Comp. Commingled

Other (Specify) 5-1/2" SLOTTED LINER (2479-2736) (ORIGINAL COMPLETION)

WELL LOG

ORIGINAL

COMPANY: Island Gas, Inc.
LEASE: Littell #1
LOCATION: 25-34-39W
COUNTY: Morton *NW 5E*
CONTRACTOR: Walter Kunn Drilling Company
COMMENCED: 1-10-50
COMPLETED: 2-4-50

1,916,000 gas

ROTARY DRILLING:

0
160 Surface Clay & Sand
470 Clay & Sand
500 Red Bed & Clay
535 Red Bed
595 Red Bed
1150 Red Bed & Gyp
1225 Anhydrite & Shale Streaks
1275 Anhydrite
1450 Red Bed & Gyp
1705 Red Bed
1790 Anhydrite
1900 Shale, Red Bed & Anhydrite
2020 Shale & Anhydrite
2125 Anhydrite & Shale Streaks
2230 Lime & Shale
2300 Anhydrite & Lime
2345 Lime
2420 Lime & Anhydrite
2460 Anhydrite & Shale Streaks
2500 Lime & Shale
2550 Lime

CABLE TOOL DRILLING:

2550 Lime
2590 Lime
2610 Lime & Shale
2625 Lime
2643 Red Shale
2674 Lime
2692 Red Shale
2736 Lime
2736 T. D.

CASING:

520' 10-3/4" OD Spiral Weld Casing. Cemented w/300 Sacks
Common Cement. Cement Circulated.
2510' 7" OD 20# 8 Rd Thd Seamless Casing. Cemented w/600
Sacks Common Cement. Cement Circulated.
257' 5-1/2" OD 8 Rd Thd 15# Liner.

ACID:

1,000 First Stage
4,000 Second Stage
18,000 Third Stage

GAS:

2554' First Gas
2554' - 2575' Increase of Gas
2615' - 2625' Increase of Gas
2645' - 2650' Increase of Gas
2694' - 2697' Increase of Gas
2725' - 2730' Increase of Gas

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WICHITA, KS

Well Packet
ORIGINAL

N.L.S. INC.
P.O. BOX 1417
LIBERAL, KANSAS
316-624-4581

FAX. NO: 316.624-6919
800-633-9860
NATION WIDE:

TEMPERTURE SURVEY

DATE 10-13-95

COMPANY: ANADARKO PETROELUM
LEASE: LITTELL
COUNTY: MORTON *Hugoton*
STATE: KANSAS

LOCATION: SEC. 25-34S-40W
WELL #: 1-25
FIELD:
INSTR. NO: RSTO 265

CASING SIZE: 4 1/2 LINER

SET AT:

T.D.:

HOLE SIZE: 7"

FLOAT AT:

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SACKS CEMENT: 100

CALCULATED
FILL UP:

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MIXTURE: COMMON

ZERO POINT: G.L. CONSERVATION DIVISION
WICHITA, KS

REMARKS:

TOP OF CEMENT @ 500'
INSTRUMENT TD 2290'
INSTRUMENT FROM G.L.

*LINER CEMENTED FROM 2300-500'
w/ 100 SK MIDCON CMT
YIELD = 3.7 cf/sk, 11.7 ppg*

BGD 10/16/95

DEPTH

TEMPERATURE °F

0

200

400

600

800

1000

1200

1400

1600

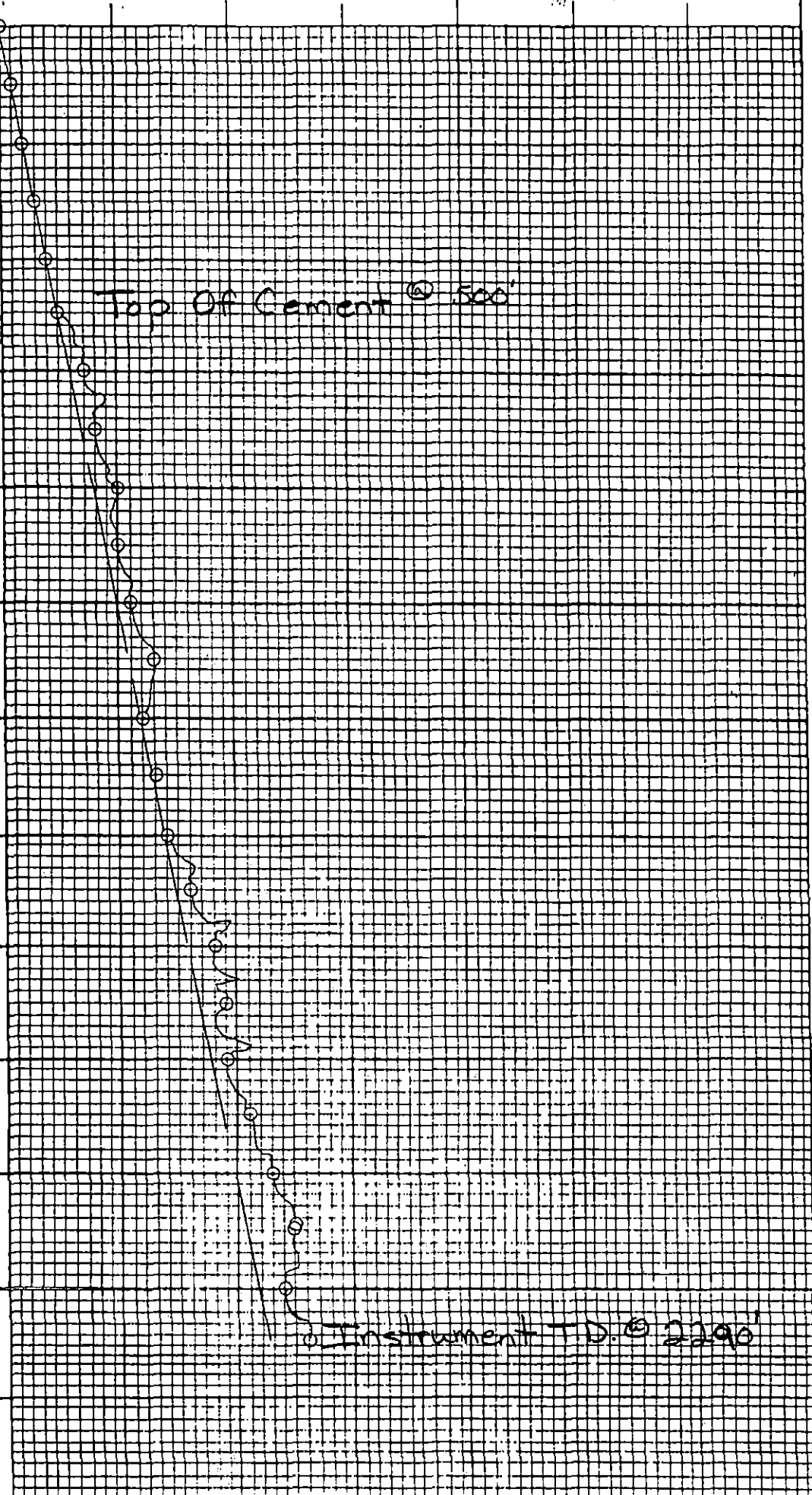
1800

2000

2200

2400

86 96 106 116



Top Of Cement @ 500'

Instrument T.D. @ 2290'

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CONSERVATION DIVISION
WICHITA, KS

CUSTOMER Amesbury Petro Corp Lease WELL NO. 1-25 JOB TYPE 1 1/2" Prod Stk DATE 10-12-95

WELL DATA

FIELD _____ SEC. 25 TWP. 34 RNG. 40^W COUNTY Madison STATE Ks

FORMATION NAME _____ TYPE _____

FORMATION THICKNESS _____ FROM _____ TO _____

INITIAL PROD: OIL _____ BPD. WATER _____ BPD. GAS _____ MCFD _____

PRESENT PROD: OIL _____ BPD. WATER _____ BPD. GAS _____ MCFD _____

COMPLETION DATE _____ MUD TYPE _____ MUD WT. _____

PACKER TYPE _____ SET AT _____

BOTTOM HOLE TEMP. _____ PRESSURE _____

MISC. DATA _____ TOTAL DEPTH _____

	NEW USED	WEIGHT	SIZE	FROM	TO	MAXIMUM PSI ALLOWABLE
CASING		105	4 1/2	KB	2300	
LINER						
TUBING						
OPEN HOLE						SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

JOB DATA

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
Float Collar <u>1 1/2</u>	1	Huaco
Float Shoe <u>Fill Up</u>		
GUIDE SHOE		
CENTRALIZERS	8	
BOTTOM PLUG		
TOP PLUG	1	
HEAD	1	
PACKER		
OTHER <u>Huaco weld X</u>	1 LB	

CALLLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE <u>10-12</u>	DATE <u>10-12</u>	DATE <u>10-12</u>	DATE <u>10-12</u>
TIME <u>0530</u>	TIME <u>0830</u>	TIME <u>0930</u>	TIME <u>1015</u>

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
<u>W. Green</u>	420041	Livak Ks
<u>R. Fluvell</u>	59179	"
<u>M. Longworth</u>	D4360	"
	3404	Hwy 200 Ks
	69510	4734

MATERIALS

TREAT. FLUID _____ DENSITY _____ LB/GAL. API

DISPL. FLUID _____ DENSITY _____ LB/GAL. API

PROP. TYPE _____ SIZE _____ LB.

PROP. TYPE _____ SIZE _____ LB.

ACID TYPE _____ GAL. _____ %

ACID TYPE _____ GAL. _____ %

ACID TYPE _____ GAL. _____ %

SURFACTANT TYPE _____ GAL. _____ IN

NE AGENT TYPE _____ GAL. _____ IN

FLUID LOSS ADD. TYPE _____ GAL.-LB. _____ IN

GELLING AGENT TYPE _____ GAL.-LB. _____ IN

FRIC. RED. AGENT TYPE _____ GAL.-LB. _____ IN

BREAKER TYPE _____ GAL.-LB. _____ IN

BLOCKING AGENT TYPE _____ GAL.-LB. _____

PERFAC BALLS TYPE _____ QTY. _____

OTHER _____

OTHER _____

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DEPARTMENT _____

DESCRIPTION OF JOB _____

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CONSERVATION DIVISION

JOB DONE THRU: TUBING CASING WANNULUS TBG./ANN.

CUSTOMER REPRESENTATIVE X Oly A. Stuck

HALLIBURTON OPERATOR Dennis Coe COPIES REQUESTED _____

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
	100	M. dekon	2 [#]		1/4 # Floate 2% G	3.27	11.1

PRESSURES IN PSI

CIRCULATING _____ DISPLACEMENT _____

BREAKDOWN _____ MAXIMUM _____

AVERAGE _____ FRACTURE GRADIENT _____

SHUT-IN: INSTANT _____ 5-MIN _____ 15-MIN _____

HYDRAULIC HORSEPOWER _____

ORDERED _____ AVAILABLE _____ USED _____

AVERAGE RATES IN BPM _____

TREATING _____ DISPL _____ OVERALL _____

CEMENT LEFT IN PIPE _____

FEET _____ REASON _____

SUMMARY

VOLUMES

PRESLUSH: BBL.-GAL. 20^{BBL} TYPE 2% KCL

LOAD & BKDN: BBL.-GAL. _____ PAD: BBL.-GAL. _____

TREATMENT: BBL.-GAL. _____ DISPL: BBL.-GAL. 35.65

CEMENT SLURRY: BBL.-GAL. 58.2

TOTAL VOLUME: BBL.-GAL. _____

REMARKS



JOB LOG HAL-2013-C

DATE 10-12-95 PAGE NO.

CUSTOMER *Andrews P&T Co* WELL NO. *1-25* LEASE *Little* JOB TYPE *4 1/2 Prod Str* TICKET NO. *881194*

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0530							Time Collected
	0900							Time Ready
	0830							Time on loc.
								ORIGINAL
								Set up Pump Truck
	0920							Hook up to casing w 4 1/2 Hard/mandrel.
	/							Drop Balls
	0930	3	6			150		Start 2 1/2 Klb Alred 20 BBL total
	0932					600		6 3/4 in Pump Balls Then
	0938		14			150		Start Mixing Cement
	0952					150		Finish Mixing Cement
	/		58.2					Start Down wash Pumps & lines
	0955					75		Start Displacement
	1010		35.65			MSU 1100		Plug Down
	1015							Break Loss Float Hatch
								Circulate Fluid They out stop
								Oil NOT Circulate Cement
								Thanks For Calling
								Halliburton
								Energy
								Reeve +
								Crew

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CONSERVATION DIVISION WICHITA, KS



HALLIBURTON

HALLIBURTON ENERGY SERVICES

HAL-1906-N

CHARGE TO: Andaero Petroleum Corp.

ADDRESS: _____

CITY, STATE, ZIP CODE: _____

CUSTOMER COPY

TICKET

No. **881194** - **6**

PAGE 1 OF 1

SERVICE LOCATIONS 1. <u>25540 Loco Ks</u> 2. <u>25530 Hys Tm Ks</u>		WELL/PROJECT NO. <u>1-25</u>	LEASE <u>L TELL</u>	COUNTY/PARISH <u>Moctm</u>	STATE <u>Ks</u>	CITY/OFFSHORE LOCATION	DATE <u>10-12-95</u>	OWNER <u>Andaero P</u>
TICKET TYPE <input checked="" type="checkbox"/> SERVICE JOB? <input type="checkbox"/> YES <input type="checkbox"/> SALES <input checked="" type="checkbox"/> NO		NITROGEN <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	CONTRACTOR	RIG NAME/NO. <u>Brookline Wells</u>	SHIPPED VIA	DELIVERED TO <u>Loc</u>	ORDER NO.	
WELL TYPE		WELL CATEGORY	JOB PURPOSE <u>4 1/2 Prod String</u>	WELL PERMIT NO.	WELL LOCATION <u>East Pella Ks</u>			
REFERRAL LOCATION		INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/PART NUMBER	ACCOUNTING LOC	DESCRIPTION	QTY.	U/M	UNIT PRICE	AMOUNT
000-117		1	MILEAGE	106	Mls	2.85	302.10
000-016		1	Pump change	2300	FT		139.50
		1	50' Top Pkg	1	Each	45.00	45.00
26	847-6316	1	Insert Float shoe	1	Each	285.00	285.00
27	815-1911	1	Fills	1		47.00	47.00
41	806-63605	1	Control valves	8		61.00	488.00
350	890-10802	1	Hauschild A	1	lbs	16.75	16.75
019-000		1	Explosive Charge			50.00	50.00

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

DATE SIGNED: 10/12/95 TIME SIGNED: 1:30 P.M.

do do not require IPC (Instrument Protection). Not offered

SUB SURFACE SAFETY VALVE WAS: PULLED & RETURN POLLED RUN

OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN? YES NO

WE UNDERSTOOD AND MET YOUR NEEDS? YES NO

OUR SERVICE WAS PERFORMED WITHOUT DELAY? YES NO

WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY? YES NO

ARE YOU SATISFIED WITH OUR SERVICE? YES NO

CUSTOMER DID NOT WISH TO RESPOND

PAGE TOTAL: **2628**

FROM CONTINUATION PAGE(S): **2842**

SUB-TOTAL: **2842**

APPLICABLE TAXES WILL BE ADDED ON INVOICE

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

CUSTOMER OR CUSTOMER'S AGENT (PLEASE PRINT): Stuck

CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE): [Signature]

HALLIBURTON OPERATOR/ENGINEER: [Signature]

EMP # 59179

HALLIBURTON APPROVAL: [Signature]

