

ORIGINAL

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

Operator: License # 09282
Name: General Atlantic Resources, Inc.
Address 410-17th Street, Suite 1400
City/State/Zip Denver, Colorado 80202
Purchaser: Trident NGL, Inc
Operator Contact Person: Richard Burns
Phone (303) 573-5100
Contractor: Name: _____
License: _____
Wellsite Geologist: _____
Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-Entry: old well info as follows:
Operator: Pan American Petroleum
Well Name: Tjaden Gas Unit #1
Comp. Date 4/3/61 Old Total STIMULATE of fluid disposal 17 1994
 Despensing Re-perf. & Conv. SWD
 Plug Back PBTD FEB 28 1994
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or In?) Docket No. _____
8-21-93 9-10-93
Spud Date 8-21-93 Date Reached TD _____ Completion Date 9-10-93

APT NO. 15- N/A
County Kingman 15-095-01770-000
NE Sec. 33 Twp. 30S Rge. 8W E
635 Feet from S (circle one) Line of Section
720 Feet from E (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)
Lease Name Tjaden Gas Unit Well # 1
Field Name Spivey-Grabs
Producing Formation Mississippi-chat
Elevation: Ground 1625 KB 1630'
Total Depth 4435' PBTD 4415'
Amount of Surface Pipe Set and Cemented at 257' 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/ _____ ex cat.
Drilling Fluid Management Plan REWORK 8/4 7-21-94
(Data must be collected from the Reserve Pit)
Chloride content RECEIVED Fluid volume _____ bbls
Dewatering method used RECEIVED
Operator Name CONSERVATION DIVISION
Lease Name Wichita, Kansas 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 Richard Burns Senior Oper. Eng.
Title Richard Burns Date 2/1/94
Subscribed and sworn to before me this 1st day of Feb 19 94
Notary Public Lynn A. McBRIDE
Date Commission Expires 11/4/97
E.C.C. OFFICE USE ONLY
Letter of Confidentiality Attached
Wireline Log Received
Geologist Report Received
Distribution
 SWD/Rep NSPA
 Plug Other (Specify) _____
NOTARY PUBLIC
LYNN A. McBRIDE KCO
STATE OF KANSAS

SIDE TWO

Operator Name General Atlantic Resources, Inc. Lease Name

Tjaden Gas Unit Well # 1

Sec. 33 Twp. 30S Rge. 8W
 East
 West

County Kingman

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 Yes No
 (Attach Additional Sheets.)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy.)

List All E.Logs Run:

Log Name

Formation (Top), Depth and Datum Sample

Top Datum

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		8-5/8"	28#	257	Bulk	250	
Long String		5-1/2"	14#	4420'	Bulk	200	

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	4324-4420'	acidize w/7-1/2 % HCL 2000 gal
		Fract w/50240 gal 12/20 sd

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2-7/8	4250	N/A	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumed Production, SWD or Inj.	Producing Method
9/1/93	<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	Bbls.	Gas	Mcf	Water	Bbls.	Gas-Oil Ratio	Gravity
	6		200		35		33330	32

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 _____