

FORM MUST BE TYPED

SIDE ONE

ORIGINAL

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, KANSAS 67905-0351

Purchaser: SCURLOCK PERMIAN CORPORATION

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

If Workover:

Operator: ANADARKO PETROLEUM CORPORATION

Well Name: OWENS "A" NO. 1

Comp. Date 8/19/95 Old Total Depth 5600'

Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PBSD
 Commingled Docket No. 8964
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

10/14/96 NA 12/22/96

Date of START OF WORKOVER 10/14/96 **Date Reached TD** NA **Completion Date of WORKOVER** 12/22/96

API NO. 15- 081-20917-0001

County HASKELL

SE NE Sec. 16 Twp. 29 S Rge. 34 X W

1980 Feet from S(N) (circle one) Line of Section

610 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 OWENS "A" Well # 1

Field Name EUBANK

Producing Formation BASAL CHESTER & MORROW (COMMINGLED)

Elevation: Ground 2975' KB --

Total Depth 5600' PBSD 5465'

Amount of Surface Pipe Set and Cemented at 1811 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set 2868 Feet

If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan REWORK J.R. 2-10-97
(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. _____

Handwritten notes and stamps:
1-3-97
1-3-97
Docket No. 8964
1-3-97

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 1/30/97

Subscribed and sworn to before me this 30th day of January 19 97.
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 OWENS "A" Well # 1

Sec. 16 Twp. 29 S Rge. 34 East County HASKELL
 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 (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
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	(SEE ORIGINAL ACO-1 - ATTACHED)	
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
List All E.Logs Run:			

** Original Completion 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"	8-5/8"	24.0	1881'	PERM PLUS LT/ PERM PLUS	480/160	2%CC, 1/4#/SK FLC/ 2%CC, 1/4#SK FLC
** PRODUCTION	7-7/8"	5-1/2"	15.5	5600'	50/50 POZ/H	50/160	10 PPG: 10%SALT, 1/4#/SK FLOCELE 14.5 PPG: SAME
		** F.O. TOOL @		2868'	MIDCON-2	90	NONE

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 TEMPORARY CIBP @ 5320'		
4	PERF: 5266'-5288' & 5231'-5242' (MORROW LIME)	ACIDIZED W/2,500 GAL. 15% HACL, 500 GAL XYLENE + ADDITIVES	5231'-5288' OA
	REMOVE CIBP @ 5320' TO COMMINGLE MORROW W/CHESTER		

TUBING RECORD	Size 2-3/8"	Set At 5380'	Packer At --	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj. RESUMED - 12/19/96	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 163 Bbls.	Gas 0 Mcf	Water 4 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: 5231'-5288' OA (MORROW) 5392'-5452' OA (CHSTR)

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

API NO. 15- 081-20917 **ORIGINAL**

County HASKELL

SE - NE Sec. 16 Twp. 29S Rge. 34 X W

1980 Feet from X/N (circle one) Line of Section

610 Feet from E/X (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)

Lease Name OWENS 'A' Well # 1

Field Name EUBANK

Producing Formation BASAL CHESTER

Elevation: Ground 2975.0 KB --

Total Depth 5600 PBDT 5432

Amount of Surface Pipe Set and Cemented at 1811 Feet

Multiple Stage Cementing Collar Used? X Yes No

If yes, show depth set 2868 Feet

If Alternate II completion, cement circulated from
feet depth to W/ sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

Chloride content 1100 ppm Fluid volume 700 bbls

Dewatering method used NATURAL EVAPORATION

Location of fluid disposal if hauled offsite:

Operator Name

Lease Name License No.

 Quarter Sec. Twp. S Rng. E/W

County Docket No.

Operator: License # 4549

Name: ANADARKO PETROLEUM CORPORATION

Address P. O. BOX 351

City/State/Zip LIBERAL, KANSAS 67905-0351

Purchaser: NATIONAL COOPERATIVE REFINERY ASSOC.

Operator Contact Person: J. L. ASHTON

Phone (316) 624-6253

Contractor: Name: GABBERT-JONES

License: 5842

Wellsite Geologist: NA

Designate Type of Completion
X New Well Re-Entry Workover

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

If Workover:

Operator:

Well Name:

Corp. Date Old Total Depth

 Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PBDT

 Commingled Docket No.
 Dual Completion Docket No.
 Other (SWD or Inj?) Docket No.

4-12-95 4-20-95 8/19/95
Spud Date Date Reached TD Completion Date

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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 David W. Kapple
DAVID W. KAPPLE

Title DIVISION DRILLING ENGINEER Date 8/29/95

Subscribed and sworn to before me this 29th day of August, 19 95.

Notary Public L. Marc Harvey
L. MARG HARVEY
Notary Public - State of Kansas
My Appl. Expires 6-12-99

Date Commission Expires

K.C.C. OFFICE USE ONLY

F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received

Distribution:
 KCC SWD/Rep NSPA
 KGS Plug Other (Specify)

8/29/95
8/29/95
8/29/95

Sec. 16 Twp. 29S Rge. 34

Lease Name OHENS 'A'

Well # 1

County HASKELL

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.) Yes No
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No
 Electric Log Run (Submit Copy.) Yes No

List All E.Logs Run: CNL-LDT, DIL, ML, SONIC, SBT-GR,

Log Formation (Top), Depth and Datums Sample

Name	Top	Datum
B/STONE CORRAL	1808	
CHASE	2527	
COUNCIL GROVE	2838	
HEEBNER	3980	
LANSING	4068	
MARMATON	4658	
MORROW	5160	
CHESTER	5344	
ST. LOUIS	5536	

CASING RECORD

New 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	12.25	8.625	24	1881	PREM PLUS LT/ PREM PLUS	480/160	2%CC, 1/4#/SK FLC 7%CC, 1/4#/SK FLC
PRODUCTION	7.875	5.5	15.5	5600	50/50 POZ/H	50/160	10PPG:10% SALT, 1/4#/SK FLOCELE 14.5PPG: SAME
			F.O. TOOL @	2868	MIDCON-2	90	NONE

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
4	5516-5532, CIBP @ 5500	NONE.	5516-5532
4	5471-5480, CMT RTNR @ 5465	NONE.	5471-5480
4	5441-5452,	ACID: 600 GAL 7-1/2% FE HCL.	5441-5452
4	5392-5410	ACID: 900 GAL 7-1/2% HCL.	5392-5410

PIPELINE RECORD	Size 2-3/8"	Set At 5390	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumed Production, SWD or Inj. 7/6/95 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil 86	Bbls.	Gas 1252	McF	Water 36	Bbls.	Gas-Oil Ratio 14558	Gravity
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Disposition of Gas: Vented Sold Used on Lease (if vented, submit ACO-18.) Method of completion: Open Hole Perf. Dually Comp. Commingled Production Interval: 5392-5453 (24)