

ORIGINAL

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

API NO. 15- 129-21547-0002

County MORTON

SW - SE Sec. 23 Twp. 33 Rge. 41 X E W

Operator: License # 4549

660 Feet from (S)X (circle one) Line of Section

Name: ANADARKO PETROLEUM CORPORATION

1980 Feet from (E)X (circle one) Line of Section

Address P. O. BOX 351

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

City/State/Zip LIBERAL, KANSAS 67905-0351

Lease Name USA BARKER "A" Well # 3

Purchaser: ANADARKO ENERGY SERVICES

Field Name BERRYMAN-RICHFIELD

Operator Contact Person: SHAWN D. YOUNG

Producing Formation TOPEKA, WABAUNSEE

Phone (316) 624-6253

Elevation: Ground 3282 KB --

Contractor: Name: NA

Total Depth 6300 PBDT 5050

License: NA

Amount of Surface Pipe Set and Cemented at 1522 Feet

Wellsite Geologist: NA

Multiple Stage Cementing Collar Used? X Yes No

Designate Type of Completion
 New Well Re-Entry X Workover

If yes, show depth set 3114 Feet

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

If Alternate II completion, cement circulated from
feet depth to w/ sx cmt.

If Workover:

Drilling Fluid Management Plan REWORK 9/16/00
(Data must be collected from the Reserve Pft)
NOT APPLICABLE

Operator: ANADARKO PETROLEUM CORPORATION

Chloride content ppm Fluid volume bbls

Well Name: USA BARKER A-3

Dewatering method used

Comp. Date 1-23-98 Old Total Depth 6300

Location of fluid disposal if hauled offsite:

 Deepening XXX Re-perf. Conv. to Inj/SWD
X Plug Back 5050 PBDT
X Conmingled Docket No. CO 1007
 Dual Completion Docket No.
 Other (SWD or Inj?) Docket No.

Operator Name

Lease Name License No.

9-1-2000 -- 9-18-2000
Date of START Date Reached TD Completion Date of
OF WORKOVER WORKOVER

 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, re completion, 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.

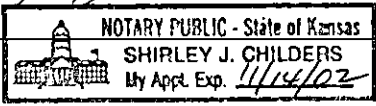
Signature Shawn D. Young
SHAWN D. YOUNG

Title DIVISION PRODUCTION ENGINEER Date 9/12/00

Subscribed and sworn to before me this 21st day of September 19200.0

Notary Public Shirley J Childers

Date Commission Expires



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)

Operator Name ANADARKO PETROLEUM CORPORATION Lease Name USA BARKER "A" Well # 3

Sec. 23 Twp. 33 Rge. 41 East West County MORTON

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 ORIGINAL ACO-1.

** 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"	24.0	1522		445	
** PRODUCTION	7-7/8"	5-1/2"	15.5	5298		370	
** CONDUCTOR		20"	94	48			

ADDITIONAL CEMENTING/SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input checked="" type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	3122-2700	CLASS C	50	2%CC, 1/4# SK FLC

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	
		5172' - 5177' + 4945' - 4953' + 4960' - 4974'		
4	2810 - 2816 + 2822 - 2826 + 2828 - 2834			
4	2947' - 2950'			
4	3080' - 3087' + 3098' - 3108'			
TUBING RECORD	Size 2 3/8"	Set At 4895	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumed Production, SWD or Inj. RESUMED: 9-15-2000		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 0 Bbls.	Gas 869 Mcf	Water 6 Bbls.	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 2810-4974 OA
 Other (Specify) _____

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: DAVID W. KAPPLF

Phone (316) 624-6253

Contractor: Name: CHEYENNE DRILLING

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 PBSD

Commingled Docket No. _____

Dual Completion Docket No. _____

Other (SWD or Inj?) Docket No. _____

11-24-97 12-8-97 1-23-98

Spud Date Date Reached TD Completion Date

API NO. 15- 129-21547

County MORION

C SW SE Sec. 23 Twp. 33 Rge. 41 X W

660 Feet from X (circle one) Line of Section

1980 Feet from X (circle one) Line of Section

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

Lease Name USA BARKER "A" Well # 3

Field Name BERRYMAN

Producing Formation MORROW

Elevation: Ground 3282.0 KB _____

Total Depth 6300 PBSD 5100

Amount of Surface Pipe Set and Cemented at 1522 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set 3175 Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

Chloride content 1400 ppm Fluid volume 700 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. _____

STATE CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
Wichita, Kansas
RECEIVED
SEP 25 2000

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 2-4-98

Subscribed and sworn to before me this 4th day of February 19 98.

Notary Public Lida L. Harvey

Date Commission Expires _____

K.C.C. OFFICE USE ONLY		
F	Letter of Confidentiality Attached	
C	Wireline Log Received	
C	Geologist Report Received	
Distribution		
<input type="checkbox"/>	KCC	<input type="checkbox"/> SWD/Rep <input type="checkbox"/> NGPA
<input type="checkbox"/>	KGS	<input type="checkbox"/> Plug <input type="checkbox"/> Other (Specify)

5-15-99

Operator Name ANADARKO PETROLEUM CORPORATION Lease Name USA PARKER #4 Well # 3

Sec. 23 Twp. 33 Rge. 41
 East West
 County MORTON

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datums	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	CHASE	2098	OSAGE 5880
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	COUNCIL GROVE	2394	KINDERHOOK 6130
List All E.Logs Run: SBT-CCL-GR, DIL, ML, CNL-LDT, SONIC.		WABAUNSEE	2808	VIOLA 6190
		TOPEKA	3038	
		B/HEEBNER	3470	
		KANSAS CITY	3650	
		MARMATON	4168	
		CHEROKEE	4426	
		MORROW	4773	
		MISS. UNCON.	5283	
		STE. GENEVIEVE	5332	
		ST. LOUIS	5470	
		SPERGEN	5649	

CASING RECORD							
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
CONDUCTOR	24"	20"	94.0	48'	NA	NA	NA
SURFACE	12 1/2"	8-5/8"	23.0	1522	CLASS C/ CLASS C.	345/100	16% GEL, 3% SALT/ 2%CC.
PRODUCTION	7-7/8"	5-1/2"	15.5	5298	P+ MC/P+ MC/ 50/50 POZ.	25/95/180	2%CC, 1/4#SK FLC/2%CC 1/4#SK FLC/.5% HALAD 322, 1/4#SK FLC 10% SALT.
			F.O. TOOL @	3175	50/50 POZ	70	.6% HALAD 322, 10% SALT, 4#/SK EA2, 1/4#SK FLC.

ADDITIONAL CEMENTING/SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<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
4	5172-5177, CIBP @ 5100.	ACID: 500 GAL 7 1/2% HCL.	5172-5177
2	4945-4953, 4960-4974.	ACID: 1500 GAL 7 1/2% HCL.	4945-4974 (OA)
		FRAC: 18700 GAL FOAMED GEL & 37000# 16/30	4945-4974 (OA)
		SAND.	

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj. 1-27-98	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 2489	Water Bbls. 3	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: 4945-4974 (OA)