FORM MUST BE TYPED

SIDE ONE

| ONIGINAL   | 1  |
|--|--|
| STATE CORPORATION COMMISSION OF KANSAS OIL & GAS CONSERVATION DIVISION   | API NO. 15- <u>175-20683-0001</u>  |
| WELL COMPLETION FORM   | CountySEWARD   |
| ACO-1 WELL HISTORY DESCRIPTION OF WELL AND LEASE   | E<br>  |
| Operator: License #  | Feet from SN (circle one) Line of Section  |
| Name:ANADARKO_PETROLEUM_CORPORATION  | Feet from E(()(circle one) Line of Section   |
| Address P. O. BOX 351  | Footages Calculated from Nearest Outside Section Corner: NE, SE, NW or (W) (circle one)  |
| 014-40-4-471   | Lease Name ROBERT F. LEE Well # 2-11   |
| City/State/Zip LIBERAL KANSAS 67905-0351   | Field Name <u>SHUCK</u>  |
| Purchaser: ANADARKO ENERGY SERVICES  | Producing Formation _L_MORROW,U_CHESTER,L_CHESTER  |
| Operator Contact Person: <u>G. B. SMITH</u>  | Elevation: Ground <u>2884</u> KB   |
| Phone (_316_)624-6253  | Total Depth <u>6400</u> PBTD <u>6248</u>   |
| Contractor: Name:NA  | Amount of Surface Pipe Set and Cemented at Feet  |
| License: NA  | Multiple Stage Cementing Collar Used? YesX No  |
| Wellsite Geologist:NA  | If yes, show depth set Feet  |
| Designate Type of Completion   |  |
| New WellRe-EntryX_Workover   | If Alternate II completion, cement circulated from   |
| OilSNDSIOWTemp. Abd.<br>SIGW   | feet depth to w/ sx cmt.   |
| DryOther (Core, WSW, Expl., Cathodic, etc)  If Workover:   | Drilling Fluid Management Plan Re-work, 5-20-98 V. (Data must be collected from the Reserve Pit)   |
| Operator:ANADARKO PETROLEUM CORPORATION  | Chloride contentbbls   |
| Well Name: ROBERT F. LEE 2-11  | Dewatering method used   |
| Comp. Date <u>6-1-83</u> Old Total Depth <u>6400</u>   | Location of fluid disposal if hauled offsite:  |
|  | Operator Name  |
| 4-24-97 5-18-97 Spud Date Of Date Reached TD Completion Date   | County Docket No   |
| workover of workover   | Docket No.   |
| - Room 2078, Wichita, Kansas 67202, within 120 days of the Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information or  | n side two of this form will be held confidential for a period of<br>ne form (see rule 82-3-107 for confidentiality in excess of 12<br>report shall be attached with this form. ALL CEMENTING TICKETS            |
| All requirements of the statutes, rules and regulations promits and the statements herein are complete and correct to the  | mulgated to regulate the oil and gas industry have been fully complied a best of my knowledge.   |
| Signature Shaw D. YOUNG  SHAWN D. YOUNG  Title DIVISION PRODUCTION ENGINEER Date 2/  Subscribed and sworn to before me this 6th day of 7th  19 46.  Notary Public Shally J. Children  11/14/90 | K.C.C. OFFICE USE ONLY Attached  Letter of Confidentiality Attached  C Wirelifie Log Received  C Geologist Report Received  Distribution  KCC SWD/Rep NGPA  KGS Plug ION DIVISIONOTHER  Wichita, Kansas Specify) |
| Date Commission Expires // // / / 8  NOTARY PUBLIC - State of Kansas   | 1 = -  |

NOTARY PUBLIC - State of Kansas SHIRLEY J. CHILDERS Lly Appt. Exp. 4/2

Form ACO-1 (7-91)

|  | ,   |                                      |                     |                              | 0.00         |   |                  |                   |                 |                               |            |  |
|--|---|--------------------------------------|---------------------|------------------------------|--------------|---|------------------|-------------------|-----------------|-------------------------------|------------|--|
| Operator Name <u>ANADARKO_PETROLEUM CORPORATION</u>                          |   |                                      |                     |                              | Lea          | se Na   |                  |                   |                 | _Well # <u>2-11</u>           |            |  |
| Sec. <u>11</u> Twp   | 33S_ Rge.   | 34_                                  | East                |                              | Cou          | nty _   | SEWAR            | RD                |                 |                               |            |  |
| INSTRUCTIONS: S<br>interval tested,<br>hydrostatic press<br>if more space is | time tool<br>ures, botte  | ant tops a<br>open and<br>om hole te | closed, imperature, | flowing                      | and shut-in  | pres  | sures, wheth     | her shut-in p     | ressure rea     | ched stat                     | ic level,  |  |
| Drill Stem Tests<br>(Attach Additi   |   |                                      | Yes ⊠               | l No                         | ⊠<br>Name    | Log   | Formatio         | on (Top), Dept    |                 | □ s                           | ample      |  |
| Samples Sent to G  | eological S   | Survey 🗆                             | Yes 🔯               | No                           |              |   |                  |                   |                 |                               |            |  |
| Cores Taken  | •   |                                      | Yes 🔯               | No.                          |              |   |                  |                   |                 |                               |            |  |
| Electric Log Run 🗵 Yes 🗍 (Submit Copy.)                                      |   |                                      |                     | No No                        |              | SEE ATTACHED ORIGINAL ACO-1 FORM  |                  |                   |                 |                               |            |  |
| List All E.Logs R  | un:   |                                      |                     |                              |              |   |                  |                   |                 |                               |            |  |
|  | TR/   | CER SCAN                             | LOG                 |                              |              |   |                  |                   |                 |                               |            |  |
|  |   |                                      |                     |                              |              |   |                  |                   |                 |                               |            |  |
| ** Origin  | al Completi   | on                                   | CASINO              | RECORD                       |              | ———<br>W 1  |                  |                   | <del></del>     |                               |            |  |
|  | Re  | eport all                            | strings se          | t-condu                      | _            |   |                  | production, e     | tc.             |                               |            |  |
| Purpose of Stri  |   | Hole                                 |                     | Size Casing<br>Set (In O.D.) |              |   | Setting<br>Depth | Type of<br>Cement | # Sacks<br>Used | Type and Percent<br>Additives |            |  |
| ** SURFACE   | ** SURFACE 13-1/2   |                                      | 9-5/8"              |                              | 36.0         |   | 1687             | Н                 | 800             | 2% CaCl,                      | 16% GEL    |  |
| ** PRODUCTION 7-7/8"   |   | 7/8"                                 | 5-1/2"              |                              | 15.5         |   | 6399             | H                 | 600             | 45 GEL, HALAD 9 3%            |            |  |
| Purpose:   | <del></del>   | ONAL CEME                            | NTING/SQUE          | EZE REC                      | ORD          |   |                  |                   |                 |                               |            |  |
| Perforate Protect Cas Plug Back 1  | sing  | Bottom                               | Type of C           | ement                        | #Sacks Use   | ed  |                  | ype and Perce     | nt Additives    |                               |            |  |
| Shots Per Foot   | PERFORATION RECORD - Bridge Plugs Set/1 Shots Per Foot Specify Footage of Each Interval Perforate |                                      |                     |                              |              |   |                  | cture, Shot, (    |                 | ze Record<br>Dept             | th.        |  |
| 3  | 3 5833-5838(U.CHESTER), 5767-5772,5706-57   |                                      |                     |                              |              |   | CID: W/1500      | GAL 7.5% FeHC     | <u> </u>        | 5706-5                        | 5838       |  |
|  |   |                                      |                     |                              |              | FRAC'D:W/5400 GAL 65-70 QUAL FOAMED 35# 570<br>LINEAR GEL&291000 SCF N2 + 50000#20/40 SND |                  |                   |                 |                               |            |  |
|  |   |                                      |                     |                              |              | $\dashv$  |                  | <u> </u>          | <u></u>         |                               |            |  |
| TUBING RECORD  | Size<br>2-3/8   | Size Set At<br>2-3/8" 6077           |                     |                              |              | t   | Liner Run        | ☐ Yes 🗵           | No              |                               |            |  |
| Date of First, R   | lesumed Pro<br>D: 5-13-97   |                                      | SWD or Inj          | . Produ                      | ucing Method | l<br>⊠  | Flowing          | Pumping 🔲         | Gas Lift □      | Other (E                      | Explain)   |  |
| Estimated Produc<br>Per 24 Hours   | tion  | 0il<br>0                             | Bbls.               | Gas                          | Mcf<br>169   | Wat   | er Bbls          |                   | oil Ratio       | Gr                            | avity      |  |
| Disposition of Ga  | ıs:   |                                      |                     |                              | METHOD       | OF CO   | MPLETION         | , ,               | 1               | Production                    | n Interval |  |
| ☐ Vented ☐ So  |   | ed on Leas                           | se                  | ☐ Oper                       | n Hole ⊠     | Perf  | . Duall          | y Comp. / ⊠       | Commingled      | _5706- <u>611</u>             | 14_0A      |  |
| (If vented,  | submit ACO  | - 10.)                               |                     | □ Othe                       | er (Specify) | . <u></u>   | 3                | eh -              | •               |                               |            |  |