

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

API NO. 15-129-20,992-00-00 NOV 0 1 1990

County...Morton.....FROM CONFIDENTIAL

APP. C... NE... Sec. 22... Twp. 33S... Rge. 40... X West

Operator: License # 4549
Name Anadarko Petroleum Corporation
Address P.O. Box 351
City/State/Zip Liberal, KS. 67905-0351

4030..... Ft North from Southeast Corner of Section
1450..... Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)

Purchaser...NA

Lease Name...MOBIL "A".....Well #...2

Field Name...Grasslands Prospect

Operator Contact Person M. L. Pease
Phone (316) 624-6253

Producing Formation...NA

Elevation: Ground...3309.....KB...3323

Contractor: License # 5842
Name Gabbert-Jones, Inc.

Wellsite Geologist Rick Hall
Phone...NA

Designate Type of Completion
X New Well ___ Re-Entry ___ Workover

Oil ___ SWD ___ Temp Abd
X Gas ___ Inj ___ Delayed Comp.
Dry ___ Other (Core, Water Supply etc.)

If OWNG: old well Info as follows:
Operator
Well Name
Comp. Date Old Total Depth

WELL HISTORY

Drilling Method:
X Mud Rotary ___ Air Rotary ___ Cable
8/3/89 8/15/89 NA
Spud Date Date Reached TD Completion Date
6400 2763
Total Depth PBTD

Amount of Surface Pipe Set and Cemented at 1631 feet
Multiple Stage Cementing Collar Used? ___ Yes X No
If yes, show depth set...feet
If alternate 2 completion, cement circulated from...feet depth to...w/...SX cmt
Cement Company Name Dowell Schlumberger Inc.
Invoice # 03-12-1884

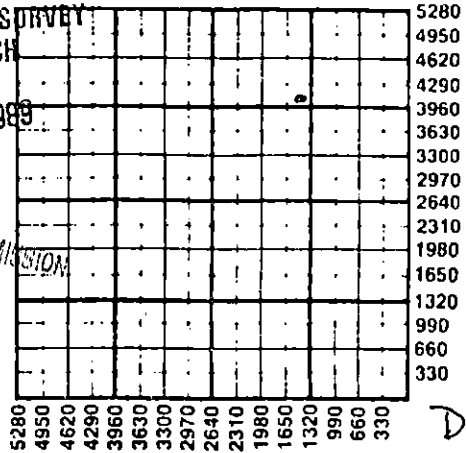
KANSAS GEOLOGICAL SURVEY
WICHITA BRANCH

SEP 07 1989

RECEIVED
STATE CORPORATION COMMISSION

SEP 7 1989

CONSERVATION DIVISION
Wichita, Kansas



WATER SUPPLY INFORMATION

Disposition of Produced Water: ___ Disposal
Docket # _____ ___ Repressuring

Questions on this portion of the ACO-1 call:
Water Resources Board (913) 296-3717

Source of Water:
Division of Water Resources Permit #
Groundwater.....Ft North from Southeast Corner
(Well)Ft West from Southeast Corner of
Sec Twp Rge East West
Surface Water.....Ft North from Southeast Corner
(Stream, pond etc).....Ft West from Southeast Corner
Sec Twp Rge East West
X Other (explain) Water provided by contractor
(purchased from city, R.W.D. #)

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date of any well. Rule 82-3-130, 82-3-107 and 82-3-106 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 drillers time log shall be attached with this form. 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 M. L. Pease
Title Division Production Manager Date 9/4/89

Subscribed and sworn to before me this 4th day of September 1989.
Notary Public Cheryl Steers

Date Commission Expires



K.C.C. OFFICE USE ONLY
Letter of Confidentiality Attached
Wireline Log Received
Drillers Timelog Received
Distribution
KCC ___ SWD/Rep ___ NGPA
KGS ___ Plug ___ Other
(Specify)
DO#1

Operator Name Anadarko Petroleum Corporation Lease Name MOBIL "A" Well # 2

Sec 22 Twp 33S Rge 40 East West County Morton **RELEASED**

NOV 01 1990

WELL LOG

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.

FROM CONFIDENTIAL

Drill Stem Tests Taken Yes No
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No

Formation Description
 Log Sample

Name	Top	Bottom
Sand	0	90
Sand-Clay-GYP	90	414
Redbed-GYP	414	890
Redbed-GYP-Sand	890	1200
Sand-GYP	1200	1634
ANHY-Shale	1634	1910
Shale-ANHY	1910	2290
Shale-Lime	2290	2595
Lime-Shale	2595	6400
TD	6400	

SEE ATTACHED FM TOPS

CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used							
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	1631	CLASS H	700	4% Diacel
Production	7 7/8	5 1/2	14	2763	CLASS C	ME	10% Diacel

PERFORATION RECORD		Acid, Fracture, Shot, Cement Squeeze Record	
Shots Per Foot	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)	Depth
	NA		

TUBING RECORD	Size	Set At	Packer at	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First Production	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (explain)				
NA					

Estimated Production Per 24 Hours	Oil	Gas	Water	Gas-Oil Ratio	Gravity
	Bbls	MCF	Bbls	CFPB	

METHOD OF COMPLETION Production Interval

Disposition of gas: Vented Open Hole Perforation
 Sold Other (Specify) Delayed
 Used on Lease

STATUS: Drilling Completed

(1) Cmt 8 5/8" w/500 sxs 50/50 Class "H", 2% cc, Cmt circ
 (2) Cmt 5 1/2" w/175 sxs Class "C", 10 Diacel "D", 2% cc, 1/4#/sx Flocele

RELEASED

ORIGINAL

ATTACHMENT

MOBIL "A" NO. 2
SECTION 22-33S-40W
MORTON COUNTY, KANSAS

JAN 0 2 1991

FROM CONFIDENTIAL

<u>FORMATION</u>	<u>DEPTH</u>	<u>SUBSEA</u> (<u>GL 3309</u>)
BASE STONE CORRAL	1650 ✓	+1658
TOP CHASE GROUP	2378	+931
TOP COUNCIL GROVE	2688	+621
TOP ADMIRE	2914	+395
TOP WABAUNSEE	3116	+193
TOP TOPEKA	3357	-48
TOP HEEBNER	3866 ✓	-557
TOP TORONTO	3882 ✓	-573
TOP LANSING	3970 ✓	-661
TOP KANSAS CITY	4372	-1063
TOP MARMATON	4624 ✓	-1315
TOP CHEROKEE	4858 ✓	-1549
TOP MORROW	5374 ✓	-2065
TOP CHESTER	5906	-2597
TOP STE. GENEVIEVE	5934	-2625
TOP ST. LOUIS	6064	-2755

RECEIVED
STATE CORPORATION COMMISSION

DEC 7 1990

CONSERVATION DIVISION
Wichita, Kansas

GABBERT-JONES
DRILLERS WELL LOG

ORIGINAL

RELEASED

MOBIL "A" #2
SEC. 22-33S-40W
MORTON COUNTY, KS

NOV 0 1 1990

FROM CONFIDENTIAL

Commenced: 8-3-89
Completed: 8-16-89
Operator: ANADARKO PETROLEUM CORP. R-12

Depth		Formation	Remarks
From	To		
0	90	Sand	Ran 40jts of 24# 8.5/8" csg LD @ 1631' w/575 sks Posmix -4% Gel - 2%CC 200sks Common - 2%CC PD @ 5:00PM 8-4-89
90	414	Sand-Clay-Gyp	
414	890	Redbed-Gyp	
890	1200	Redbed-Gyp-Sand	
1200	1634	Sand-Gyp	
1634	1910	Anhy-Shale	Ran 64jts of 5 1/2" 14# csg LD @ 2763' w/175 sks class C - 10%D CD 2%CC - 1/4#CF PD @ 4:45 PM 8-16-89 RR @ 5:45 PM 8-16-89
1910	2290	Shale-Anhy	
2290	2595	Shale-Lime	
2595	6400	Lime-Shale	
6400' - TD			

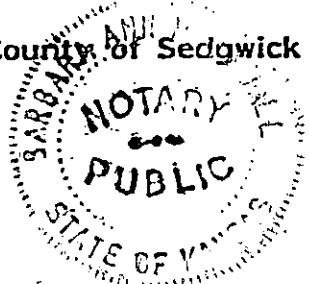
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SEP - 7 1989

STATE CORPORATION COMMISSION
Topeka, Kansas

State of Kansas
County of Sedgwick

I, the undersigned, being duly sworn on oath, state that the above Drillers' Well Log is true and correct to the best of my knowledge and belief and according to the records of this office.



GABBERT-JONES, INC.

James S. Sutton, II
James S. Sutton, II - President

Subscribed & sworn to before me this
22nd day of Aug 1989

Barbara Ann Marshall
Barbara Ann Marshall

My Commission expires Aug. 15, 1992

CEMENTING SERVICE REPORT

ORIGINAL
DOWELL SCHLUMBERGER INCORPORATED

TREATMENT NUMBER 03-12-1884 DATE 8/14/89
STAGE 215 DS DISTRICT WISSER, KS

DS-496 PRINTED IN U.S.A.

WELL NAME AND NO. MOBIL A #2
LOCATION (LEGAL) SQ 22-33S-40W
FIELD-POOL FORMATION
COUNTY/PARISH MOFTON STATE KANSAS APL NO.

NAME ANADARDO RELEASED
AND NOV 01 1990
ADDRESS

SPECIAL INSTRUCTIONS FROM CONFIDENTIAL
CMT 8 7/8" CASING W/
575 SCS 50/50 (P2/H) + 4% D2A
+ 2% SI
200 SCS CLASS H + 2% SI

IS CASING/TUBING SECURED? YES NO
LIFT PRESSURE 675 PSI CASING WEIGHT - SURFACE AREA (3.14 x R²)
PRESSURE LIMIT 3000 PSI BUMP PLUG TO 500 PSI
ROTATE - RPM RECIPROCATE - FT No. of Centralizers

RIG NAME: GARRET JOES
WELL DATA: BIT SIZE CSG/Liner Size 8 5/8
TOTAL DEPTH WEIGHT 24
 ROT CABLE FOOTAGE 1645.4
MUD TYPE GRADE
 BHST THREAD 8 1/2
 BHCT
MUD DENSITY LESS FOOTAGE SHOE JOINT(S) 41.71 TOTAL 102.2
MUD VISC. Disp. Capacity 100.2

NOTE: Include Footage From Ground Level To Head In Disp. Capacity

Floor	TYPE	GALVAN-BALL	TYPE	
	DEPTH	1604	DEPTH	
Shoe	TYPE	RAZER	TYPE	
	DEPTH	1645	DEPTH	

Head & Plugs TBG D.P. SQUEEZE JOB
 Double SIZE TOOL TYPE
 Single WEIGHT DEPTH
 Swage GRADE TAIL PIPE: SIZE DEPTH
 Knockoff THREAD TUBING VOLUME Bbls
TOP SW NEW USED CASING VOL. BELOW TOOL Bbls
BOT OW DEPTH TOTAL Bbls
ANNUAL VOLUME Bbls

TIME	PRESSURE		VOLUME PUMPED bbl		JOB SCHEDULED FOR TIME: 1330 DATE: 8/14			ARRIVE ON LOCATION TIME: 1315 DATE: 8/14		LEFT LOCATION TIME: 1745 DATE: 8/14	
	TBG OR D.P.	CASING	INCREMENT	CUM	INJECT RATE	FLUID TYPE	FLUID DENSITY	SERVICE LOG DETAIL			
0001 to 2400								PRE-JOB SAFETY MEETING			
1558		0	10		5.45	H ₂ O	-	START WASTE			
1600		100	147		5.36	CMT	13.5	START LEAD			
1627		110	37		6.10	CMT	14.5	START TAIL			
1637		0	-		-	-	-	SHUTDOWN - DROP AVG			
1638		0	102.2		6.6	H ₂ O	-	START DISPLACEMENT			
1652		710	82		6.0	H ₂ O	-	CEMENT TO SURFACE			
1658		700	92		2.0	H ₂ O	-	LOWER PUMP RATE			
1703		1400	102.2		2.0	H ₂ O	-	BUMP PLUG			
1704		-	-		-	H ₂ O	-	BLOOD PRESSURE			

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CONSERVATION DIVISION
Wichita, Kansas

REMARKS

SYSTEM CODE	NO. OF SACKS	YIELD CU. FT/SK	COMPOSITION OF CEMENTING SYSTEMS		SLURRY MIXED	
					BBLs	DENSITY
1	575	1.44	50/50 (P2/H)	+ 4% D2A + 2% SI	147.5	13.5
2	200	1.05	CLASS H	+ 2% SI	37.4	16.45
3						
4						
5						
6						

BREAKDOWN FLUID TYPE VOLUME DENSITY PRESSURE MAX. 1400 MIN. 0
 HESITATION SO. RUNNING SO. CIRCULATION LOST YES NO Cement Circulated To Surf. YES NO 20 Bbls
BREAKDOWN PSI FINAL PSI DISPLACEMENT VOL. 102.2 Bbls TYPE OF WELL OIL STORAGE BRINE WATER
Washed Thru Perfs YES NO TO FT. MEASURED DISPLACEMENT WIRELINE GAS INJECTION WILDCAT
PERFORATIONS CUSTOMER REPRESENTATIVE DS SUPERVISOR
TO TO SHILLING JOE LMA

DOWELL SCHLUMBERGER INCORPORATED
 P.O. BOX 4378 HOUSTON, TEXAS 77210

CUSTOMER

ORIGINAL

OILFIELD SERVICES
 INDUSTRIAL SERVICES

DSI SERVICE ORDER
 RECEIPT AND INVOICE NO.
03-12-1884

DSI SERVICE LOCATION NAME AND NUMBER
ULYSSES VS

CUSTOMER NUMBER _____ CUSTOMER P.O. NUMBER _____

TYPE SERVICE CODE **275** BUSINESS CODES _____

CUSTOMER'S NAME **ANADARKO** **RELEASED**

WORKOVER NEW WELL OTHER W N API OR IC NUMBER _____

ADDRESS _____ **NOV-01-1990**

ARRIVE LOCATION **8** MO. **4** DAY **89** YR **1315** TIME

CITY, STATE AND ZIP CODE _____

SERVICE ORDER RECEIPT

DSI will furnish and Customer shall purchase materials and services required in the performance of the following SERVICE INSTRUCTIONS or DSI INDUSTRIAL SERVICE CONTRACT NO. _____ in accordance with the terms and conditions as printed on the reverse side of this form.

I certify that the materials and services listed were authorized and received and all services performed in a workmanlike manner and that I have the authority to accept and execute this document.

CMT 85/8 W/
575 SCS 50/50 (P2/H) + 4% 020 + 27051
200 SCS CLASS H + 29651

JOB COMPLETION **8** MO. **4** DAY **89** YR **1315** TIME

STATE **KANSAS** CODE _____ COUNTY/PARISH **MORTON** CODE _____ CITY _____

SIGNATURE OF CUSTOMER OR AUTHORIZED REPRESENTATIVE
John Shelding

WELL NAME AND NUMBER / JOB SITE
MOBIL A#2

LOCATION AND POOL / PLANT ADDRESS
SEC 22-33S-45W

SHIPPED VIA
DS

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
059200 002	MILEAGE	MI	45	2.40	108.00
048213 000	EQUIPMENT CHARGE	EA	1	925.00	925.00
049102 000	TRANSPORTATION	TOW MI	1265.40	0.80	1265.40
049105 000	SERVICE CHARGE	CFT	834	1.08	900.72
059697 000	APRIL RUBBER	EA	1	110.00	110.00
048557 000	8 1/2" TOP WOODEN PUCK	EA	1	86.00	86.00
056704 085				140.00	140.00
040015 000	CLASS H CMT	CFT	488	6.85	3342.80
045008 000	LITER 3- RECEIVED	CFT	287	2.30	660.10
067005 100	SI, CILLUM CARBIDE	LB	1342	0.32	429.44
045014 050	DID, BOTTOM HSE	LB	1932	0.13	251.16
RECEIVED					

FIELD ESTIMATE \$ ~~805.00~~ **\$133.62** SUB TOTAL

LICENSE/REIMBURSEMENT FEE _____

REMARKS: **THANK YOU FOR USING D.S.**

STATE _____ % TAX ON \$ _____
 COUNTY _____ % TAX ON \$ _____
 CITY _____ % TAX ON \$ _____

SIGNATURE OF DSI REPRESENTATIVE **JOE LIMA** TOTAL \$ _____