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JUN 21 2005  
KCC WICHITA

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
September 1999  
Form Must Be Typed

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 32819  
 Name: Baird Oil Company LLC  
 Address: PO Box 428  
 City/State/Zip: Logan, KS 67646  
 Purchaser: NCRA  
 Operator Contact Person: Jim R. Baird  
 Phone: (785) 689-7456  
 Contractor: Name: WW Drilling LLC  
 License: 33575  
 Wellsite Geologist: Gary Gensch  
 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:  
 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.  
 5/20/2005 5/29/2005 6/08/2005  
 Spud Date or Date Reached TD Completion Date or  
 Recompletion Date Recompletion Date

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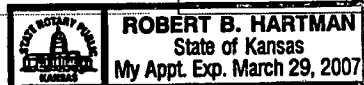
API No. 15 - 065-23059-00-00  
 County: Graham  
 21<sup>00'</sup> NE NE NW Sec. 2 Twp. 7 S. R. 22  East  West  
 330 feet from S  N (circle one) Line of Section  
 2100 feet from E  W (circle one) Line of Section  
 Footages Calculated from Nearest Outside Section Corner:  
 (circle one) NE SE  NW SW  
 Lease Name: Quinn Well #: 1-2  
 Field Name: Wildcat  
 Producing Formation: Lansing/Kansas City  
 Elevation: Ground: 2287 Kelly Bushing: 2292  
 Total Depth: 3831 Plug Back Total Depth: 3804  
 Amount of Surface Pipe Set and Cemented at 223 Feet  
 Multiple Stage Cementing Collar Used?  Yes  No  
 If yes, show depth set 1925 Feet  
 If Alternate II completion, cement circulated from 1925  
 feet depth to surface w/ 200 sx cmt.  
 Drilling Fluid Management Plan  
 (Data must be collected from the Reserve Pit)  
 Chloride content 1800 ppm Fluid volume 200 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: Jim R. Baird  
 Title: President Date: 6/20/2005  
 Subscribed and sworn to before me this 20<sup>th</sup> day of JUNE,  
 20 05.  
 Notary Public: Robert B. Hartman  
 Date Commission Expires: 3/29/2007

**KCC Office Use ONLY**  
 Letter of Confidentiality Received  
 If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution

  
 ROBERT B. HARTMAN  
 State of Kansas  
 My Appt. Exp. March 29, 2007

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Side Two

ORIGINAL

Operator Name: Baird Oil Company LLC Lease Name: Quinn Well #: 1-2
Sec. 2 Twp. 7 S. R. 22 [ ] East [x] West County: Graham

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 [x] Yes [ ] No [x] Log Formation (Top), Depth and Datum [ ] Sample
Samples Sent to Geological Survey [ ] Yes [x] No
Cores Taken [ ] Yes [x] No
Electric Log Run [x] Yes [ ] No
List All E. Logs Run: Radiation Guard, Sonic, Micro
Name Top Datum
Anhydrite 1931 +361
Topeka 3281 -989
Heebner 3488 -1196
Toronto 3511 -1219
Lansing 3530 -1238
BKC 3720 -1428
Arbuckle 3817 -1525
LTD 3831 -1539

CASING RECORD [x] New [ ] Used
Report all strings set-conductor, surface, intermediate, production, etc.
Table with columns: 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

ADDITIONAL CEMENTING / SQUEEZE RECORD
Table with columns: Purpose, Depth Top Bottom, Type of Cement, #Sacks Used, Type and Percent Additives

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
Table with columns: Shots Per Foot, Footage, Material, Depth

TUBING RECORD
Size Set At Packer At Liner Run [ ] Yes [x] No
Date of First, Resumerd Production, SWD or Enhr. 7/01/2005
Producing Method [ ] Flowing [x] Pumping [ ] Gas Lift [ ] Other (Explain)
Estimated Production Per 24 Hours Oil Bbls. 100 Gas Mcf none Water Bbls. none Gravity 35 Gravity

Disposition of Gas METHOD OF COMPLETION Production Interval
[x] Vented [ ] Sold [ ] Used on Lease [ ] Open Hole [x] Perf. [ ] Dually Comp. [ ] Commingled
(If vented, Submit ACO-18.) [ ] Other (Specify)



CHARGE TO: <i>Baird Oil Co.</i>
ADDRESS
CITY, STATE, ZIP CODE

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TICKET  
No 8390

PAGE 1 OF 1

SERVICE LOCATIONS 1. <i>Hays, Ks.</i> 2. <i>Ness City, Ks.</i>	WELL/PROJECT NO. <i>#1</i>	LEASE <i>Quinn</i>	COUNTY/PARISH <i>Grahams</i>	STATE <i>Ks</i>	CITY	DATE <i>6-6-05</i>	OWNER <i>Same</i>
	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <i>Leas's Drly Co.</i>	RIG NAME/NO.	SHIPPED VIA	DELIVERED TO <i>Location</i>	ORDER NO.	
	WELL TYPE <i>oil</i>	WELL CATEGORY <i>Development</i>	JOB PURPOSE <i>reconst Port Collar</i>	WELL PERMIT NO.	WELL LOCATION		
REFERRAL LOCATION	INVOICE INSTRUCTIONS						

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PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LOC	ACCT	DF			UM			
575		1			MILEAGE <i>#103</i>	70	mi		4 <sup>00</sup>	280 <sup>00</sup>
578		1			Pump Charge Port Collar	1	ea	1925	1250 <sup>00</sup>	1250 <sup>00</sup>
330		2			SMD Cement	200	skts		10 <sup>50</sup>	2100 <sup>00</sup>
276		2			Floccle	50	#		1 <sup>00</sup>	50 <sup>00</sup>
581		2			Cement Service Charge	200	skts		1 <sup>10</sup>	220 <sup>00</sup>
583		2			Drayage	686	FTM		1 <sup>00</sup>	686 <sup>07</sup>

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

X *[Signature]*  
DATE SIGNED *6-6-05* TIME SIGNED *1700*  A.M.  P.M.

REMIT PAYMENT TO:  
**SWIFT SERVICES, INC.**  
P.O. BOX 466  
NESS CITY, KS 67560  
785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL	ORIGINAL
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				4586 <sup>07</sup>	
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			TAX	
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				TOTAL	

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

SWIFT OPERATOR *Nick K. [unclear]* APPROVAL

Thank You!

CUSTOMER *Baird Oil Co* WELL NO. *#1* LEASE *Quinn* JOB TYPE *cement port cell* TICKET NO. *8390*

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1400							on loc setup takes P.C. @ 1925' 2 3/8" tbg x 5 1/2" cas
	1600							locate P.C. & press. well
	1605	2.5	3			300		Open P.C. Take inj rate
	1610	4	0			400		start Cement shs SMD
	1636	4	100/0			250		end Cement / start drip
	1638		10.5					cement dripd.
	1640						800 <sup>psi</sup>	close P.C. & Press. well run 3jts
	1650	2.5	0			250		reverse out
	1657		18					hole clean
								circulate hoses to pit

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Thank you  
Nick, Dan & Brett



CHARGE TO: *Baird Oil Co.*

ADDRESS

CITY, STATE, ZIP CODE

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TICKET No 8391

PAGE 1 OF 1

KCC WICHITA

SERVICE LOCATIONS 1. <i>Ways, Ks.</i> 2. <i>Ness City, Ks.</i> 3. 4.	WELL/PROJECT NO. <i>#1</i>	LEASE <i>Quinn</i>	COUNTY/PARISH <i>Graham</i>	STATE <i>Ks</i>	CITY	DATE <i>6-6-05</i>	OWNER <i>Sam</i>
TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <i>Leas Data Service</i>	RIG NAME/NO.	SHIPPED VIA <i>HT</i>	DELIVERED TO <i>Location</i>	ORDER NO.		
WELL TYPE <i>oil</i>	WELL CATEGORY <i>Development</i>	JOB PURPOSE <i>Tools Port Cellar</i>	WELL PERMIT NO.	WELL LOCATION			
REFERRAL LOCATION	INVOICE INSTRUCTIONS						

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PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
<i>100</i>		<i>1</i>			<i>MILEAGE pickup Toolman</i>	<i>70</i>	<i>mi</i>			<i>1.50</i>	<i>105.00</i>
<i>105</i>		<i>1</i>			<i>Port Cellar tool Rental w/man</i>	<i>1</i>	<i>ea</i>			<i>400.00</i>	<i>400.00</i>
<i>107</i>		<i>2</i>			<i>stripper Head</i>	<i>1</i>	<i>ea</i>	<i>5 1/2</i>	<i>in</i>	<i>150.00</i>	<i>150.00</i>

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

X *[Signature]*  
DATE SIGNED *6-6-05* TIME SIGNED *1700*  A.M.  P.M.

**REMIT PAYMENT TO:**

**SWIFT SERVICES, INC.**  
P.O. BOX 466  
NESS CITY, KS 67560  
785-798-2300

<b>SURVEY</b>	AGREE	UN-DECIDED	DIS-AGREE
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?			
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	
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND			

PAGE TOTAL	<i>855.00</i>
TAX	
TOTAL	

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CHARGE TO: *Baird Oil Co.*

ADDRESS

CITY, STATE, ZIP CODE

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TICKET  
 No 8385

PAGE 1 OF 2

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SERVICE LOCATIONS 1. <i>Hays, Ks</i>	WELL/PROJECT NO. <i>#1</i>	LEASE <i>Quina</i>	COUNTY/PARISH <i>Graham</i>	STATE <i>Ks</i>	CITY	DATE <i>5-29-05</i>	OWNER <i>SOME</i>
2. <i>Ness City, Ks.</i>	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <i>W W Dali</i>	RIG NAME/NO.	SHIPPED VIA <i>ET</i>	DELIVERED TO <i>Location</i>	ORDER NO.	
3.	WELL TYPE <i>oil</i>	WELL CATEGORY <i>Development</i>	JOB PURPOSE <i>Cement/longstring</i>	WELL PERMIT NO.	WELL LOCATION		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
<i>575</i>		<i>2</i>			MILEAGE <i>#106</i>	<i>70</i>	<i>mi</i>			<i>4.00</i>	<i>280.00</i>
<i>578</i>		<i>2</i>			<i>Pump Charge longstring</i>	<i>1</i>	<i>ea</i>	<i>3850</i>	<i>'</i>	<i>1250.00</i>	<i>1250.00</i>
<i>407</i>		<i>1</i>			<i>Insert float shoe</i>	<i>1</i>	<i>ea</i>	<i>5 1/2</i>	<i>"</i>	<i>230.00</i>	<i>230.00</i>
<i>406</i>		<i>1</i>			<i>L.D. Plug &amp; Baffle</i>	<i>1</i>	<i>ea</i>	<i>"</i>	<i>"</i>	<i>200.00</i>	<i>200.00</i>
<i>404</i>		<i>1</i>			<i>Perf Collar</i>	<i>1</i>	<i>ea</i>	<i>"</i>	<i>"</i>	<i>1800.00</i>	<i>1800.00</i>
<i>403</i>		<i>1</i>			<i>Basket</i>	<i>1</i>	<i>ea</i>	<i>"</i>	<i>"</i>	<i>155.00</i>	<i>155.00</i>
<i>402</i>		<i>1</i>			<i>Centralizers</i>	<i>10</i>	<i>ea</i>	<i>"</i>	<i>"</i>	<i>55.00</i>	<i>550.00</i>
<i>411</i>		<i>1</i>			<i>Recipio scratchers</i>	<i>40</i>	<i>ea</i>	<i>"</i>	<i>"</i>	<i>35.00</i>	<i>1400.00</i>
<i>280</i>		<i>1</i>			<i>Flow check 21</i>	<i>500</i>	<i>gal</i>	<i>"</i>	<i>"</i>	<i>2.00</i>	<i>1000.00</i>

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

X *Dwight Phoades*

DATE SIGNED *5-29-05* TIME SIGNED *2:40*  A.M.  P.M.

**REMIT PAYMENT TO:**

**SWIFT SERVICES, INC.**  
 P.O. BOX 466  
 NESS CITY, KS 67560  
 785-798-2300

<b>SURVEY</b>	AGREE	UN-DECIDED	DIS-AGREE
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?			
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	
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND			

PAGE TOTAL *6865.00*

*page 2* *3859.35*

TAX *10724.35*

TOTAL

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

SWIFT OPERATOR *Nick Korbe* APPROVAL

**Thank You!**



PO Box 466  
 Ness City, KS 67560  
 Off: 785-798-2300

TICKET CONTINUATION

TICKET No. 8385

CUSTOMER <b>Baird Oil Co.</b>	WELL <b>Quinn #1</b>	DATE <b>5-29-05</b>	PAGE <b>2</b>	OF <b>2</b>
----------------------------------	-------------------------	------------------------	------------------	----------------

PRICE REFERENCE	SECONDARY REFERENCE / PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY		UNIT PRICE	AMOUNT		
		LOC	ACCT	DF								
325		2				Standard	200	sks	8.25	1650.00	CONFIDENTIAL	
326		2				80/40 Poz 2% gel	40	sks	6.30	252.00		
277		2				Gilsonite	500	#	40	200.00		
283		2				Salt	1800	#	17	263.50		
285		2				CFR-2	94	#	3.50	329.00		
276		2				Floccle	50	#	1.00	50.00		
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581						SERVICE CHARGE						
						CUBIC FEET	240	sks	1.10	264.00		
583						TOTAL WEIGHT	24310					
						LOADED MILES	70					
						TON MILES	850.85		1.00	850.85		

CONTINUATION TOTAL 3859.35

**JOB LOG**

**CONFIDENTIAL**

**SWIFT Services, Inc. ORIGINAL**

DATE 5-29-05 PAGE NO. 9

CUSTOMER Baird Oil Co. WELL NO. 27 LEASE Quinn JOB TYPE cement logging TICKET NO. 8385

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1730							on loc w/FE
	1830							Trks on location
	1915							START F.E.
								BREAK CIRCUIT
								5 1/2" x 14" x 3850' x 22'
								RTD 3831'
								land 24' in the air
	1015	1.5	3/2					Plug RH & MH
	1022	4	<del>0</del> 12/10			200		start Preflush 5 bbl w/ 12 bbl flocculant 5 bbl w/ r
	1030	6	5/0			250		start lead cement 4000 lbs @ 100% 2% gal
	1032	6	7/0			300		start Tail cement 2000 lbs standard
	1039		43					end cement
								wash P4t
								Drop Plug
	1044	6	0			350		start displacement
	1100		93			<del>1100</del> 1600		Land Plug
								Release Pressure
								Alert held

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Thank you

Nick, Dan, & Brett





CHARGE TO: Band O.I  
 ADDRESS:  
 CITY, STATE, ZIP CODE:

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 KCC WICHITA

TICKET  
 No 7799

PAGE 1 OF 13

SERVICE LOCATIONS 1. <u>1145175</u>	WELL/PROJECT NO. <u>1-1</u>	LEASE <u>Quinn</u>	COUNTY/PARISH <u>Greham</u>	STATE <u>KS</u>	CITY	DATE <u>05-20-05</u>	OWNER
2. <u>Ness City, KS</u>	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR	RIG NAME/NO. <u>WV Dink Rig 2</u>	SHIPPED <u>VIA</u>	DELIVERED TO <u>820 5th Santa Hill City, KS</u>	ORDER NO.	
3.	WELL TYPE <u>O.I</u>	WELL CATEGORY <u>Develop</u>	JOB PURPOSE <u>CMT Service</u>	WELL PERMIT NO. <u>15-065-2305-000</u>	WELL LOCATION <u>sd, T7, R22w</u>		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

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PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LOC	ACCT	DF		QTY.	UM	QTY.	UM	
575		1			MILEAGE #105	75	mi	4	00	300 00
5765		1			Pump Service	1	ec	650	00	650 00
410		1			Top Plug	1	ec	8 7/8 in	80	80 00
325		2			Standard CMT	150	S/S	8	05	1237 50
278		2			Calcium Chloride	4	S/S	25	00	100 00
279		2			Bentonite Gel	3	S/S	12	00	36 00
581		2			Service Ctg CMT	150	S/S	1	10	165 00
588		2			Draysge	552	Tm	1	00	552 00

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

x Bill Wick  
 DATE SIGNED 05-20-05 TIME SIGNED 1830  A.M.  P.M.

REMIT PAYMENT TO:  
 SWIFT SERVICES, INC.  
 P.O. BOX 466  
 NESS CITY, KS 67560  
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?			
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	
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND			

PAGE TOTAL	3/28	50
TAX		
TOTAL		

ORIGINAL

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

SWIFT OPERATOR Dave Ah APPROVAL

Thank You!

JOBLÖG

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SWIFT Services, Inc. ORIGINAL

DATE 05-20-05 PAGE NO. 1

CUSTOMER *Barco* WELL NO. *7-1* LEASE *Arin* JOB TYPE *8 5/8 Surface* TICKET NO. *7799*

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1810							Trucks on location
	1840							Operator on location
								Running 8 5/8 23' CS6
								TD 12 1/4 Hole 221 FT
								TD 8 5/8 223 FT 150 SMS STD, 2 1/2", 1, 3 1/2" CC
	1903							Hookup
	1907							Break Circ
	1915	5.0	0		✓		200	Start CMT <i>mix @ 14.7% cc</i>
	1923	5.0	38.5		✓		200	End CMT
								Release Plug
	1925	4.5	0		✓		100	Start Disp
		4.5	13		✓		250	End Disp
								7 bbl's Disp Circ CMT 7.2'
								20' CMT in pit
								Close
								Washup
								Reckup
								Tie Back
								Tab Complete
								<i>Thank You!</i>
								<i>Dave, B. Giner, Jason</i>

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*(25 sec)*  
*2 to pit*

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