

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

ORIGINAL

Operator: License # 5447

Name: OXY USA Inc.

Address P. O. Box 300

City/State/Zip Tulsa, OK 74102-0300

Purchaser: _____

Operator Contact Person: David D. Juby

Phone 918/561/3564

Contractor: Name: Duke Drilling

License: _____

Wellsite Geologist: William Stout

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:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

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

9/24/96 9/29/96 10/1/96
Spud Date Date Reached TD Completion Date

API NO. 15- 147-20572 0000

County Phillips

- NE -NW - SW Sec. 23 Twp. 5S Rge. 20 ^E _W

2310 Feet from S (circle one) Line of Section

1220 Feet from E (circle one) Line of Section

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

Lease Name Brown B Well # 6-W

Field Name Hansen

Producing Formation LANSING - KANSAS CITY / ARBUCKLE

Elevation: Ground 2171' KB 2180'

Total Depth 3568' PBTB _____

Amount of Surface Pipe Set and Cemented at 370 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set 1668 Feet

If Alternate II completion, cement circulated from 1668

feet depth to surface w/ 370 sx cmt.

Drilling Fluid Management Plan ALT 2 3-4-98 JK
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used Evaporation

Location of fluid disposal if hauled off location

Operator Name _____

Lease Name _____ License No. _____

Quarter _____ Sec. _____ Twp. _____ S Rng. _____ E/W

County _____ Docket No. _____

RECEIVED
KANSAS CORPORATION COMMISSION
MAR 24 1997
03-24-1997
CONSERVATION DIVISION
WICHITA, KS

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 David D. Juby David D. Juby

Title Senior Engineering Technician Date 3/19/97

Subscribed and sworn to before me this 19th day of March, 19 97

Notary Public Quetta J. Shwadlerak

Date Commission Expires July 23, 1998

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 OXY USA Inc. Lease Name Brown B Well # 6

Sec. 22 Twp. 5S Rge. 20 East West
 County Phillips

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: Dual Induction,
 Dual Compensated Neutron
 Microlog
 Borehole Comp Sonic Log

Name	Top	Datum
Toronto	3261'	-1081
Lansing	3278'	-1098
BKC	3483'	-1303
Arbuckle	3534'	-1354

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	14.75	10.75	32.75	369.75	Standard HOCO	360	3% CC .25# PPS
Production	9.875	7.00	20.0	3568	MidConII Class A	185 220	25 CC .25 PPS

ADDITIONAL CEMENTING/SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back ID <input type="checkbox"/> Plug Off Zone	Surf. 1668	MidConII	370	None

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	Depth
4 SPF	3542-46 ARB	200 gals. 15% NeFe	3542'- 3546'
4 SPF	3445-47, 3356-60, 3348-50 3331-35, 3314-18 LAN	1100 gals. 15% NeFe	3345'- 3318

TUBING RECORD		Size	Set At	Packer At	Liner Run			
		2 7/8	3523	3523	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Date of First, Resumed Production, SWD or Inj. 10/26/96			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	Bbls.	Gas	Mcf	Water	Bbls.	Gas-Oil Ratio	Gravity
	20				26			

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled

Production Interval Other (Specify) _____

CUSTOMER COPY



REMIT TO:
P.O. BOX 951046
DALLAS, TX 75395-1046

INVOICE

INVOICE NO.	DATE
103669	09/23/1996

15-147-20572-00-00

WELL/LEASE NO./PROJECT		WELL/PROJECT LOCATION		STATE	OWNER
BROWN B-6W		PHILLIPS		KS	SAME
SERVICE LOCATION	CONTRACTOR	JOB PURPOSE		TICKET DATE	
HAYS	DUKE DRILLING #4	CEMENT SURFACE CASING		09/23/1996	
ACCT. NO.	CUSTOMER AGENT	VENDOR NO.	CUSTOMER P.O. NUMBER	SHIPPED VIA	FILE NO.
659167	JIM NOWELL	E-26	AFF	COMPANY TRUCK	14136

ORIGINAL

OXY USA INC.
DRAWER D
PLAINVILLE, KS 67663

DIRECT CORRESPONDENCE TO:

P O BOX 428
HAYS KS 67601
913-625-3431

REFERENCE NO.	DESCRIPTION	QUANTITY	UM	UNIT PRICE	AMOUNT
PRICING AREA - MID CONTINENT					
000-117	MILEAGE CEMENTING ROUND TRIP	130	MI	2.99	308.70
		1	UNT		
001-016	CEMENTING CASING	370	FT	650.00	650.00
		1	UNT		
030-503	TOP PLUG	10	3/4 IN	115.00	115.00
		1	EA		
40	CENTRALIZER - 10-3/4 X 14-3/4	3	EA	90.00	270.00
806.60070					
000-119	MILEAGE FOR CREW	130	MI	1.60	N/C
		1	UNT		
504-308	CEMENT - STANDARD	360	SK	9.57	3,445.20
509-406	ANHYDROUS CALCIUM CHLORIDE	10	SK	40.75	407.50
507-210	FLOCELE	90	LB	1.65	148.50
500-207	BULK SERVICE CHARGE	377	CFE	1.35	508.95
500-306	MILEAGE CHRG MAT DEL OR RETURN	1128.725	TMI	1.05	1,185.16

INVOICE SUBTOTAL	7,119.01
DISCOUNT - (BID)	2,689.01
INVOICE BID AMOUNT	4,430.00

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INVOICE TOTAL - PLEASE PAY THIS AMOUNT \$4,430.00

AFFIX JOB TKT
FORM HAL-1900-F

TERMS: If Customer does not have an approved open account with Halliburton, all sums due are payable in cash at the time of performance of services or delivery of equipment, products or materials. If customer has an approved open account, invoices are payable on the twentieth day after date of invoice. Customer agrees to pay interest on any unpaid balance from the date payable until paid at the highest lawful contract rate applicable, but never to exceed 18% per annum. In the event Halliburton employs an attorney for collection of any account, Customer agrees to pay attorney fees of 20% of the unpaid account, plus all collection and court costs.

HALLIBURTON

HALLIBURTON ENERGY SERVICES

HAL-1906-P

CHARGE TO:

ADDRESS

CITY, STATE, ZIP CODE

OXY USA INC 15-147-20572-00-00

CUSTOMER COPY

TICKET

No.

103669 - 5

PAGE 1 OF 2

1. SERVICE LOCATIONS Hays 25525	WELL/PROJECT NO. B-6 w Ark	LEASE Brown	COUNTY/PARISH Phillips	STATE Ks	CITY/OFFSHORE LOCATION Logan Ks	DATE 9-23-96	OWNER OXY
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE	NITROGEN JOB? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	CONTRACTOR Duke Dalg	RIG NAME/NO 4	SHIPPED VIA CT	DELIVERED TO website	ORDER NO.
3.	WELL TYPE 07	WELL CATEGORY 01	JOB PURPOSE 010	WELL PERMIT NO. AR 15-147-205720	WELL LOCATION 5-S 1-E Logan Ks		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
000-117		1			MILEAGE	130				2.99	388.70
001-016		1			Pump Service	370				650.00	650.00
030-503 40	8061 60070	1			Top Plug	1	EA	10 ³ / ₄	IN	115.00	115.00
009-019		1		10	Crew Mileage	130				1.60	208.00

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1991 APR 10 A 11:17

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions. MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS DATE SIGNED: <i>[Signature]</i> TIME SIGNED: <input type="checkbox"/> A.M. <input type="checkbox"/> P.M. <input type="checkbox"/> do <input type="checkbox"/> do not require IPC (Instrument Protection). <input type="checkbox"/> Not offered	SUB SURFACE SAFETY VALVE WAS: <input type="checkbox"/> PULLED & RETURN <input type="checkbox"/> PULLED <input type="checkbox"/> RUN		SURVEY		AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL 1731 FROM CONTINUATION PAGE(S) 5695 SUB-TOTAL APPLICABLE TAXES WILL BE ADDED ON INVOICE 7427
	TYPE LOCK	DEPTH	OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?					
	BEAN SIZE	SPACERS	WE UNDERSTOOD AND MET YOUR NEEDS?					
	TYPE OF EQUALIZING SUB.	CASING PRESSURE	OUR SERVICE WAS PERFORMED WITHOUT DELAY?					
TUBING SIZE	TUBING PRESSURE	WELL DEPTH	WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?					
TREE CONNECTION	TYPE VALVE	ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO						
				<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES				The customer hereby acknowledges receipt of the materials and services listed on this ticket.			
CUSTOMER OR CUSTOMER'S AGENT (PLEASE PRINT) <i>Jim Nowell</i>	CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE) <i>[Signature]</i>	HALLIBURTON OPERATOR/ENGINEER <i>G.A. Palmberg</i>	EMP # 41489	HALLIBURTON APPROVAL <i>EGP</i>			

Pump Cement - Drill Well

TRK 3846-8206

ALLIBURTON

15-147-20572-00-00

TICKET CONTINUATION

CUSTOMER COPY

TICKET

No. 103667

ALLIBURTON ENERGY SERVICES

CUSTOMER

Oxy USA

WELL

Brown #6

DATE

9-23-96

PAGE OF

2 2

are performed or
federal or state statute to the
location is made
Houston, Texas

1911 R-10

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
504-308		1			Standard Cement	360				9.57	3,445.20
509-406		1			Calcium Chloride	10				40.75	407.50
507-210		1			Flocele	X 90	1b			1.65	148.50
500-207		1			SERVICE CHARGE	CUBIC FEET 377				1.35	508.95
500-306		1			MILEAGE CHARGE	TOTAL WEIGHT 34,730	LOADED MILES 65	TON MILES 1,128.725		1.05	1,185.16

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No. B 339011

CONTINUATION TOTAL 5,695.31



HALLIBURTON

15-147-20572-00-00

DATE 9-23-96 PAGE NO. 1

JOB LOG HAL-2013-C

CUSTOMER DAY USA INC WELL NO. B-6 (1) LEASE Brown JOB TYPE Surface TICKET NO. 103669

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1130							Called out
	1445							On location drly - circ Set up Equipment
	1600							Start 10 3/4" 32.75' / ft Csg Csg on bottom Rig up to Circulate Rig up to Pump Truck
	1745	5 1/2					4.00	Start mixing cement 360 sks Standard 3% CC 1/4" flocculants
	1800		7 1/2				300	cement mixed Release plug
	1810	5	35 1/2				400	Start Displacement
	1812						200	Plug down @ 350' Close In @ Well head Wash up Rack up
	1845							Job Completed 80 SKS /
								cmr did circulate
								Thank you
								Alan, John & Jim

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1997 APR 10 A 11:17

ORIGINAL



JOB SUMMARY

HALLIBURTON DIVISION
HALLIBURTON LOCATION

MIDCONTINENTAL
Hays 15-147-20572-00-00
BILLED ON TICKET NO. 10

FIELD Lagan SEC. 23 TWP. 53 RING 100 COUNTY Phillips STATE Ks

WELL DATA

FORMATION NAME _____ TYPE _____
FORMATION THICKNESS _____ FROM _____ TO _____
INITIAL PROD: OIL _____ BPD. WATER _____ BPD. GAS _____ MCFD
PRESENT PROD: OIL _____ BPD. WATER _____ BPD. GAS _____ MCFD
COMPLETION DATE _____ MUD TYPE _____ MUD WT. _____
PACKER TYPE _____ SET AT _____
BOTTOM HOLE TEMP. _____ PRESSURE _____
MISC. DATA _____ TOTAL DEPTH 371

	NEW USED	WEIGHT	SIZE	FROM	TO	MAXIMUM ALLOWED
CASING	0	32.75	10 1/4	0	370	
LINER						
TUBING						
OPEN HOLE				370	371	SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

JOB DATA

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
FLOAT COLLAR		
FLOAT SHOE		
GUIDE SHOE		
CENTRALIZERS		
BOTTOM PLUG		
TOP PLUG <u>LA-11</u>	<u>10 3/4</u>	<u>ORIGINAL</u>
HEAD		
PACKER		
OTHER <u>Coupler</u>	<u>10 3/4</u>	<u>3 BAKER</u>

CALLLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE <u>9-23</u>	DATE <u>9-23</u>	DATE <u>9-23</u>	DATE <u>9-23</u>
TIME <u>1130</u>	TIME <u>1745</u>	TIME <u>1730</u>	TIME <u>1845</u>

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
<u>Palenberg</u>	<u>41326</u>	
<u>Becker</u>		
<u>Plannestiel</u>	<u>51145</u>	
	<u>3846</u>	
	<u>8226</u>	

MATERIALS

TREAT. FLUID _____ DENSITY _____ LB./GAL. °API
DISPL. FLUID _____ DENSITY _____ LB./GAL. °API
PROP. TYPE _____ SIZE _____ LB.
PROP. TYPE _____ SIZE _____ LB.
ACID TYPE _____ GAL. _____ %
ACID TYPE _____ GAL. _____ %
ACID TYPE _____ GAL. _____ %
SURFACTANT TYPE _____ GAL. _____ IN
NE AGENT TYPE _____ GAL. _____ IN
FLUID LOSS ADD. TYPE _____ GAL.-LB. _____ IN
GELLING AGENT TYPE _____ GAL.-LB. _____ IN
FRIC. RED. AGENT TYPE _____ GAL.-LB. _____ IN
BREAKER TYPE _____ GAL.-LB. _____ IN
BLOCKING AGENT TYPE _____ GAL.-LB. _____
PERFPAC BALLS TYPE _____ QTY. _____
OTHER _____
OTHER _____

DEPARTMENT CEMENT
DESCRIPTION OF JOB Cement Surface CSG

Cement did circulate

JOB DONE THRU: TUBING CASING ANNULUS TBG./ANN.

CUSTOMER REPRESENTATIVE X [Signature]

HALLIBURTON OPERATOR [Signature] COPIES REQUESTED _____

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
	<u>360</u>	<u>Standard</u>		<u>0</u>	<u>3% CC 1/4" flocculant</u>	<u>1.18</u>	<u>15.6</u>

PRESSURES IN PSI

SUMMARY

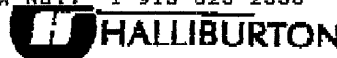
VOLUMES

CIRCULATING _____ DISPLACEMENT _____ PRESLUSH: BBL.-GAL. _____ TYPE _____
BREAKDOWN _____ MAXIMUM _____ LOAD & BKDN: BBL.-GAL. _____ PAD: BBL.-GAL. _____
AVERAGE _____ FRACTURE GRADIENT _____ TREATMENT: BBL.-GAL. _____ DISPL: BBL.-GAL. 35 1/2
SHUT-IN: INSTANT _____ 5-MIN _____ 15-MIN _____ CEMENT SLURRY: BBL.-GAL. 76
HYDRAULIC HORSEPOWER _____ TOTAL VOLUME: BBL.-GAL. 11 1/2
ORDERED _____ AVAILABLE _____ USED _____
TREATING _____ DISPL. _____ OVERALL _____
FEET _____ REASON _____

REMARKS

SEE JOB LOG
Thank you
[Signature]

LEASE Brown
WELL NO. B-6-02
JOB TYPE SURFACE
DATE 9-21-96



JOB LOG HAL-2015-C

CUSTOMER Oxy USA	WELL NO. 8-6	LEASE Brown	JOB TYPE 2-stage	DATE 9-30-96
			TICKET NO. 102924	

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GALS)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
1	0400							called out
	0735							on location w/ Equip + cm - 1st stage 185 mid cont II 29cc 1/4" Floccle 220 std. 10% cal seal 19% cc 3/4" H-322 700# salt for 40 BBL salt flush 12 BBLs Super Flush - Baker Float Equip. "Discuss safety" 2nd Stage 220 mid II 29% cc 1/4 # Floccle 100% ^{mid cont} 29% cc 1/4 Floccle
	0735							out of hole w/ O.P. - Lay down Kelly, Rig up to Run 7" csg 20' wait on orders - setup + Plan Job start 7" csg 20' pipe Run Baker float Equip as Directed 14 cont - 4 Baskets - DV - Guide shoe + Insert/Fillup.
	0800							Pipe on Bottom 2520'
	0937							Hook up + cir w/ mud Hog + cir pipe hook up + cmt well
	1130							200# Pump 40 BBLs Salt water -
	1154							200# Pump 20 BBLs mud thinner
	1400							200# Pump 2 BBLs water spacer
		5	40					200# Pump 12 BBLs Super Flush
		5	20					200# Pump 3 BBLs water spacer
		4	3					200# mix 185 SKS mid cont II
		5	12					200# Follow up w/ 220# SKS std.
		4	12					Wash out Pump + Line - Release Plug
		6	106					200# Start Disp cap. 142 BBLs
		6	52					Pump 75 BBLs water 67 BBLs mud
								500 PSE slowly climbs
	1500							1000# Plug Lands
	1523							Drop Dart
	1540							800# open O.V. - Pump OFF mud on track hookup to mud Hog + cir well cut cir to pit - cmt passed O.V.

ORIGINAL

ORIGINAL

1002 1000



JOB LOG HAL-2012-C

DATE: 9-30-96
PAGE: 2
TICKET NO.: 103524

CUSTOMER: OXY USA
WELL NO.: # 8-C
LEASE: Brown
JOB TYPE: OXY - 2-Stage

CHART NO.: 2
TIME: 17:50
RATE (BPM):
VOLUME (BBL) (GAL): 155
PUMPS T C:
PRESSURE (PSI) TUBING CASING:
DESCRIPTION OF OPERATION AND MATERIALS

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
2	17:50		155					200 ⁺ start mix mid con the 11.1 #/gal 270 SFs
			26					200 ⁺ tail in w/ 100 SFs mid con the 14 1/2 Fin mix Release Plug
								200 ⁺ chart disp - PSI clicks while in cess cap. 67.5 BBLs
	18:55		67.5					1600 ⁺ Plug down Knock loose washup Equip. - Finish Papers Job complete -

ORIGINAL

cont con to p.t.

A. Walsh
Halliburton

[Signature]

thanks

Mark, Ross, Ray
Fish, Whaley
Rick, Hachern

15-147-20572-00-00



CHARGE TO
 OXY USA
 ADDRESS
 CITY STATE, ZIP CODE

ORIGINAL - DJINGAN COPY TICKET

No. 103924

PAGE 1 OF 2

HALLIBURTON ENERGY SERVICES
 HAL-1006-P

1. SERVICE LOCATION HAYS K 25525	WELL PROJECT NO #814	LEASE Brown	COUNTY/SPANISH Phillips	STATE KS	CITY/OFFSHORE LOCATION	DATE 9-30-96	OWNER SAME
2. TICKET TYPE SERVICE	MIGROGEN JOB? YES NO	CONTRACTOR Duke Drilling #4	RIG NAME/KEY Duke Drilling #4	SHIPPED VIA et	DELIVERED TO wellsite	ORDER NO	
3. WELL TYPE 01	WELL CATEGORY 01	JOB PURPOSE 025	WELL PERMIT NO 18443	WELL LOCATION 23-5-20			
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

Custom Account - M&G

PRICE REFERENCE	SECONDARY REFERENCE PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LOC	ACCT	DF		QTY.	UNIT	QTY.	UNIT	
000-117		1		24	MILEAGE 51274 RCM RT	120	mi	1	7.99	388
001-016		1		24	Pump service	3520	ft	1	167	1167
320	800.71445	1		34	Baskets "R"	4	ea	7"	104.00	416
018-317		1		34	Super flash	12	sk		100.00	1200
019-841		1		34	Rotating Hand.	1	dn		185.00	185
007-161		1		34	Add. Stage	163	ft		1550.00	1550
24A	885.19401			34	Insert Fltr - Baker	1	ea		227.00	227
40	800.60045			34	cent. - Baker	14	ea	7" 1/2"	65.00	910
71	813.56025			34	DV Baker	1	ea	7" 1/2"	3032.00	3032
75	813.14571			34	Plug set Baker	1	ea	7" 1/2"	723.00	723
11A	813.212			34	Quic Shoe Baker	1	ea	7" 1/2"	157.00	157

ORIGINAL

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

x Rick Hochman
 DATE SIGNED 9-30-96 TIME SIGNED 9:00 A.M.
 do not require IPC (Instrument Protection) Not offered

SUB SURFACE SAFETY VALVE WAS:
 PULLED & RETURN PULLED RUN

TYPE LOCK	DEPTH
BEAR SIZE	SPACERS
TYPE OF EQUALIZING SUI.	CASING PRESSURE
TUBING SIZE	TUBING PRESSURE
	WELL DEPTH
TREE CONNECTION	TYPE VALVE

SURVEY

OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?	AGREE	UN-DECIDED	DIS-AGREE
WE UNDERSTOOD AND MET YOUR NEEDS?			
OUR SERVICE WAS PERFORMED WITHOUT DELAY?			
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?			
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES <input type="checkbox"/> NO		

CUSTOMER DID NOT WISH TO RESPOND

PAGE TOTAL	10405
FROM CONTINUATION PAGE(S)	15572
SUB-TOTAL APPLICABLE TAXES WILL BE ADDED TO INVOICE	25977

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this order.

CUSTOMER OR CUSTOMER'S AGENT (PLEASE PRINT) <i>Rick Hochman</i>	CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE) <i>x Rick Hochman</i>	HALLIBURTON OPERATOR/ENGINEER <i>Allen F. Worth</i>	EMP #	HALLIBURTON APPROVAL
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02/12/98 16:02 FROM: HES HAYS FAX NO.: 1 913 625 2536 OANON FAX-270 02-10-99 05119A P.02 001

PAGE 2 1998

