

ORIGINAL

FORM MUST BE TYPED

SIDE ONE

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
LIBERAL, KANSAS 67905-0351
City/State/Zip
Purchaser: TEXACO TRADING & TRANSPORTATION
Operator Contact Person: J. L. ASHTON
Phone (316) 624-6253
Contractor: Name: NA
License: NA
Wellsite Geologist: NA
Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD SIOH Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover:
Operator: ANADARKO PETROLEUM CORPORATION
Well Name: SAUNDERS "A" NO. 1
Comp. Date 11/14/64 Old Total Depth 6078'
 Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PBTB
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____
12/14/95 NA 1/19/96
Spud Date Date Reached TD Completion Date

API NO. 15-175-00119 ⁻⁰⁰⁰¹ NA (SPUD 10/06/64)
County SEWARD
- - C - NW Sec. 35 Twp. 32S Rge. 31 E
3960 Feet from (S)N (circle one) Line of Section
3960 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 SAUNDERS "A" Well # 1
Field Name MASSONI
Producing Formation HODGES "A"
Elevation: Ground 2776.5' KB --
Total Depth 6078' PBTB 4907'
Amount of Surface Pipe Set and Cemented at 2437 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 608 Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan REWORK 976 3-19-96
(Data must be collected from the Reserve Pit)
NOT APPLICABLE
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used RECEIVED
KANSAS CORPORATION COMMISSION
Location of fluid disposal if hauled offsite:
MAR 18 1996
Operator Name _____
Lease Name _____ License No. _____
CONSERVATION DIVISION
_____ Quarter Sec. _____ Twp. _____ S Rng. WICHITA, KS 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 John M. Dolan
JOHN M. DOLAN
Title SENIOR TECHNICAL ASSISTANT Date 3/14/96
Subscribed and sworn to before me this 14th day of March
19 96.
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
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other
(Specify)

SIDE TWO

Operator Name ANADARKO PETROLEUM CORPORATION Lease Name SAUNDERS "A" Well # 1
 Sec. 35 Twp. 32S Rge. 31 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 Datums <input type="checkbox"/> Sample <table border="1"> <thead> <tr> <th>Name</th> <th>Top</th> <th>Datum</th> </tr> </thead> <tbody> <tr><td>TORONTO</td><td>4304</td><td></td></tr> <tr><td>LANSING</td><td>4414</td><td></td></tr> <tr><td>LANSING</td><td>4684</td><td></td></tr> <tr><td>MARMATON</td><td>5040</td><td></td></tr> <tr><td>SAND</td><td>5514</td><td></td></tr> <tr><td>MORROW SHALE</td><td>5526</td><td></td></tr> <tr><td>MORROW SAND</td><td>5548</td><td></td></tr> <tr><td>CHESTER</td><td>5582</td><td></td></tr> <tr><td>CHESTER SAND</td><td>5740</td><td></td></tr> <tr><td>ST. GENEVIEVE</td><td>5780</td><td></td></tr> <tr><td>ST LOUIS</td><td>5854</td><td></td></tr> </tbody> </table>	Name	Top	Datum	TORONTO	4304		LANSING	4414		LANSING	4684		MARMATON	5040		SAND	5514		MORROW SHALE	5526		MORROW SAND	5548		CHESTER	5582		CHESTER SAND	5740		ST. GENEVIEVE	5780		ST LOUIS	5854	
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Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																																					
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																																					
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																																					
List All E.Logs Run:																																						

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	2437'	POZMIX	850	2% CACL
** PRODUCTION	7-7/8 "	4-1/2"	10.5	5590'	POZMIX	250	1/4#FLOC/SX

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
	SET CIBP @ 5050' & DUMP 1 SX CMT ON TOP		
4	PERFORATE 4950-59, 4935-44, 4928-31 (HODGES "B")		
4	SET CMT RTNR. @ 4925' & PERF 4909-12, 4899-4902	(HODGES "A")ACIDIZE W/800 GAL 15% FEHCL	4899-4912 OA
	SET CMT RTNR. @ 4907' (NEW PBYD)		

TUBING RECORD		Size 2-3/8"	Set At 5165'	Packer At --	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj. 1/13/96		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 2 Bbls.	Gas TSTM Mcf	Water 35 Bbls.	Gas-Oil Ratio 0	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 (HODGES "A") 4899-4902