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JUN 30 2005

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

CONFIDENTIAL

Form ACO-1
September 1999
Form Must Be Typed

KCC WICHITA

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIC

Operator: License # 5278
 Name: EOG Resources, Inc.
 Address: 3817 NW Expressway, Ste 500
 City/State/Zip: Oklahoma City, OK 73112
 Purchaser: _____
 Operator Contact Person: Dara Tatum
 Phone: (405) 246-3244
 Contractor: Name: Abercrombie
 License: 30684
 Wellsite Geologist: _____
 Designate Type of Completion:
 _____ New Well _____ Re-Entry _____ Workover
 _____ Oil _____ SWD _____ SIOW _____ Temp. Abd.
 _____ Gas _____ ENHR X 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. _____
2-28-05 3-10-05 4-25-05
 Spud Date or Date Reached TD Completion Date or
 Recompletion Date Recompletion Date

API No. 15 - 187-21049-0000
 County: Stanton
NE SW SW Sec. 28 Twp. 30 S. R. 40 East West
412 330' feet from (S) N (circle one) Line of Section
4043 800' feet from (E) W (circle one) Line of Section
KCC 68
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Lindsley 28 Well #: 1
 Field Name: _____
 Producing Formation: Morrow
 Elevation: Ground: 3306' Kelly Bushing: 3316'
 Total Depth: 5800 Plug Back Total Depth: 5400'
 Amount of Surface Pipe Set and Cemented at 1714' 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 WHM 2-14-07
 Drilling Fluid Management Plan
 (Data must be collected from the Reserve Pit)
 Chloride content 4000 ppm Fluid volume 1000 bbls
 Dewatering method used Evaporation
 Location of fluid disposal if hauled offsite: _____
 Operator Name: _____
 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: Dara Tatum
 Title: SR Reg. Administrator Date: 6-27-05
 Subscribed and sworn to before me this 27TH day of JUNE
 20 05
 Notary Public: Heather Nealon
 Date Commission Expires: 4-26-08

KCC Office Use ONLY

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

HEATHER NEALSON
 Cleveland County
 Notary Public in and for
 State of Oklahoma
 Commission # 04003796 Expires 4/26/08



Operator Name: EDG Resources, Inc Lease Name: Lindsley 28 Well #: 1
 Sec. 28 Twp. 30 S. R. 40 East West County: Stanton

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 <i>(Attach Additional Sheets)</i>	<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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u>See attached list</u>		
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
List All E. Logs Run:				

CASING RECORD <input 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"	24#	1714'	P.P	565	290CC-1/4# Flocele, 1% FWCA
Production	7 7/8"	4 1/2"	10.5#	5,794'	50/50 POZ PP	260	6#/sk Calseal 10% Salt, 6#/sk Gilonite, .6% Halad 322

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 checked="" type="checkbox"/> Plug Off Zone	5400'	Bail Cement	1	CIBP set @ 5400 with 1 sx cement on top.

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>		Depth
4	5468' - 5475'	500 gals 15% HCL		5468' - 5475'
4	5072' - 5081'	500 gals 15% HCL, 1500 gals 30# gel pad, 1500 30# gel pad w/ 1 ppg 20/40 white sand.		5072' - 5081'

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		2 3/8	5038'	5038'		
Date of First, Resumed Production, SWD or Enhr.		Producing Method		<input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)		
SI Pending Evaluation						
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity	
	0	58	1	N/A		

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: _____

Well Name : Lindsley 28 #1		
FORMATION	TOP	DATUM
Toronto	3290'	-26'
Douglas	3420'	104'
U. Lansing	3500'	184'
M. Lansing	3570'	254'
L. Lansing	3675'	359'
U. Kansas City	3760'	444'
U. Checkerboard	3890'	574'
U. Marmation	4110'	794'
Des Moines	4275'	959'
L. Cherokee	4675'	1359'
Novi	4775'	1459'
Keyes	5225'	1909'

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HALLIBURTON JOB SUMMARY

SALES ORDER NUMBER 3577092	TICKET DATE 03/01/05
BDA / STATE MC/Ks	COUNTY STANTON
PSL DEPARTMENT Cement	CUSTOMER REP / PHONE BUDDY LONG 1-580-651-0084
SAP BOMB NUMBER 7521	Cement Surface Casing
HES FACILITY (CLOSEST TO WELL SITE) Liberal Ks.	

REGION Central Operations	NWA / COUNTRY Mid Continent/USA
NBU ID / EMPL # MCLIO103 106304	H.E.S. EMPLOYEE NAME TYCE DAVIS
LOCATION LIBERAL	COMPANY EOG RESOURCES
TICKET AMOUNT \$16,079.85	WELL TYPE 02 Gas
WELL LOCATION LAND S.E JOHNSON KS	DEPARTMENT CEMENT
LEASE NAME LINDSLEY	Well No. 28#1
	SEC / TWP / RNG 28 - 30S - 40W

HES EMP NAME / EMP # / (EXPOSURE HOURS)	HRS	HRS	HRS	HRS
Davis, T 106304	11.5	Campbell, R 333696	10.0	
Chavez, E 324693	11.5			
Brady, P 322238	10.0			
Milbourn, W - 321935	10.0			

H.E.S. UNIT #S / (R / T MILES)	R / T MILES	R / T MILES	R / T MILES	R / T MILES
10010749-10010921	130			
10011406-10011272	65			
10010748-10011591	65			

Form. Name _____ Type: _____
 Form. Thickness _____ From _____ To _____
 Packer Type _____ Set At _____
 Bottom Hole Temp. _____ Pressure _____
 Retainer Depth _____ Total Depth _____

Date	Called Out	On Location	Job Started	Job Completed
	3/1/2005	3/1/2005	3/1/2005	3/1/2005
Time	0600	0930	1900	2030

Type and Size	Qty	Make
Float Collar TROPHYSEAL	1	HOWCO
Float Shoe		
Centralizers S-4	4	HOWCO
Top Plug HWE	1	HOWCO
HEAD PC	1	HOWCO
Limit clamp	2	HOWCO
Weld-A	1	HOWCO
Guide Shoe TIGERTOOTH	1	HOWCO
BTM PLUG BASKET	1	HOWCO

New/Used	Weight	Size	Grade	From	To	Max. Allow
Casing NEW	24#	8 5/8"		0	1,714	
Liner						
Liner						
Tubing						
Drill Pipe						
Open Hole		12 1/4				Shots/Ft.
Perforations						
Perforations						
Perforations						

Materials		
Mud Type _____	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 _____	
Perfpac Balls _____	Qty. _____	
Other _____		
Other _____		
Other _____		
Other _____		

Hours On Location		Operating Hours		Description of Job
Date	Hours	Date	Hours	
3/1				Cement Surface Casing
Total		Total		

Ordered _____	Hydraulic Horsepower Avail. _____	Used _____
Treating _____	Average Rates in BPM Disp. _____	Overall _____
Feet 44	Cement Left in Pipe Reason _____	SHOE JOINT

Cement Data								
Stage	Sacks	Cement	Bulk/Sks	Additives	W/Rq.	Yield	Lbs/Gal	
1	415	MIDCON PP		2% CC - 1/4# FLOCELE - .1% FWCA	18.04	2.93	11.40	
2	150	PREM PLUS		2% CC - 1/4# FLOCELE	6.30	1.34	14.80	
3								
4								

Summary					
Circulating _____	Displacement _____	Flush: BBI _____	Type: _____		
Breakdown _____	MAXIMUM _____	Load & Bkdn: Gal - BBI _____	Pad: Bbl - Gal _____		
Lost Returns _____	Lost Returns -> _____	Excess /Return BBI _____	Calc. Disp Bbl _____		
Cmt Rtrn#Bbl _____	Actual TOC _____	Calc. TOC: _____	Actual Disp. _____		106
Average _____	Frac. Gradient _____	Treatment: Gal - BBI _____	Disp: Bbl _____		
Shut In: Instant _____	5 Min. _____ 15 Min. _____	Cement Slurry BBI _____		253.0	
		Total Volume BBI _____		359.00	

Frac Ring #1 _____ | Frac Ring #2 _____ | Frac Ring #3 _____ | Frac Ring #4 _____

THE INFORMATION STATED HEREIN IS CORRECT
 CUSTOMER REPRESENTATIVE _____
 SIGNATURE _____

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HALLIBURTON JOB LOG		TICKET # 3577092	TICKET DATE 03/01/05
REGION Central Operations	NWA / COUNTRY Mid Continent/USA	BDA / STATE MC/Ks	COUNTY STANTON
MBU ID / EMPL # MCLIO103 106304	H.E.S. EMPLOYEE NAME TYCE DAVIS	PSL DEPARTMENT Cement	
LOCATION LIBERAL	COMPANY EOG RESOURCES	CUSTOMER REP / PHONE BUDDY LONG 1-580-651-0084	
TICKET AMOUNT \$16,079.85	WELL TYPE 02 Gas	API/UWI #	
WELL LOCATION LAND S.E JOHNSON KS	DEPARTMENT CEMENT	JOB PURPOSE CODE Cement Surface Casing	
LEASE NAME LINDSLEY	Well No. 28#1	SEC / TWP / RNG 28 - 30S - 40W	HES FACILITY (CLOSEST TO WELL S) Liberal Ks.

HES EMP NAME/EMP # (EXPOSURE HOURS)	HRS	HES EMP NAME/EMP # (EXPOSURE HOURS)	HRS	HES EMP NAME/EMP # (EXPOSURE HOURS)	HRS	HES EMP NAME/EMP # (EXPOSURE HOURS)	HRS
Davis, T 106304	12	Campbell, R 333696	10				
Chavez, E 324693	12						
Brady, P 322238	10						
Milbourn, W - 321935	10						

Chart No.	Time	Rate (RPM)	Volume (BBL/GAL)	Press. (PSI)			Job Description / Remarks
				N2	CSG	Tbg	
	0600						CALLED OUT FOR JOB
	0930						ON LOCATION RIG TIH W/DP
	1230						START S.B.D.P.
	1430						OUT OF HOLE W/DP RIG UP CASERS
	1500						START CASING AND FE
	1830						CASING ON BOTTOM HOOK UP PC AND CIRC LINES
	1835						BREAK CIRC W/RIG
	1838						CIRC TO PIT
	1850						THRU CIRC HOOK LINES TO PT
	1855				4000		PSI TEST LINES
	1900	6.0	217.0		200		PUMP 415SX P+ MC @ 11.4#
	1937	6.0	36.0		250		PUMP 150SX P+ @ 14.8#
	1942						SHUT DOWN DROP PLUG
	1943	6.0	106.0		100		PUMP DISPLACEMENT
	1959				300-180		86 BBLs IN SHUT DOWN
	2004	4.0	106.0		180-300		PUMP 5BBLs
	2005				300-220		91 BBLs IN SHUT DOWN
	2010	4.0	106.0		220-370		PUMP 5BBLs
	2011				370-260		96BBLs IN SHUT DOWN
	2016	3.0	106.0		250-400		PUMP 5BBLs
	2018				400-280		101 BBLs IN SHUT DOWN
	2023	2.0	106.0		280-400		PUMP 5BBLs
	2026		106.0		430-900		LAND PLUG
	2027				900-0		RELEASE FLOAT-----HELD
	2030						JOB OVER
							CIRCULATED CEMENT TO SURFACE

HALLIBURTON JOB SUMMARY

REGION Central Operations		MNA / COUNTRY Mid Continent/USA		SALES ORDER NUMBER 3594282	TICKET DATE 03/09/05
MBU ID / EMPL # MCLI 0110 / 198516		H.E.S. EMPLOYEE NAME		BDA / STATE MC/Ks	COUNTY STANTON
LOCATION LIBERAL		COMPANY EOG RESOURCES		PSL DEPARTMENT Cement	
TICKET AMOUNT \$11,626.09		WELL TYPE 01 Oil		CUSTOMER REP / PHONE 30212 DANNY RAUH	1-580-651-0084
WELL LOCATION ROLLA		DEPARTMENT ZI		SAP BOMB NUMBER 7523	Cement Production Casing
LEASE NAME LINDSLEY		Well No. 28#1	SEC / TWP / RNG 28 - 30S - 40W	HES FACILITY (CLOSEST TO WELL SITE) LIBERAL	

HES EMP NAME / EMP # / (EXPOSURE HOURS)	HRS	HRS	HRS	HRS
Clemens, A 198516	14.0			
Arnett, J 226567	14.0			
Tate, N 108963	13.0			

H.E.S. UNIT #S / (R / T MILES)	R / T MILES	R / T MILES	R / T MILES	R / T MILES
10547690	130			
10251402	130			
10011392-10011272	65			

Form. Name _____ Type: _____
 Form. Thickness _____ From _____ To _____
 Packer Type _____ Set At _____
 Bottom Hole Temp. _____ Pressure _____
 Retainer Depth _____ Total Depth _____

Date	Called Out	On Location	Job Started	Job Completed
	3/9/2005	3/9/2005	3/10/2005	3/10/2005
Time	1330	1730	0502	0550

Type and Size	Qty	Make
Float Collar	1	HES
Float Shoe	1	
Centralizers	18	
Top Plug	1	
HEAD	1	
Limit clamp	1	
Weld-A	2	
Guide Shoe		
BTM PLUG		

	New/Used	Weight	Size	Grade	From	To	Max. Allow
Casing	N	18.5	4	1/2	0	5,890	
Liner							
Liner							
Tubing							
Drill Pipe							
Open Hole			7 7/8				
Perforations							Shots/Ft.
Perforations							
Perforations							

Mud Type	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	In
Perfpac Balls	Qty.	
Other		
Other		
Other		
Other		
Other		

Date	Hours	Date	Hours
3/9	6.5	3/10	1.0
3/10			
	6.5		1.0

Cement Production Casing

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Ordered	Avail.	Used
Treating	Disp.	Overall
Feet 45	Reason	SHOE JOINT

Stage	Sacks	Cement	Bulk/Sks	Additives	W/Rq.	Yield	Lbs/Gal
1	280	50/50 POZ PP		6% GILSONITE, 0.6% HALAD-322, 6% CAL-SEAL, 10% SALT, 0.5% D-AIR 30	7.31	1.63	13.80
2							
3							
4							

Circulating Breakdown	Displacement	Preflush: BBI	12.00	Type: MUDFLUSH
Lost Returns	MAXIMUM	Load & Bkdn: Gal - BBI		Pad: Bbl - Gal
Cmt Rtm#Bbl	Actual TOC	Excess /Return BBI		Calc. Disp Bbl
Average	Frac. Gradient	Calc. TOC:		Actual Disp.
Shut In: Instant	5 Min. 15 Min.	Treatment: Gal - BBI		Disp: Bbl
		Cement Slurry BBI	76.0	
		Total Volume BBI	180.00	

THE INFORMATION STATED HEREIN IS CORRECT
 CUSTOMER REPRESENTATIVE _____

Dan Rank

SIGNATURE

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HALLIBURTON JOB LOG				TICKET #	TICKET DATE
REGION Central Operations		NMA / COUNTRY Mid Continent/USA		3594282	03/09/05
MBU ID / EMPL # MCLI 0110 /198516		H.E.S. EMPLOYEE NAME		SDA / STATE MC/Ks	COUNTY STANTON
LOCATION LIBERAL		COMPANY EOG RESOURCES		PSL DEPARTMENT Cement	
TICKET AMOUNT \$11,626.09		WELL TYPE 01 Oil		CUSTOMER REP / PHONE 30 DANNY RAUH 1-580-651-0084	
WELL LOCATION ROLLA		DEPARTMENT ZI		JOB PURPOSE CODE Cement Production Casing	
LEASE NAME LINDSLEY		Well No. 28#1	SEC / TWP / RNS 28 - 30S - 40W	NEAR FACILITY (CLOSEST TO WELL #) LIBERAL	
HES EMP NAME/EMP # (EXPOSURE HOURS)	HRS	HES EMP NAME/EMP # (EXPOSURE HOURS)	HRS	HES EMP NAME/EMP # (EXPOSURE HOURS)	HRS
Clemens, A 198516	14				
Arnett, J 226567	14				
Tate, N 105953	13				
3-9-05	1330				CALLED FOR JOB
	1530				ARRIVE ON LOCATION
	1543				PRE JOB SAFETY MEETING
	1600				SPOT EQUIPT.
	2200				START CASING
3-10-05	0245				CASING ON BOTTOM , CRICULATE W/ RIG
	0502		2500		PRESSURE TEST
	0504	4.0	0-12		START MUDFLUSH
	0508	6.0	0-76	200	START CEMENT 280 SKS (50/50 POZ) MIXED @ 13.5#
	0521	4.5	76.0	50	END CEMENT
	0522				WASH LINES /// DROP PLUG
	0525	6.5	0-92	50	START DISPLACEMENT W / KCL H2O
	0536	6.5	64.0	200	CAUGHT CEMENT
	0540	2.5	82.0	520	SLOW RATE
	0554	2.5	92.0	1450	LAND PLUG /// FLOAT HELD
					END JOB
			600		PRESSURE BEFORE LANDING PLUG



P.O. Box 128
Woodward, OK 73802
Phone: (580) 256-8445

Date 4 20 05
Engineer K Abell
Crew T Smith
Crew J Essary
Crew _____

Job No. 004-242
Invoice No. 11544
AFE No. 40 - 602

Customer Name EOS Resources
Address 3817 NW Expressway, Suite 500
City, State OKla. City, Ok. Zip 73112
Office _____

11544

Well Name <u>Lindsley 28-1</u>	Casing Size <u>4 1/2</u>	Weight <u>10.5#</u>
Field <u>Southeast Johnson City</u>	Tubing Size _____	Weight _____
Legal <u>Sec 28-30S-40W</u>	Fluid Level _____	Pressure <u>5</u>
Nearest Town <u>Richfield</u>	County <u>Stanton</u>	State <u>KANSAS</u>

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Run #	Service	Depth or Interval	Time In	Time Out	Lost Time
Run #1	<u>Plug CIBP</u>	<u>5400'</u>	<u>1500</u>	<u>1600</u>	<u>5</u>
Run #2	<u>Cement</u>	<u>5385'</u>	<u>1600</u>	<u>1700</u>	<u>5</u>
Run #3	<u>Perf</u>	<u>5081</u>	<u>1700</u>	<u>1730</u>	<u>5</u>
Run #4					
Run #5					
Run #6					
Run #7					
Run #8					
	Arrive on Location <u>1400</u>	Leave Location <u>1800</u>			
Totals	Time on Location <u>4</u>		Time in Hole <u>3</u>		Lost Time <u>5</u>

Service	Quantity	Unit Price	Extended Amount
<u>Setup</u>	<u>1</u>	<u>1000.00</u>	<u>1000.00</u>
<u>Run CIBP</u>	<u>5400</u>	<u>.28</u>	<u>1512.00</u>
<u>Dump Bar Cement</u>	<u>5400</u>	<u>.15</u>	<u>810.00</u>
<u>Perforate 15 10 Holes</u>	<u>1</u>	<u>1200.00</u>	<u>1200.00</u>
<u>Perforate Remaining Holes</u>	<u>26</u>	<u>35.00</u>	<u>910.00</u>
<u>Packoff + Lubricator</u>	<u>1</u>	<u>600.00</u>	<u>600.00</u>
		<u>Book</u>	<u>603.20</u>
		<u>less Disc</u>	<u>(3981.12)</u>
			<u>2050.88</u>
<u>10K Wallcraft 20 CIBP</u>	<u>1</u>	<u>675.00</u>	<u>675.00</u>
		<u>TOTAL</u>	<u>2725.88</u>

Plug Type <u>Woa 11 or 104</u>	Plug Type <u>CIBP</u>	Plug Rating <u>10K</u>
Gun Type <u>HSC</u>	Gun Size <u>3/8</u>	
Shot Type <u>Oven</u>	Gram Wt. <u>10115</u>	Hole Size <u>.34-.49</u>
		Penetration <u>24.89/105</u>
Total Shots <u>36</u>		

Interval	# shots	SPF
<u>5072 to 5081</u>	<u>36</u>	
to		
to		
to		
to		
to		
to		
to		
to		
to		

Authorized Customer Representative
The Customer Agrees to be bound by all terms and conditions noted on reverse of this form.
The signer below is authorized to bind the above company to this agreement.
Signature [Signature]
Name Me Deisker