

ORIGINAL

15-129-21539-00-00

FORM MUST BE TYPED

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

API NO. _____
County MORTON plugged 10-13-97
_____ - C - NW - NE Sec. 1 Twp. 33 Rge. 41 X E

Operator: License # 4549

660 Feet from N/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 RATZLAFF "C" Well # 2

Purchaser: NONE

Field Name DUNKLE

Operator Contact Person: DAVID W. KAPPLF

Producing Formation NONE

Phone (316) 624-6253

Elevation: Ground 3394 KB _____

Contractor: Name: CHEYENNE DRILLING

Total Depth 670 PBTB 0

License: 5382

Amount of Surface Pipe Set and Cemented at 43 Feet

Wellsite Geologist: _____

Multiple Stage Cementing Collar Used? _____ Yes X No

Designate Type of Completion

If yes, show depth set _____ Feet

X New Well _____ Re-Entry _____ Workover

If Alternate II completion, cement circulated from _____

_____ Oil _____ SWD _____ SIOW _____ Temp. Abd.

_____ Gas _____ ENHR _____ SIGW

X Dry _____ Other (Core, WSW, Expl., Cathodic, etc)

feet depth to _____ w/ _____'s x cmt.

If Workover:

Drilling Fluid Management Plan P&A 1-15-98 V.C.
(Data must be collected from the Reserve Pit) CK'd on by Jeff K. on 1-15-98

Operator: _____

Chloride content NA ppm Fluid volume NA bbls

Well Name: _____

Dewatering method used DRY, BACKFILL & RESTORE LOCATION.

Comp. Date _____ Old Total Depth _____

Location of fluid disposal if hauled offsite: _____

_____ Deepening _____ Re-perf. _____ Conv. to Inj/SWD

_____ Plug Back _____ PBTB

_____ Commingled _____ Docket No. _____

_____ Dual Completion _____ Docket No. _____

_____ Other (SWD or Inj?) _____ Docket No. _____

Operator Name _____

Lease Name _____ License No. _____

10-11-97 10-13-97 P&A 10-13-97

Spud Date Date Reached TD Completion Date

_____ 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.

Signature L. Marc Harvey
L. MARC HARVEY

Title DRILLING TECHNICAL ASSISTANT Date 10-24-97

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

Notary Public Freda L. Hinz

Date Commission Expires _____

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

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

SIDE TWO

Operator Name ANADARKO PETROLEUM CORPORATION Lease Name RATZLAFF "C" Well # 2

Sec. 1 Twp. 33 Rge. 41 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 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

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
SURFACE	12-1/4" 17 1/2"	8-5/8" OK	23.0	43	40/60 POZ	*475	6% GEL.
*CEMENT INCLUDES PLUGGING HOLE FROM 0-380'							

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

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	

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. D+A Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	<u>N-A</u>	<u>N-A</u>			

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.) METHOD OF COMPLETION Open Hole Perf. Dually Comp. Conmingled Other (Specify) _____ Production Interval NONE-D&A

