

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

ORIGINAL

API NO. 15- 025-21189-00-00

Operator: License # 31321
Name: Louis Dreyfus Natural Gas Corp
Address Suite 600
14000 Quail Springs Parkway
City/State/Zip Okla. City, OK 73134
Purchaser: GPM 10-20-99
Operator Contact Person: Bob Blevins
Phone (405) 749-1300
Contractor: Name: Abercrombie RTD, Inc.
License: 30684
Wellsite Geologist: NA
Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Ab.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

County Clark
160' S & 10' E of
E/2' W / 2' N Sec. 5 Twp. 35S Rge. 25 X W
1480' Feet from N (circle one) Line of Section
1000' Feet from E (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)
Lease Name Theis W Well # 2-5
Field Name McKinney
Producing Formation Chester
Elevation: Ground 2068' KB 2080'
Total Depth 6100' PBTD 6044'
Amount of Surface Pipe Set and Cemented at 829 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.

RECEIVED
OCT 20 1999
CONSERVATION DIVISION
WICHITA, KANSAS
STAFF REPORT TO THE COMMISSION

If Workover:
Operator: _____
Well Name: _____
Comp. Date _____ Old Total Depth _____
_____ Deepening _____ Re-perf. _____ Conv. to Inj/SWD
_____ Plug Back _____ PBTD
_____ Commingled _____ Docket No. _____
_____ Dual Completion _____ Docket No. _____
_____ Other (SWD or Inj?) _____ Docket No. _____
9/9/99 9/19/99 10/15/99
Spud Date Date Reached TD Completion Date

Drilling Fluid Management Plan Att. 1, 10-26-99 USC
(Data must be collected from the Reserve Pit)
Chloride content 2800 ppm Fluid volume 800 bbls
Dewatering method used Evaporation
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.

Signature Lennas Dawyer
Title Regulatory Technician Date 10/15/99
Subscribed and sworn to before me this 15th day of October,
19 99.
Notary Public Lorrie A. Renfro
Date Commission Expires 9-01-01



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)

X

Operator Name Louis Dreyfus Natural Gas Corp Lease Name Theis W Well # 2-5

Sec. 5 Twp. 35S Rge. 25 East West
 County Clark

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	Heebner	4358'	-2278
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Toronto	4404'	-2324
List All E.Logs Run:		Lansing	4532'	-2452
High Resolution-Dual Induction Focused		Marmaton	5268'	-3188
Gamma Ray Log		Morrow Shale	5770'	-3690
Compensated Z-Densilog CN Minilog - GR		Chester	5838'	-3758
Cement Bond Log - GR - CCL		E-log TD	6102'	-4022

CASING RECORD <input type="checkbox"/> New <input checked="" 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#	829'	Lite Water Class "A"	250 150	8% gel w/3%cc 3%cc
Production	7-7/8"	4-1/2"	11.6#	6099'	Premium	225	10% Calseal, 10% Salt .6% Halad 322

ADDITIONAL CEMENTING/SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input checked="" type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	Surf 832'	Cl "A" w/3%cc	100	Finished cementing surface casing w/no returns. Ran 150' of 1" pipe in annulus. Pumped 100 sx. cement. Circulated cmt. in cellar. POH w/1" pipe.

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	Depth
1 spf	5974-80'		Fraced w/36000 gal X-link 30# gel 2% KCl trtd.wtr; 36000	5840-5980
1 spf	5932-34'			
2 spf	5914-26'		gal 20% gelled HCl acid & 10,000 gal Slick 2% KCl trtd. wtr. All fluids were pumped @ 30 quality CO2.	
1 spf	5868-72'			
1 spf	5852-56'			
1 spf	5840-44'			

TUBING RECORD	Size <u>2-3/8"</u>	Set At <u>5950'</u>	Packer At <u>NA</u>	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj. <u>10/9/99</u>	Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil <u>NA</u> Bbls.	Gas <u>600</u> Mcf	Water <u>16</u> Bbls.	Gas-Oil Ratio <u>NA</u> Gravity <u>NA</u>

Disposition of Gas: **METHOD OF COMPLETION** Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled 5840-5980'

(If vented, submit ACO-18.) Other (Specify) _____

ALLIED CEMENTING CO., INC.

ORIGINAL

Federal Tax I.D.# 48-0727860

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Med. Lodge, Ks.

DATE 9-10-99	SEC. 5	TWP. 35S	RANGE 25W	CALLED OUT 2:00 A.M.	ON LOCATION 5:00 A.M.	JOB START 11:15 A.M.	JOB FINISH 3:00 P.M.
LEASE Theis	WELL# 2-5	LOCATION Englewood, Ks. 4 1/4 W-1/2 S		COUNTY CLARK	STATE Ks.		
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR Abercrombie RTD
 TYPE OF JOB Surface Csg.
 HOLE SIZE 12 1/4 T.D. 829'
 CASING SIZE 8 5/8 x 24 DEPTH 829'
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX 100 MINIMUM 50
 MEAS. LINE _____ SHOE JOINT 41.82
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT 52 Bbls Fresh H₂O

OWNER Louis Dreyfus Natural Gas
 CEMENT
 AMOUNT ORDERED 250 sx Lite water + 3% cc
1/4# Flo-Seal 250 sx CLASS A + 3% cc

EQUIPMENT
 PUMP TRUCK CEMENTER Larry Dreiling
 # 352 HELPER Shane Winsor
 BULK TRUCK
 # 240 DRIVER mark Brunhardt
 BULK TRUCK
 # _____ DRIVER _____

COMMON A	250	@ 7.55	1897.50
POZMIX		@	
GEL		@	
CHLORIDE	17	@ 28.00	476.00
CEMENT	250	@ 6.65	1662.50
FLO-SEAL	63#	@ 1.15	72.45
		@	
		@	
HANDLING	500	@ 1.05	525.00
MILEAGE	500 x .75	.04	1560.00

TOTAL \$6183.45

REMARKS:

Pipe on Bottom - Break Circ.
mix + Pump 250sx Lite water + 3% cc
1/4# Flo-Seal 150sx CLASS A + 3% cc
Release Plug Pump + Displace Plug
w/ 52 Bbls. Fresh H₂O. Did not bump plug
loss Returns Run 150' 1" Cement
100sx. CLASS A + 3% cc. Cement circ.
In Cellar

SERVICE

DEPTH OF JOB	829'		
PUMP TRUCK CHARGE			580.00
EXTRA FOOTAGE		@	
MILEAGE	78	@ 2.85	N/C
PLUG TOP Rubber		@ 90.00	90.00
		@	
		@	

TOTAL \$670.00

CHARGE TO: Abercrombie RTD
 STREET _____
 CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

	@		
	@		
	@		
	@		
	@		

TOTAL _____

To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____
 TOTAL CHARGE \$6853.45
 DISCOUNT 1370.69 IF PAID IN 30 DAYS
 Net # 5482.76

SIGNATURE x W. C. Craig

PRINTED NAME x W. C. CRAIG

RECEIVED
STATE BOARD OF PROFESSIONAL ENGINEERS

OCT 26 1999

CONSERVATION DIVISION
Wichita, Kansas

OCT. 7. 1999 3:27PM

HALLIBURTON SERVICES

JOB SUMMARY

ORDER NO. 70006

90100197 ORIGINAL NO. 300 9/28/99

REGION North America	NWA/COUNTRY CENTRAL	STATE KANSAS	COUNTY CLARK
MAWID/EMP # MC850107-106973	EMPLOYEE NAME KOBELT WALDEN	POL DEPARTMENT ZT	
LOCATION BURNS FLAT, OK	COMPANY LOUIS DREYFUS NATURAL GAS	CUSTOMER REP / PHONE LEONARD FRANKLIN 405-202-2923	
TICKET AMOUNT	WELL TYPE 02	API / UWI #	
WELL LOCATION W/ENGLEWOOD, K7	DEPARTMENT ZT	JOB PURPOSE CODE 025 CEMENT 4 1/2 PRODUCTION CASING	
LEASEY WELL # THEIS # 2-5	SEC / TWP / RNS 5-359-25W		

HEB EMP NAME/EMP#(EXPOSURE HOURS)	HRS	HEB EMP NAME/EMP#(EXPOSURE HOURS)	HRS	HEB EMP NAME/EMP#(EXPOSURE HOURS)	HRS	HEB EMP NAME/EMP#(EXPOSURE HOURS)	HRS
R. WALDEN-106973	9						
R. PATTERSON-106240	9						
L. HALL-105890	9						

HEB UNIT NUMBERS	R/T MILES	HEB UNIT NUMBERS	R/T MILES	HEB UNIT NUMBERS	R/T MILES	HEB UNIT NUMBERS	R/T MILES
420213	320						
53920-78335	320						
54215-75337	320						

Form Name _____ Type: _____
 Form Thickness _____ From _____ To _____
 Packer Type _____ Sat At _____
 Bottom Hole Temp. _____ Pressure _____
 Misc. Data _____ Total Depth **6110**

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY	MAKE
Float Collar	1	
Float Shoe		
Guide Shoe	1	
Centralizers	10	
Bottom Plug		
Top Plug Sub Blun.	1	
Head G LATCH	1	
Packer		
Other		

MATERIALS

Treat Fluid	Density	Lb/Gal
Disp. Fluid	Density	Lb/Gal
Prop. Type	Size	Lb.
Prop. Type	Size	Lb.
Acid Type	Gal.	%
Acid Type	Gal.	%
Surfactant	Gal.	In
NE Agent	Gal.	In
Fluid Loss	Gal/Lb	In
Gelling Agent	Gal/Lb	In
Fric. Red.	Gal/Lb	In
Breaker	Gal/Lb	In
Blocking Agent	Gal/Lb	
Perpac Balls	Qty.	
Other		
Other		
Other		
Other		

DATE	CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
9-19-99	1330	1900	9-20-99	9-20-99
9-20-99			0515	0305

WELL DATA

	NEW/USED	WEIGHT	SIZE	FROM	TO	MAX ALLOW
Casing	N	10.5	4 1/2	0	6128	
Liner						
Liner						
Tbg/D.P.						
Tbg/D.P.						
Open Hole						SHOTS/FT.
Perforations						
Perforations						
Perforations						

HOURS ON LOCATION		OPERATING HOURS		DESCRIPTION OF JOB
DATE	HOURS	DATE	HOURS	
9-19-99	5	9-20-99	1	CEMENT 4 1/2 PRODUCTION CASING
9-20-99				
TOTAL		TOTAL		

ORDERED _____ **HYDRAULIC HORSEPOWER** _____
 Avail. _____ Used _____
TREATED _____ **AVERAGE RATES IN BPM** _____
 Disp. _____ Overall _____
FEET **41** **CEMENT LEFT IN PIPE** _____
 Reason **Requested Suck Joint**

CEMENT DATA

STAGE	SACKS	CEMENT	BULK/SKS	ADDITIVES	YIELD	LBS/GAL
1	225	PREMIUM	10% CALSEAL - 10% SALT - 5% HALAD-322		1.58	14.6

Circulating Breakdown _____	Displacement _____	Preflush _____	Gal - BB 10	Type H²O
Average _____	Maximum _____	Load & Bldg _____	Gal - BB1 _____	Pack BB1 - Gal _____
Shut In: Instant _____	Frac Gradient _____	Treatment _____	Gal - BB1 _____	Disp BB1 - Gal 94.5
	5 Min _____	Cement Slurr _____	Gal - BB1 63.1	
	15 Min _____	Total Volume _____	Gal - BB1 _____	

Free Ring #1 _____ Free Ring #2 _____ Free Ring #3 _____ Free Ring #4 _____
THE INFORMATION STATED HEREIN IS CORRECT CUSTOMER'S REPRESENTATIVE SIGNATURE _____

JOB LOG

REGION North America	NW/COUNTRY USA	DATE
MOBILE/EMP # HCPEN107-101473	EMPLOYEE NAME R. Scott Walden	POL DEPARTMENT ZT
LOCATION Fract. Flat OK	COMPANY Louisiana Natural Gas	CUSTOMER REP / PHONE Franklin 405-2...
TICKET AMOUNT	WELL TYPE	API / UWI
WELL LOCATION W/ENHANCED	DEPARTMENT ZT	JOB PURPOSE CODE 35 Cement
LEASE / WELL THSIS # 2-4	SEC / TRP / R/R R-25R-25W	ORIGINAL

HEB EMP NAME/EMP#(EXPOSURE HOURS)	HRS	HEB EMP NAME/EMP#(EXPOSURE HOURS)	HRS	HEB EMP NAME/EMP#(EXPOSURE HOURS)	HRS	HEB EMP NAME/EMP#(EXPOSURE HOURS)	HRS
R. Walden-101473							

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL/GAL)	PUMPS		PRESS (PSI)		JOB DESCRIPTION / REMARKS
				T	C	Top	Cry	
57120	0230	35	320					Called out
57120	0247	35	320					On Location Safety meeting
57120	0315	37	320					Rig up
								Safety meeting
	0315	3	10	1		200		H2O ahead
	0321	6 1/2	63.1	1		100		Mix cement
	0333							Wash up truck
	0340	6 1/2	94.3	1		750		Displace
	0354			1		1250		Land Plug
	0355							Check float (ok)
	0400							Rig down
	0405							Safety meeting
	0430							Job Complete

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STATE CORPORATION COMMISSION

OCT 20 1999