

ORIGINAL 175-20,466-00-01

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, KS 67905-0351

Purchaser: Not Applicable

Operator Contact Person: J. L. Ashton

Phone (316) 624-6253

Contractor: Name: \_\_\_\_\_

License: \_\_\_\_\_

Wellsite Geologist: NA

Designate Type of Completion

New Well  Re-Entry  Workover

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

If Workover/Re-Entry: old well info as follows:

Operator: Anadarko Petroleum Corporation

Well Name: Hitch "G" No. 3

Comp. Date 5-29-80 Old Total Depth 6330

Deepening  Re-perf.  Conv. to Inj/~~SWD~~  
 Plug Back \_\_\_\_\_ PBDT  
 Commingled \_\_\_\_\_ Docket No. \_\_\_\_\_  
 Dual Completion \_\_\_\_\_ Docket No. \_\_\_\_\_  
 Other (~~SWD~~ or Inj?) Docket No. F-26,115

NA NA 5-7-93

Spud Date \_\_\_\_\_ Date Reached TD \_\_\_\_\_ Completion Date \_\_\_\_\_

API NO. 15- \_\_\_\_\_

County Seward

C - SW - SE Sec. 3 Twp. 33S Rge. 34 E/W

660 Feet from S/W (circle one) Line of Section

1980 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 Hitch Unit Well # 1-3

Field Name Hitch Unit

Producing Formation Lower Morrow

Elevation: Ground 2866 KB 2874.5

Total Depth 6330 PBDT 6170

Amount of Surface Pipe Set and Cemented at 1632 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 cnt.

Drilling Fluid Management Plan 6-2-97  
(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, 200 Colorado Derby Building, 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.

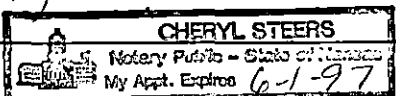
Signature Beverly J. Williams

Title Technical Assistant Date 6-11-93

Subscribed and sworn to before me this 11th day of June, 1993.

Notary Public Cheryl Steers

Date Commission Expires \_\_\_\_\_



RECEIVED  
K.C.C. OFFICE USE ONLY STATE CORPORATION COM  
F  Letter of Confidentiality Attached  
C  Wireline Log Received  
G  Geologist Report Received  
JUN 17 1993  
Distribution  
 KCC  
 KGS  
 SWD/Rep  
 Plug  
CONSERVATION DIVISION  
Wichita, Kansas  
(Specify)  
91

Operator Name Anadarko Petroleum Corporation Lease Name Hitch Unit Well # 1-3

Sec. 3 Twp. 33S Rge. 34  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 checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<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	Old well converted to injection. See original logs.		
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
List All E.Logs Run:				

CASING RECORD <input checked="" 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#	1632	Pozmix Common	600 200	4% gel 2% CaCl 2% CaCl
Production	7 7/8	4 1/2	10.5#	6330	Lite-water SS Pozmix	205 180	.5% tic .5% tic

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
		A/2000 gal 7.5% fe MCA	
		existing perms.	

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
		2 3/8	6041	6041				
Date of First, Resumed Production, SWD or (Inj)			Producing Method					
5-7-93			<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Injecting Other (Explain)					
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Water	Bbls.	Gas-Oil Ratio	Gravity
					350			

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 \_\_\_\_\_