

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: J.M. PETROLEUM CORPORATION

Operator Contact Person: J. L. ASHTON

Phone (316) 624-6253

Contractor: Name: NA

License: NA **ORIGINAL**

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 Workover:

Operator: ANADARKO PETROLEUM CORPORATION

Well Name: SALLEY "1" #1
CONDIT UNIT 7-1

Comp. Date 7-3-85 Old Total Depth 6640

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

5/2/95 NA 5/22/95
~~Spud~~ Date OF START Date Reached TD Completion Date OF
OF WORKOVER WORKOVER

API NO. 15- 175-20,861-0001

County SEWARD

- C - NE - SE Sec. 14 Twp. 34 S Rge. 33 X E W

1980 Feet from (S)N (circle one) Line of Section

660 Feet from (E)W (circle one) Line of Section

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

Lease Name CONDIT UNIT Well # 7-1

Field Name CONDIT SW

Producing Formation CHESTER

Elevation: Ground 2823 KB 2832

Total Depth 6640 PBDT 6450

Amount of Surface Pipe Set and Cemented at 1579 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 994 5-9-96
(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. _____

_____ 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. STATE CORPORATION COMMISSION

Signature John M. Dolan
JOHN M. DOLAN
Title SENIOR TECHNICAL ASSISTANT Date 5/31/95

Subscribed and sworn to before me this 31st day of May, 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 **JUN 05 1995**
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
WICHITA KANSAS
Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other (Specify)

SIDE TWO

Operator Name ANADARKO PETROLEUM CORPORATION Lease Name CONDIT UNIT Well # 7-1

Sec. 13 Twp. 34S Rge. 33 East West
 County SEWARD

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 type="checkbox"/> Log	Formation (Top), Depth and Datums	<input checked="" 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	CASED HOLE	0	30
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	SAND	30	135
List All E.Logs Run:		SAND-REDBED	135	880
		REDBED-ANAHY	880	1295
		REDBED	1295	1580
		ANAHY-REDBED	1580	1965
		REDBED-SHALE; ANAHY	1965	2350
		LIME-SHALE	2350	6640
		T.D.	6640	

CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used				ORIGINAL COMPLETION			
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	24.0	1579	POZ/COMMON	550/200	3%CACL/3%CACL
PRODUCTION	7-7/8	4-1/2	10.5	6640	LITE WT/POZ	75/365	.75%CFR-2/ 10%SALT, .5% CFR-2

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
2	6280 - 6335	ACIDIZE 2750 GAL 7.5% FEHCL	6280-6335
2	6297' - 6302'	FRAC 22,560 GAL GEL DIESEL & 62,500# 20/40 OTTOWA SND	6280-6335
2	6534' - 6536' & 6544' - 6549'		
	CIBP @ 6520' & CIBP @ 6450'		

TUBING RECORD	Size 2-3/8	Set At 6330	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj. 5/17/95	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 15 Bbls.	Gas -- Mcf	Water 2 Bbls.	Gas-Oil Ratio 0 Gravity 39.5

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Conningled 6280' - 6335'

Other (Specify) _____