

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

JAN 27 2005

Operator: License # 08967
Name: BARBOUR ENERGY CORPORATION
Address: P.O. BOX 13480
City/State/Zip: OKLAHOMA CITY, OK 73113-1480
Purchaser: DUKE ENERGY FIELD SERVICES
Operator Contact Person: J. WAYNE BARBOUR
Phone: (405) 848-7671
Contractor: Name: CHEYENNE DRILLING, LP
License: 5382
Wellsite Geologist: GREG FRANKLIN

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/Re-entry: Old Well Info as follows:
Operator: _____
Well Name: _____
Original Comp. Date: _____ Original Total Depth: _____
 Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back _____ Plug Back Total Depth _____
 Commingled _____ Docket No. _____
 Dual Completion _____ Docket No. _____
 Other (SWD or Enhr.?) _____ Docket No. _____

<u>10/27/04</u>	<u>11/06/04</u>	<u>12/15/04</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 175-21946-00-00
County: SEWARD
C S 2 NW SE Sec. 19 Twp. 33 S. R. 31 East West
1740 feet from (S) / N (circle one) Line of Section
1880 feet from (E) / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE (SE) NW SW
Lease Name: DEVILS CLAW Well #: 1-19
Field Name: ARKALON

Producing Formation: MIDDLE MORROW
Elevation: Ground: 2712 Kelly Bushing: 2723
Total Depth: 5770 Plug Back Total Depth: N/A
Amount of Surface Pipe Set and Cemented at 590.69 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.
ALT I WITH 12-28-06

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content 1600 ppm Fluid volume 638 bbls
Dewatering method used EVAPORATION
Location of fluid disposal if hauled offsite: _____
Operator Name: N/A
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
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 of 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: _____
Title: PRESIDENT Date: 01/24/05
Subscribed and sworn to before me this 24 day of January,
20 05
Notary Public: _____
Date Commission Expires: 03/15/08

KCC Office Use ONLY

Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

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Operator Name: BARBOUR ENERGY CORPORATION Lease Name: DEVILS CLAW Well #: 1-19
 Sec. 19 Twp. 33 S. R. 31 East West County: SEWARD

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems 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 test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

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:
 Spectral Density/Dual Spaced Neutron/Microlog
 High Resolution Induction/Caliper Log

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Name	Top	Datum
Herrington	2576	+147
U. Krider	2606	+115
Council Grove	2942	-219
Atoka	5460	-2737
Morrow	5630	-2907
U. Morrow	5670	-2947
M. Morrow Sd	5730	-3007

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	12 1/4"	8 5/8" STC 8rd	23#	590.69	Class A	200	3%CaCl, 1/4# FloSeal
Production	7 7/8"	5 1/2" J-55	15.5#	5847.34	ASC	100	5# per sx KolSeal

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
..... Perforate				
..... Protect Casing				
..... Plug Back TD				
..... 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	5742-5754	1500 gal. 15% NE FE HCL	5742-5754
		1000 gal. 70Q foamed 2% KCL	
		5000 gal. 70Q foamed 2% KCL	
		5000 gal. 70Q foamed 2% KCL retarded 15% NE FE HCL	
		5000 gal. 70Q foamed 2% KCL	

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2 3/8"	5709	N/A	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumerd Production, SWD or Enhr. 12/15/04 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	48		6		

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

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 60 050502
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ALLIED CEMENTING CO., INC. 20285

Federal Tax I.D.#

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

SERVICE POINT:
M.L.

DATE <u>11-7-04</u>	SEC <u>19</u>	TWP. <u>33S</u>	RANGE <u>31W</u>	CALLED OUT <u>11:00 AM</u>	ON LOCATION <u>3:00 pm</u>	JOB START <u>4:50 pm</u>	JOB FINISH <u>6:00 pm</u>
LEASE <u>Devil Claw</u> WELL # <u>1-19</u>		LOCATION <u>Kismet 54 + Meade lake</u>			COUNTY <u>Seward</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one) <u>NEW</u>		SIGN <u>1/2E, 3/8S, S+W into</u>					

CONTRACTOR Cheyenne

TYPE OF JOB Prod. Casing

HOLE SIZE 7 1/2" T.D. 5830

CASING SIZE 5 1/2" 15.50 DEPTH 5847'

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4 1/2" DEPTH 5830'

TOOL Acid Service latch DEPTH 5806'

PRES. MAX _____ MINIMUM 50

MEAS. LINE _____ SHOE JOINT 41.85

CEMENT LEFT IN CSG. 41.85

PERFS. _____

DISPLACEMENT 138 bbl 2% Kcl water

EQUIPMENT

OWNER Barbour Energy

CEMENT

AMOUNT ORDERED 100sx ASC + 5# Kol-Seal

25sx 60' 40' 6 500 gl Mud Clean

14 gal Clapro

COMMON	<u>15</u>	<u>A</u>	@	<u>9.10</u>	<u>136.50</u>
POZMIX	<u>10</u>		@	<u>4.10</u>	<u>41.00</u>
GEL	<u>1</u>		@	<u>11.00</u>	<u>11.00</u>
CHLORIDE			@		
ASC	<u>100</u>		@	<u>10.65</u>	<u>1065.00</u>
<u>Kol Seal</u>	<u>500 #</u>		@	<u>.50</u>	<u>250.00</u>
<u>Clapro</u>	<u>14</u>		@	<u>22.90</u>	<u>320.60</u>
<u>Mud Clean</u>	<u>500 gal</u>		@	<u>1.00</u>	<u>500.00</u>
			@		
			@		
			@		
			@		
HANDLING	<u>154</u>		@	<u>1.35</u>	<u>207.90</u>
MILEAGE	<u>17 x 154 x .05</u>				<u>150.00</u>
					<u>Min chgs TOTAL 2682.00</u>

PUMP TRUCK # 265 CEMENTER Mike Ruck

BULK TRUCK # 359 HELPER Bill Meadoo

BULK TRUCK # _____ DRIVER Dennis Cushenbury

BULK TRUCK # _____ DRIVER _____

REMARKS:

Pipe on bottom, Drop Ball break Circ.

Pump 500 gal mud-Clean. Start Prod.

Cement: 100sx ASC + 5# Kol-Seal @ 11.65

Weight. Stop Pumps Wash Pump & lines

Release latch Down Plug Start Disp. 7 bbl.

min. See lift @ 170 bbl. @ 138 bbl

2% Kcl water Disp. Bump plug 70 -

1700 Release Clathheld.

SERVICE

DEPTH OF JOB 5847'

PUMP TRUCK CHARGE _____ 1480.00

EXTRA FOOTAGE _____ @ _____

MILEAGE 17 @ 4.00 68.00

MANIFOLD _____ @ _____

_____ @ _____

_____ @ _____

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TOTAL 1548.00

PLUG & FLOAT EQUIPMENT

NONE

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

TAX _____

TOTAL CHARGE 1548.00

DISCOUNT 0.00 IF PAID IN 30 DAYS

CHARGE TO: Barbour Energy

STREET _____

CITY _____ STATE _____ ZIP _____

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.

SIGNATURE Ferry Rogers, agent ANY APPLICABLE TAXES WILL BE CHARGED UPON INVOICING

PRINTED NAME _____



FIELD ORDER

9273 ✓

INVOICE NO.
Date **11.7.04**
Customer ID

Subject to Correction

Lease **Devils Claw** Well # **1-19** Legal **19-33-31W**
County **Seward** State **KS** Station **Liberal**

C
H
A
R
G
E

Barbour Energy

Depth **5930** Formation Shoe Joint **CEMENT DEPT. Bulk**
Casing **5 1/2** Casing Depth TD **5930** Job Type **5 1/2 Longstring(N)**
Customer Representative **Larry Rogers** Treater **Jerry Bennett**

AFE Number PO Number

Materials Received by **X Larry Rogers, agent**

Product Code	QUANTITY	MATERIAL, EQUIPMENT and SERVICES USED	UNIT PRICE	AMOUNT	ACCOUNTING	
					CORRECTION	AMOUNT
		Cement Sales				
F101	13 ea	Turbolizer 5 1/2"				
E101	30 mi	Car Pickup Mileage 1way				
F121	2 ea	Basket 5 1/2"				
F131	1 ea	Stop Collar 5 1/2"				
F171	1 ea	hatch Down Plug & Baffle 5 1/2"				
F211	1 ea	Auto Fill Float Shoe 5 1/2"				
F261	1 ea	Cement Port Collar 5 1/2"				
F800	1 ea	Threadlock Compound Hit				
F101	1 ea	Regular Centralizers				
		Discount Total				
		Plus Tax				

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4575.60

10244 NE Hiway 61 - P.O. Box 8613 - Pratt, KS 67124-8613 - Phone (620) 672-1201 - Fax (620) 672-5383 TOTAL

**Acidizing
AND
Cementing
Services**

P. O. Box 751
Crescent, OK 73028
(405) 969-3093

**INVOICE
No 006994**

WELL NO. AND FARM L-19 DEVILS CLAW	COUNTY SEWARD	STATE KANSAS	DATE 10-28-04
CHARGE TO BARBOUR ENERGY CORP.	LEGAL SECTION 19	TWP 33	RANGE 31
ADDRESS	OWNER SAME		
CITY, STATE, ZIP	CONTRACTOR CHEYENNE DRILLING		
	SHIPPED VIA Co VEH.		
	DELIVERED TO Loc.		
	WELL TYPE NEW		
	TYPE AND PURPOSE OF JOB 591 FT 8 5/8 Csg		
TERMS NET	DUE BY THE 20TH OF FOLLOWING MONTH. INTEREST CHARGED AFTER 60 DAYS FROM DATE OF INVOICE.		

PRICE REFERENCE	SECONDARY REF. OR PART NO.	CODE		DESCRIPTION	UNITS 1		UNITS 2		UNIT PRICE	AMOUNT
		L	D		QTY.	MEAS.	QTY.	MEAS.		
05				MILEAGE	260	MIX	3	UNITS		
01				PUMP CHARGE	1	EA				
012				CLASS "H" CEMENT	100	SKS				
014				ACS LITE CEMENT	200	SKS				
016				CALCIUM CHLORIDE	804	LBS				
019				FLOCELE	75	LBS				
020				GEL	1044	LBS				
060				BULK DEL CHARGE	300	SKS				
FE-1				8 5/8 CENTRALIZERS	4	EA				
FE-2				8 5/8 GUIDE SHOE	1	EA				
FE-3				AUTO FILL INSERT	1	EA				
1264				8 5/8 RUBBER PLUG	1	EA.				
043				NON-PUMPING TIME	3	HRS				
THANK YOU!										

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WAS JOB SATISFACTORILY COMPLETED? _____	TAX REFERENCES	SUB TOTAL	5500⁰⁰
WAS OPERATION OF EQUIPMENT SATISFACTORY? _____		TAX	
WAS PERFORMANCE OF PERSONNEL SATISFACTORY? _____		TAX	
x <u>Jerry Rogers, agent</u> Customer or His Agent	<u>Brad Hatala</u> Operator	TOTAL	5500⁰⁰

**Acidizing
AND
Cementing
Services**

P. O. Box 751
Crescent, OK 73028
(405) 969-3093

**WORK ORDER CONTRACT
AND PRE-TREATMENT DATA**

ATTACH TO
INVOICE & TICKET NO. 6994

DISTRICT CRESCENT DATE 10-28-04

YOU ARE HEREBY REQUESTED TO FURNISH EQUIPMENT AND SERVICEMEN TO DELIVER AND OPERATE
THE SAME AS AN INDEPENDENT CONTRACTOR TO: BARBOUR ENERGY CORP.
AND DELIVER AND SELL PRODUCTS, SUPPLIES, AND MATERIALS FOR THE PURPOSE OF SERVICING (CUSTOMER)

WELL NO. 1-19 LEASE DEVILS CLAW SEC. 19 TWP. 33 RANGE 31

FIELD _____ COUNTY SEWARD STATE KANSAS OWNED BY SAME

THE FOLLOWING INFORMATION WAS FURNISHED BY THE CUSTOMER OR HIS AGENT

FORMATION NAME	TYPE	NEW USED	WEIGHT	SIZE	FROM	TO	MAX. ALLOW P.S.I.
FORMATION THICKNESS	FROM TO						
PACKER: TYPE	SET AT						
TOTAL DEPTH	MUD WEIGHT						
BORE HOLE							
INITIAL PRCD: OIL BPD. H ₂ O BPD. GAS MCF							
PRESENT PROD: OIL BPD. H ₂ O BPD. GAS MCF							

PREVIOUS TREATMENT: DATE _____ TYPE _____ MATERIALS _____

TREATMENT INSTRUCTIONS: TREAT THRU TUBING ANNULUS CASING TUBING ANNULUS HYDRAULIC HORSEPOWER ORDERED
PUMP FW TO CIR. 8 5/8 CSg. MIX 200 SKS LITE CEM 6% GEL 3% CC + 1/4 LB SK FLOCELS
1.71 YIELD. TAIL @ 100 SKS "H" CEM 3% CC + 1/4 LB SK FLOCELS 1.18 YIELD VIA 8 5/8 CSg
DROP PLUG. WASH LINES + DISP. FW TO LAND PLUG - 34.7 Bbl
THANK YOU!

CUSTOMER OR HIS AGENT WARRANTS THE WELL IS IN PROPER CONDITION TO RECEIVE THE PRODUCTS, SUPPLIES, MATERIALS, AND SERVICES.

THIS CONTRACT MUST BE SIGNED BEFORE WORK IS COMMENCED

- As consideration, the above-named Customer agrees:
- (a) To pay Acidizing and Cementing Services in accord with the rates and terms stated in Acidizing and Cementing Services's current price lists.
 - (b) Acidizing and Cementing Services shall not be responsible for and Customer shall indemnify Acidizing and Cementing Services against any liability for damage to property of Customer and of the well owner (if different from Customer), unless caused by the willful misconduct or gross negligence of Acidizing and Cementing Services this provision applying to but not limited subsurface damage and surface damage arising from subsurface damage.
 - (c) Customer shall be responsible for and indemnify Acidizing and Cementing Services against any liability for reservoir loss or damage, or property damage resulting from subsurface pressure, losing control of the well and/or a well blowout, unless such loss or damage is caused by the willful misconduct or gross negligence of Acidizing and Cementing Services.
 - (d) Customer shall be responsible for and indemnify Acidizing and Cementing Services against any and all liability of whatsoever nature for damages as a result of subsurface trespass, or an action in the nature thereof, arising from a service operation performed by Acidizing and Cementing Services hereunder.
 - (e) Customer shall be responsible for and indemnify Acidizing and Cementing Services against any liability for injury to or death of persons, other than employees of Acidizing and Cementing Services or damage to property (including, but not limited to, injury to the well), or any damages whatsoever, irrespective of cause, growing out of or in any way connected with the use of radioactive material in the well how, unless such damage shall be caused by the willful misconduct or gross negligence of Acidizing and Cementing Services.
 - (f) Acidizing and Cementing Services makes no guarantee of the effectiveness of the products, supplies or materials, nor of the results of any treatment or service.
 - (g) Customer shall, at Customer's risk and expense, use its best efforts to recover any Acidizing and Cementing Services equipment tools or instruments which are lost in the well and if such equipment, tools or instruments are not recovered, Customer shall pay Acidizing and Cementing Services its replacement cost unless such damage is caused by the sole negligence of Acidizing and Cementing Services. If Acidizing and Cementing Services equipment, tools, or instruments are damaged in the well, Customer shall pay Acidizing and Cementing Services the less of its replacement cost or the cost of repairs unless such damage is caused by the sole negligence of Acidizing and Cementing Services.
 - (h) Because of the uncertainty of variable well conditions and the necessity of relying on facts and supporting services furnished by others, Acidizing and Cementing Services is unable to guarantee the accuracy of any chart interpretation, research analysis, job recommendation or other data furnished by Acidizing and Cementing Services, Acidizing and Cementing Services personnel will use their best efforts in gathering such information and their best judgment in interpreting it, but Customer agrees that Acidizing and Cementing Services shall not be responsible for any damages arising from the use of such information except where due to Acidizing and Cementing Services's gross negligence or willful misconduct in the preparation or furnishing of it.
 - (i) Acidizing and Cementing Services warrants only title to the products, supplies and materials and that the same are free from defects in workmanship and materials. THERE ARE NO WARRANTIES, EXPRESS OR IMPLIED, OF MERCHANTABILITY, FITNESS FOR A PARTICULAR PURPOSE OTHERWISE WHICH EXTEND BEYOND THOSE STATED IN THE IMMEDIATELY PRECEDING SENTENCE. Acidizing and Cementing Services's liability and Customer's exclusive remedy in any cause of action (whether in contract, tort, breach of warranty or otherwise) arising out of the sale or use of any products, supplies or materials is expressly limited to the replacement of such products, supplies or materials on their return to Acidizing and Cementing Services or, at Acidizing and Cementing Services's option, to the allowance to the Customer of credit for the cost of such items. In no event shall Acidizing and Cementing Services be liable for special, incidental, indirect, punitive or consequential damages.
 - (j) Upon Customer's default in payment of Customer's account by the last day of the month following the month in which the invoice is dated, Customer agrees to pay interest thereon after default at the prime rate. at BancFirst. In the event it becomes necessary to employ an attorney to enforce collection of said account, Customer agrees to pay all collection costs and attorney fees in the amount of 20% of the amount of the unpaid account.
 - (k) This contract shall be governed by and construed in accordance with the laws of the State of Oklahoma or Acidizing and Cementing Services.
 - (l) Acidizing and Cementing Services shall not be bound by any changes or modifications in this contract, except where such change or modification is made in writing by a duly authorized executive officer of Acidizing and Cementing Services.
 - (m) Acidizing and Cementing Services will perform work in good workmanlike manner. Acidizing and Cementing Services may suspend work during the existence and continuance of any force majeure which includes without limitations, Acts of God, strikes, war, governmental restraint, or other caused beyond the reasonable control of Acidizing and Cementing Services.

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I HAVE READ AND UNDERSTAND THIS CONTRACT AND REPRESENT THAT I AM AUTHORIZED TO SIGN THE SAME AS CUSTOMER AGENT.

We certify that the Fair Labor Standards Act of 1938, as amended, has been complied with in the production of goods and/or with respect of services furnished under this contract.

SIGNED _____ DATE _____ TIME _____ A.M. P.M.

**Acidizing
AND
Cementing
Services**

P. O. Box 751
Crescent, OK 73028
(405) 969-3093

JOB LOG

WELL NO. 1-19 LEASE DEVILS CLAW TICKET NO. 6994

CUSTOMER BARBOUR ENERGY CORP. PAGE NO. 1

JOB TYPE 591 FT. 8 5/8 Csg DATE 10-28-04

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	8:00							ON LOC.
	9:55	4-5	10			200		PUMP F/W TO CIR. VIA 8 5/8 Csg
	10:02	4-5	82			250		MIX 200 SKS ^{6.5} LITE CEM. 6% GEL 3% CC
								1/4" SK FLOCELE 1.71 YIELD. TAIL @ 100 SKS
								"H" CEM 3% CC + 1/4" SK FLOCELE 1.18 YIELD
								VIA 8 5/8 Csg.
	10:23							o SHUT DOWN
	10:25							DROP PLUG
	10:26	5				200		WASH LINES & DISP @ F/W TO LAND
								PLUG
	10:35	1	34.7			700		LAND PLUG
	10:36							REL PRES. FLOAT NOT HOLDING
	10:36					300		REPRES.
	10:39					300		SHUT FN
	5:12	2-3	3			200		PUMP F/W TO CLEAR 1 1/4 Tbg
	5:15	2-3	60.91			300		MIX 200 SKS LITE CEM. 6% GEL 3% CC
								1.71 YIELD VIA 1 1/4 Tbg 210 FT.
	5:40							CIR CEM TO TOP
	5:40							SHUT DOWN
	6:30							REL.

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API No.
OFC/OCC Operator No.

CEMENTING REPORT
To Accompany Completion Report

Form 1002C
Rev 1996

OKLAHOMA CORPORATION COMMISSION
Oil & Gas Conservation Division
Post Office Box 52000-2000
Oklahoma City, Oklahoma 73152-2000
OAC 165:10-3-4(h)

All operators must include this form when submitting the Completion Report, (Form 1002A). The signature on this statement must be that of qualified employees of the cementing company and operator to demonstrate compliance with OAC 165:10-3-4(h). It may be advisable to take a copy of this form to location when cementing work is performed.

TYPE OR USE BLACK INK ONLY

*Field Name				OCC District
*Operator				OCC/OTC Operator No
*Well Name/No.	DEVILS CLAW			County SEWARD
*Location	1/4 1/4 1/4 1/4	Sec 19	Twp 33	Rge 31

Cement Casing Data	Conductor Casing	Surface Casing	Alternative Casing	Intermediate Casing	Production String	Liner
Cementing Date		10-28-04				
*Size of Drill Bit (Inches)		12 1/4				
*Estimated % wash or hole enlargement used in calculations						
*Size of Casing (inches O.D.)		8 5/8				
*Top of Liner (if liner used) (ft.)						
*Setting Depth of Casing (ft.) from ground level		591				
Type of Cement (API Class) In first (lead) or only slurry		LITE				
In second slurry		H				
In third slurry						
Sacks of Cement Used In first (lead) or only slurry		200				
In second slurry		100				
In third slurry						
Vol of slurry pumped (Cu ft)(14.X15.) in first (lead) or only slurry		242				
In second slurry		118				
In third slurry						
Calculated Annular Height of Cement behind Pipe (ft)		591				
Cement left in pipe (ft)		45				

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*Amount of Surface Casing Required (from Form 1000)	ft.
---	-----

*Was cement circulated to Ground Surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	*Was Cement Staging Tool (DV Tool) used? <input type="checkbox"/> Yes <input type="checkbox"/> No
*Was Cement Bond Log run? <input type="checkbox"/> Yes <input type="checkbox"/> No (If so, Attach Copy)	*If Yes, at what depth? ft.

CEMENTING COMPANY AND OPERATOR MUST COMPLY WITH THE INSTRUCTIONS ON REVERSE SIDE OF FORM

* Designates items to be completed by Operator.
Items not so designated shall be completed by the Cementing Company.

Remarks

Remarks

CEMENTING COMPANY

OPERATOR

I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that the cementing of casing in this well as shown in the report was performed by me or under my supervision, and that the cementing data and facts presented on both sides of this form are true, correct and complete to the best of my knowledge. This certification covers cementing data only.

I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that I have knowledge of the well data and information presented in this report, and that data and facts presented on both sides of this form are true, correct and complete to the best of my knowledge. This certification covers all well data and information presented herein.

Lance E. Berry
Signature of Cementer or Authorized Representative

Signature of Operator or Authorized Representative

Name & Title Printed or Typed
Lance E. Berry Mgr.

Cementing Company
ACIDIZING & CEMENTING SERVICES

Address
P.O. Box 751

City
Crescent

State
Okla.

Zip
73028

Telephone (AC) Number
(405) 969-3093

Date

*Name & Title Printed or Typed

*Operator

*Address

*City

*State

*Zip

*Telephone (AC) Number

*Date

INSTRUCTIONS

1. A) This form shall be filed by the operator, at the O.C.C. office in Oklahoma City, as an attachment to the Completion Report (Form 1002A) for a producing well or a dry hole.
B) An original of this form shall be filed as an attachment to the Completion Report, (Form 1002A), for each cementing company used on a well.
C) The cementing of different casing strings on a well by one cementing company may be consolidated on one form.
2. Cementing Company and Operator shall comply with the applicable portions of OAC 165:10-3-4(h).
3. Set surface casing 50 feet below depth of treatable water to be protected and cement from casing shoe to ground surface or as allowed by OAC 165:10-3-4(h).
4. IF SETTING ANYTHING OTHER THAN THE FULL AMOUNT OF SURFACE CASING, BE SURE TO FOLLOW CORPORATION COMMISSION RULES.

BARBOUR ENERGY CORP.

NOV 0 8 2004

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