

CONFIDENTIAL

ORIGINAL

FORM MUST BE TYPED

SIDE ONE

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

API NO. 15- 065-22775 - 0000

County Graham

240'-SW -C - NE Sec. 31 Twp. 9S Rge 23 XW ^E

3790 Feet from SN (circle one) Line of Section

1490 Feet from EW (circle one) Line of Section

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

Lease Name White Well # 1-31

Field Name Unknown

Producing Formation LKC

Elevation: Ground 2453 KB 2458

Total Depth 4250 PBTB 3988

Amount of Surface Pipe Set and Cemented at 268 Feet

Multiple Stage Cementing Collar Used? X Yes ___ No

If yes, show depth set 2090 Feet

If Alternate II completion, cement circulated from surface
feet depth to 2090 w/ 255 sx cmt.

Drilling Fluid Management Plan ALT 2 JZ 1-30-97
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume 2500 bbls

Dewatering method used Evaporation

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

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

County _____ Docket No. _____

Operator: License # 30606

Name: Murfin Drilling Co., Inc.

Address 250 N. Water, Suite 300

City/State/Zip Wichita, KS 67202

Purchaser: Basis Petroleum

Operator Contact Person: Larry M. Jack

Phone (316) 267 - 3241

Contractor: Name: Murfin Drilling Company, Inc.

License: 30606

Wellsite Geologist: Robert Patton

Designate Type of completion
X New Well ___ Re-Entry ___ Workover

X 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: _____

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. _____

10/18/96 10/25/96 11/07/96
Spud Date Date Reached TD Completion Date

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FROM CONFIDENTIAL

11-25-96

11-22-96

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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 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.

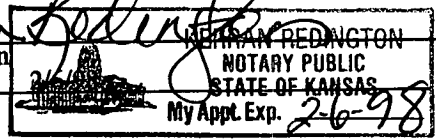
Signature Larry M. Jack

Title Larry M. Jack / Production Manager Date 11/22/96

Subscribed and sworn to before me this 22 day of November 19 96.

Notary Public Kerran Redington

Date Commission Expires _____



K.C.C. OFFICE USE ONLY

F X Letter of Confidentiality Attached
C X Wireline Log Received
C X Geologist Report Received

Distribution
___ KCC ___ SWD/Rep ___ NGPA
___ KGS ___ Plug ___ Other (Specify)

SIDE TWO

Operator name Murfin Drilling Co., Inc.

Lease Name White Well # 1-31

Sec. 31 Twp. 9S Rge. 23 East West

County Graham

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.

<p>Drill Stem Tests Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Attach Additional Sheets.)</p> <p>Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy.) DST #1:3920-4020' 30-60-60-120 1450' GIP, 774' FL, 154' CGO, 372' MCGO, 248' OCGM. FP 98/206, SIP 749-749.</p> <p>List all E.Log</p>	<p><input type="checkbox"/> Log Formation (Top), Depth and Datums <input type="checkbox"/> Sample</p> <table style="width:100%; border-collapse: collapse;"> <tr> <th style="width:60%;">Name</th> <th style="width:20%;">Top</th> <th style="width:20%;">Datum</th> </tr> <tr> <td>Anhydrite</td> <td>2072</td> <td>-2108</td> </tr> <tr> <td>Topeka</td> <td>3555</td> <td>-1097</td> </tr> <tr> <td>Heebner</td> <td>3770</td> <td>-1312</td> </tr> <tr> <td>Toronto</td> <td>3795</td> <td>-1337</td> </tr> <tr> <td>LKC</td> <td>3809</td> <td>-1351</td> </tr> <tr> <td>B/LKC</td> <td>3842</td> <td>-1384</td> </tr> </table>	Name	Top	Datum	Anhydrite	2072	-2108	Topeka	3555	-1097	Heebner	3770	-1312	Toronto	3795	-1337	LKC	3809	-1351	B/LKC	3842	-1384
Name	Top	Datum																				
Anhydrite	2072	-2108																				
Topeka	3555	-1097																				
Heebner	3770	-1312																				
Toronto	3795	-1337																				
LKC	3809	-1351																				
B/LKC	3842	-1384																				

CASING RECORD <u> </u> New <u> </u> 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#	268	60/40 Poz	160	3% cc, 2% gel
Production	7 7/8"	4.5"	10.5#	4250	EA2 Midcon 2	175 255	2% cc, 3/4# flocele

ADDITIONAL CEMENTING/SQUEEZE RECORD				
Purpose:	Depth Top/Btm	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Csg				
<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	3998-4002	500 gal MCA	3998-4002
4	3960-64	500 gal MCA	3960-64

TUBING RECORD	Size <u>2 3/8</u>	Set At <u>3984</u>	Packer At	Liner <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj. <u>11/17/96</u>		Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other		
Estimated Production Per 24 Hours	Oil 70 Bbls	Gas Mcf	Water 10 Bbls	Gas-Oil Ratio Gravity

Disposition of Gas: **METHOD OF COMPLETION** Production Interval As above

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

ALLIED CEMENTING CO., INC.

5024

ORIGINAL

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

SERVICE POINT: R

DATE <u>10/18/96</u>	SEC. <u>31</u>	TWP. <u>9S</u>	RANGE <u>23W</u>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH <u>10:35pm</u>
LEASE <u>White</u>	WELL# <u>1-31</u>	LOCATION <u>Redline + 183 3 1/2 W</u>				COUNTY <u>Graham</u>	STATE <u>Ks</u>
OLD OR NEW (Circle one) <u>NEW</u>							

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CONTRACTOR Martin Ry 3

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D.

CASING SIZE 8 1/2 DEPTH 268

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG 10.15 2 1/2 16 1/2 BBL

PERFS.

OWNER _____

CEMENT

AMOUNT ORDERED 160⁶⁰ 3% CC 2 1/2 gal

FROM CONFIDENTIAL

EQUIPMENT

153 Dave

PUMP TRUCK CEMENTER Mark

HELPER

BULK TRUCK DRIVER

DRIVER Darin

COMMON	<u>96</u>	@	<u>610</u>	<u>585.60</u>
POZMIX	<u>64</u>	@	<u>315</u>	<u>201.60</u>
GEL	<u>3</u>	@	<u>9.50</u>	<u>28.50</u>
CHLORIDE	<u>5</u>	@	<u>28.00</u>	<u>140.00</u>
		@		
		@		
		@		
		@		
		@		
HANDLING		@	<u>105</u>	<u>168.00</u>
MILEAGE <u>54m</u>			<u>84</u>	<u>345.60</u>
TOTAL				<u>1469.30</u>

REMARKS:

SERVICE

Cement Cir.

DEPTH OF JOB				
PUMP TRUCK CHARGE				<u>445.00</u>
EXTRA FOOTAGE		@		
MILEAGE <u>54</u>		@	<u>285</u>	<u>153.90</u>
PLUG <u>8 1/2 wood</u>		@		<u>45.00</u>
		@		
		@		
TOTAL				<u>643.90</u>

NOV 22
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CHARGE TO: Martin Dily, Co

STREET 250 N Water

CITY Wichita STATE Kan ZIP 67202

FLOAT EQUIPMENT

	@		
	@		
	@		
	@		
	@		
TOTAL _____			

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

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 Karl Varley

RECEIVED
OCT 20 1996
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CUSTOMER COPY



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

INVOICE

INVOICE NO.	DATE
103984	10/24/1999

WELL/LEASE NO./PROJECT	WELL/PROJECT LOCATION	STATE	OWNER
WHITE 1-31	GRAHAM	KS	SAME
SERVICE LOCATION	CONTRACTOR	JOB PURPOSE	TICKET DATE
HAYS	COMPANY TOOLS	CEMENT PRODUCTION CASING	10/24/1999
ACCT NO.	CUSTOMER AGENT	VENDOR NO.	CUSTOMER P.O. NUMBER
614500	JOHN GERSTNER		
			SHIPPED VIA
			COMPANY TRUCK
			FILE NO.
			1559

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MURFIN DRUG CO
P. O. BOX 130
HILL CITY, KS 67642

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	108	MI	2.99	322.92
001-016	CEMENTING CASING	4250	FT	1,720.00	1,720.00
030-016	5W TOP PLUG	4.5	IN	45.00	45.00
12A	GUIDE SHOE - 4 1/2" 8RD THD	1	EA	95.00	95.00
325.201					
24A	INSERT FLOAT VALVE - 4 1/2" 8RD	1	EA	98.00	98.00
815.19101					
27	FILL-UP UNIT 4 1/2"-5"	1	EA	47.00	47.00
815.19111					
40	CENTRALIZER 4-1/2 X 7-7/8	8	EA	50.00	400.00
806.60004					
320	CEMENT BASKET 4 1/2"	1	EA	105.00	105.00
800.8881					
350	HALLIBURTON WELD-A	1	EA	16.75	16.75
890.10802					
60	SCRATCHER-ROTO WALL-WIRE	24	EA	18.30	439.20
806.71001					
019-240	CASING SWIVEL W/WALL CLEANERS	1	EA	185.00	185.00
73	BAKER PORT COLLAR 4.5"	1	EA	1,300.00	1,300.00
813.0151					
504-308	CEMENT - STANDARD	185	SK	10.05	1,859.25
509-968	SALT	800	LB	.15	120.00
508-127	CAL SEAL 60	9	SK	25.90	233.10
508-291	GILSONITE BULK	925	LB	.40	370.00
507-153	CFR-3	52	LB	4.85	252.20
507-970	D-AIR 1, POWDER	46	LB	3.25	149.50
018-317	SUPER FLUSH	10	SK	100.00	1,000.00
500-207	BULK SERVICE CHARGE	227	CFT	1.35	306.45
500-306	MILEAGE CMTG MAT DEL OR RETURN	543.051	TMI	1.05	570.20

***** CONTINUED ON NEXT PAGE *****

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

CUSTOMER COPY



HALLIBURTON

ORIGINAL

REMIT TO:

P.O. BOX 951046
DALLAS, TX 75395-1046

INVOICE

INVOICE NO.	DATE
103984	10/24/1999

WELL LEASE NO./PROJECT		WELL/PROJECT LOCATION		STATE	OWNER
WHITE 1-31		GRAHAM		KS	SAME
SERVICE LOCATION	CONTRACTOR	JOB PURPOSE			TICKET DATE
HAYS	COMPANY TOOLS	CEMENT PRODUCTION CASING			10/24/1999
ACCT. NO.	CUSTOMER AGENT	VENDOR NO.	CUSTOMER P.O. NUMBER	SHIPPED VIA	FILE NO.
614500	JOHN GERSTNER			COMPANY TRUCK	1555

CONFIDENTIAL

MURFIN DRLO CO
P. O. BOX 130
HILL CITY, KS 67642

M

DIRECT CORRESPONDENCE TO:

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

REFERENCE NO.	DESCRIPTION	QUANTITY	UM	UNIT PRICE	AMOUNT
	INVOICE SUBTOTAL				9,634.57
	DISCOUNT-(BID)				2,333.64
	INVOICE BID AMOUNT				7,300.93
	*-KANSAS STATE SALES TAX				239.62
	*-HAYS CITY SALES TAX				48.92
	7 03601 000 L 9563A 7589.47 Cement prod casy				
INVOICE TOTAL - PLEASE PAY THIS AMOUNT =====>					\$7,509.47

Stamp: STATE OF KANSAS COMMISSION NOV 20 1999

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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



HALLIBURTON ENERGY SERVICES

HAL-1906-P

CHARGE TO:
MURPHY DRILLING Co.
 ADDRESS
P.O. BOX 130
 CITY, STATE, ZIP CODE
HIDE CITY, KS 67642

CUSTOMER COPY

TICKET

No.

103984 - 1

PAGE 1 OF 2

SERVICE LOCATIONS 1. HKS, KS	WELL/PROJECT NO. 1-31	LEASE WHITE	COUNTY/PARISH GRAHAM	STATE KS	CITY/OFFSHORE LOCATION	DATE 10-24-96	OWNER SAME
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	NITROGEN JOB? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	CONTRACTOR Co Tools	RIG NAME/NO.	DELIVERED TO COLONY	ORDER NO.	
3.	WELL TYPE 01	WELL CATEGORY 01	JOB PURPOSE 035	WELL PERMIT NO. 15065227750000	WELL LOCATION 31 - 95 - 236		
4.	REFERRAL LOCATION	INVOICE INSTRUCTIONS					

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PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.	U/M	QTY.	U/M	UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
000-117		1			MILEAGE	108	MI	1	UNIT	2.99	322.9
001-016		1			PUMP SERVICE	4250	FT	6	HRS	1720.00	1720.0
030-016		1			SW TOP PLUG	1	EA	8 1/2"		45.00	45.0
12A	825.201	1			GUIDE SHOE	1	EA	4 1/2"		95.00	95.0
24A	815.19101	1			INSERT FLOAT VALVE	1	EA	4 1/2"		98.00	98.0
27	815.19111	1			FOLLOW UP UNIT	1	EA			47.00	47.0
40	806.60004	1			CENTRALIZERS (H)	8	EA	4 1/2"		50.00	400.0
320	800.8881	1			BASKET	1	EA	4 1/2"		105.00	105.0
350	890.10802	1			HOWED WELD "A"	1	EA			16.75	16.7
60	806.71001	1			SCRATCHERS - ROW WALL - WIRE (B)	24	EA			18.30	439.2
019-210		1			CASING SWIVEL	1	JOB	4 1/2"		185.00	185.0
72	834.0304	1			PORT COLLAR - (B) @ 2091'	1	EA	4 1/2"		1300.00	1300.0

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.

SUB SURFACE SAFETY VALVE WAS:
 PULLED & RETURN PULLED RUN

TYPE LOCK _____ DEPTH _____

BEAN SIZE _____ SPACERS _____

TYPE OF EQUALIZING SUB. _____ CASING PRESSURE _____

TUBING SIZE _____ TUBING PRESSURE _____ WELL DEPTH _____

TREE CONNECTION _____ TYPE VALVE _____

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?
 YES NO

CUSTOMER DID NOT WISH TO RESPOND

PAGE TOTAL	4773.8
FROM CONTINUATION PAGE(S)	4860.7
SUB-TOTAL: APPLICABLE TAXES WILL BE ADDED ON INVOICE	9634.5

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) WILLIAM STUCK	CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE) <i>[Signature]</i>	HALLIBURTON OPERATOR/ENGINEER WAYNE WILSON	EMP # 89377	HALLIBURTON APPROVAL
---	--	--	-----------------------	----------------------



JOB SUMMARY

HALLIBURTON DIVISION
HALLIBURTON LOCATION

M.D. Cont...
HAYS KS

BILLED ON TICKET NO. *103984*

CUSTOMER

Mar 1 1998

LEASE

WELL NO.

1-21

JOB TYPE

DATE

WELL DATA
FIELD _____ SEC *31* TWP. *9s* RNG. *23u* COUNTY *Cochran* STATE *KS*

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 _____

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	NEW USED	WEIGHT	SIZE	FROM	TO	MAXIMUM PSI ALLOWABLE
CASING	<i>4</i>	<i>10.5"</i>	<i>4 1/2</i>	<i>H B</i>	<i>4249</i>	
LINER						
TUBING						
OPEN HOLE			<i>7 7/8</i>	<i>4249</i>	<i>4250</i>	SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

JOB DATA

TOOLS AND ACCESSORIES		
TYPE AND SIZE	QTY.	MAKE
FLOAT COLLAR <i>7 1/2" x 1 1/2"</i>	<i>1</i>	<i>HOWE</i>
FLOAT SHOE <i>4 1/2" x 1 1/2"</i>	<i>1</i>	<i>"</i>
GUIDE SHOE	<i>1</i>	<i>"</i>
CENTRALIZERS	<i>8</i>	<i>"</i>
BOTTOM PLUG <i>Drinker</i>	<i>1</i>	<i>"</i>
TOP PLUG <i>S-10</i>	<i>1</i>	<i>"</i>
HEAD <i>P.C.</i>	<i>1</i>	<i>"</i>
PACKER <i>Scratchers</i>	<i>24</i>	<i>Becker</i>
OTHER <i>Port Collar</i>	<i>1</i>	<i>Becker</i>

CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE <i>10-24-96</i>	DATE <i>10-24-96</i>	DATE <i>10-24-96</i>	DATE <i>10-24</i>
TIME <i>1630</i>	TIME <i>1900</i>	TIME <i>2120</i>	TIME <i>2359</i>

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
<i>Wilson</i>	<i>B2377</i>	<i>HAYS KS</i>
<i>D. Ash</i>	<i>21007</i>	<i>"</i>
<i>L. Leiker</i>	<i>H6873</i>	<i>"</i>

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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. _____ IN
PERFPAC BALLS TYPE _____ QTY. _____
OTHER _____
OTHER _____

DEPARTMENT **CEMENT**
DESCRIPTION OF JOB **4 1/2" LONGSTRONG**
PORT COLLAR TOP JT # 53 C 2091
TOTAL PIPE- 4260.90
JOB DONE THRU: TUBING CASING ANNULUS TBG./ANN.
CUSTOMER REPRESENTATIVE **X**
HALLIBURTON OPERATOR *Wayne W. Ison* COPIES REQUESTED _____

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
<i>1</i>	<i>185</i>	<i>STD</i>		<i>B</i>	<i>5% Wilsonite, 5% Gel Seal, 3% CTR-3 1/4" D-AIR 10% Seal It</i>	<i>1.37</i>	<i>15.3</i>

PRESSURES IN PSI
CIRCULATING _____ DISPLACEMENT _____
BREAKDOWN _____ MAXIMUM _____
AVERAGE _____ FRACTURE GRADIENT _____
SHUT-IN: INSTANT _____ 5-MIN _____ 15-MIN _____
HYDRAULIC HORSEPOWER _____
ORDERED _____ AVAILABLE _____ USED _____
AVERAGE RATES IN BPM _____
TREATING _____ DISPL. _____ OVERALL _____
CEMENT LEFT IN PIPE _____
FEET *3780* REASON *insert*

SUMMARY

VOLUMES

PRESLUSH: BBL. *1000* TYPE *SuperFlash*
LOAD & BKDN: BBL. *67.1*
TREATMENT: BBL. *67.1*
CEMENT SLURRY: BBL. *44.2*
TOTAL VOLUME: BBL. _____

REMARKS

see chart & Job Log

FIELD OFFICE



JOB LOG HAL-2013-C

DATE 10-24-96 PAGE NO. 1

CUSTOMER Murf & Drlg. WELL NO. #1-31 LEASE White JOB TYPE Long String TICKET NO. 103984

CHART NO.	TIME	RATE (BPM)	VOLUME (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1630							Called out.
	1900							ON Location ORIGINAL Safety meeting Setup Trucks
	2120							BREAK CIRCULATION - MUD PUMP - ROTATE CSG.
1	2232	6	3		✓		250	PUMP 3 BBL SPACER ROTATE
	2233	6	10		✓		250	PUMP SUPERFLUSH "
	2236	6	3		✓		250	PUMP 3 BBL SPACER "
	2239		2.4					PLUG BATHOLE - 10 SKS
	2242	6 1/2	41.8		✓		250	MAX CMT DOWN CASING 175 SKS - ROTATE
	2250							WASH OUT PUMP - LEVES NOV 22
	2251							RELEASE PLUG CONFIDENTIAL
	2258	7	0		✓		600	DISPLACE PLUG - ROTATE
			57					SHOT OFF ROTARY
	2305		67.1				1000	PLUG DOWN RELEASE PSE RELEASED MAR 23 1998
	2307						OK	FLOAT HELD WASH-UP FROM CONFIDENTIAL RACK-UP THANK YOU WAYNE, DAVE, LYCE
	2359							JOB COMPLETE

ORIGINAL

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



HALLIBURTON

INVOICE

CONFIDENTIAL

INVOICE NO.	DATE
103721	10/31/1998

WELL LEASE NO./PROJECT	WELL/PROJECT LOCATION	STATE	OWNER
WHITE 1	GRAHAM	KS	SAME
SERVICE LOCATION	CONTRACTOR	JOB PURPOSE	TICKET DATE
HAYS	COMPANY TOOLS	CEMENT PRODUCTION CASING	10/31/1998
ACCT. NO.	CUSTOMER AGENT	VENDOR NO.	CUSTOMER P.O. NUMBER
614500	JOHN GERSTNER		
			SHIPPED VIA
			COMPANY TRUCK
			FILE NO.
			1593

RECEIVED
NOV 5 1998

MURFIN DRLG CO
P. O. BOX 130
HILL CITY, KS 67642

NEW COMPETITION
APPROVED

DIRECT CORRESPONDENCE TO:

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

ORIGINAL

REFERENCE NO.	DESCRIPTION	QUANTITY	UM	UNIT PRICE	AMOUNT
PRICING AREA - MID CONTINENT					
000-117	MILEAGE CEMENTING ROUND TRIP	108	MI	2.99	322.92
		1	UNT		
009-134	CEMENT SQUEEZE	2092	FT	1,565.00	1,565.00
009-019		1	UNT		
128-546	SQUEEZE MANIFOLD	1	DAY	290.00	290.00
		1	EA		
116-437	PORT COLLAR OPENING TOOL	1	EA	350.00	350.00
504-280	MIDCON-2 STANDARD CEMENT	255	SK	12.76	3,253.80
509-406	ANHYDROUS CALCIUM CHLORIDE	6	SK	40.75	244.50
507-210	FLOCELE	118	LB	1.65	194.70
500-306	MILEAGE CMTG MAT RETURN	158.436	TMI	1.05	166.36
500-225	CEMENTING MATERIALS RETURNED	60	CFT	2.552	153.12
500-207	BULK SERVICE CHARGE	335	CFT	1.35	452.25
500-306	MILEAGE CMTG MAT DEL OR RETURN	848.016	TMI	1.05	890.42
INVOICE SUBTOTAL					7,883.07
DISCOUNT-(BID)					
INVOICE BID AMOUNT					2,358.03
*-KANSAS STATE SALES TAX					183.53
*-HAYS CITY SALES TAX					37.46
INVOICE TOTAL - PLEASE PAY THIS AMOUNT					\$5,746.03

NOV 22
STATE OF KANSAS
CONFIDENTIAL

CEMENT PORT COLLAR.

RELEASED

MAR 23 1998

FROM CONFIDENTIAL

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.



JOB LOG HAL-2013-C

DATE 10-31-88
TICKET NO. 103721

CUSTOMER		WELL NO.	LEASE	JOB TYPE		DESCRIPTION OF OPERATION AND MATERIALS	
9m Sin Drilling		1	White	Cmt thru Port Collar			
CHART NO.	TIME	RATE (BPM)	VOLUME (BBL/GAL)	PUMPS (T/M/C)	PRESSURE (PSI) TUBING CASING		
	05:30						Called Out
	08:00						On loc
	08:15						Spot + Set up Equip - Discuss Job
	09:38				1500	1500	Start 4 1/2" Port Collar Tool in Hole on 2 3/8" Tbg
	09:50				200	200	locate Port Collar @ 2090'
	10:01						Pres Test Csg - OK
	10:03						Pres up to Open Tool
	10:35						Open Port Collar
	10:35						Pump thru Port Collar
	10:38						Had Good Blow on Ann
	10:46				800	800	Start Mix Cmt
	10:49						220sk Mid con II 7/8" cc 3/8" Floate @ 11' 7/8"
	11:15						35sk mid con II 7/8" cc 3/8" Floate @ 12' 3/4"
							Finish Mix Cmt
							Start Displ
							Stop Displ 7 7/8" in
							Close Port Collar 7 20sk cmt to P. +
							Pres Test - OK
							Start Rev Out
							Stop Rev Out 7 4881 Pumped - Round Jct
							Finish Rev out @ Rev Running 2 more Jct
							Washup & Rackup
							Rig Pull Port Collar Operating Tool
							Sub Complete

CONFIDENTIAL

ORIGINAL

RELEASED

MAR 23 1998

FROM CONFIDENTIAL

FIELD OFFICE



JOB SUMMARY

HALLIBURTON DIVISION
HALLIBURTON LOCATION

Mid Continent
Hays, KS

BILLED ON TICKET NO. 10

WELL DATA

FIELD _____ SEC 31 TWP. 9^s RNG 23^w COUNTY Graham STATE Ks

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 _____

	NEW USED	WEIGHT	SIZE	FROM	TO	MAXIMUM ALLOWED
CASING	U		4 1/2"	0		
LINER						
TUBING	U		2 3/8"	0		
OPEN HOLE						SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

CONFIDENTIAL

ORIGINAL

JOB DATA

CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE <u>10-31-91</u>	DATE <u>10-31-91</u>	DATE <u>10-31-91</u>	DATE _____
TIME <u>05:30</u>	TIME <u>08:00</u>	TIME <u>08:00</u>	TIME _____

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
FLOAT COLLAR		
FLOAT SHOE		
GUIDE SHOE		
CENTRALIZERS		
BOTTOM PLUG		
TOP PLUG		
HEAD		
PACKER		
OTHER		

MATERIALS

TREAT. FLUID _____ DENSITY _____ LB/GAL. °API

DISPL. FLUID _____ DENSITY _____ LB/GAL. °API

PROP. TYPE _____ SIZE _____ LB

PROP. TYPE _____ SIZE _____

ACID TYPE _____ GAL _____ %

ACID TYPE _____ GAL _____

ACID TYPE _____ GAL _____

SURFACTANT TYPE _____ GAL _____ IN

NE AGENT TYPE _____ GAL _____

FLUID LOSS ADD. TYPE _____ GAL _____ IN

GELLING AGENT TYPE _____ GAL-LB _____ IN

FRIC. RED. AGENT TYPE _____ GAL-LB _____ IN

BREAKER TYPE _____ GAL-LB _____ IN

BLOCKING AGENT TYPE _____ GAL-LB _____

PERFFAC BALLS TYPE _____ QTY. _____

OTHER _____

OTHER _____

RELEASED
MAR 25 1998
FROM CONFIDENTIAL

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
<u>J Becker</u>	<u>PK 4132L</u>	<u>Hays, Ks</u>
<u>J Pannonskiel</u>	<u>PT 53292</u>	" "
<u>D Becker</u>	<u>BT 4444 5076</u>	" "

DEPARTMENT Cement

DESCRIPTION OF JOB Cement Plug Cellar

JOB DONE THRU: TUBING CASING ANNULUS TBG/ANN

CUSTOMER REPRESENTATIVE X John Gessner

HALLIBURTON OPERATOR John Becker COPIES REQUESTED _____

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK	MIXED LBS./GAL.
	<u>280</u>	<u>Milcon II</u>		<u>B</u>	<u>2^{cc} CC + 3/8^{cc} Flocc</u>	<u>3.21</u>	<u>11.1</u>
	<u>35</u>	<u>Milcon II</u>		<u>B</u>	<u>2^{cc} CC + 1/2^{cc} Flocc</u>	<u>1.98</u>	<u>12.8</u>

SUMMARY

CIRCULATING _____ DISPLACEMENT _____

BREAKDOWN _____ MAXIMUM _____

AVERAGE _____ FRACTURE GRADIENT _____

SHUT-IN: INSTANT _____ 5-MIN _____ 15-MIN _____

ORDERED _____ AVAILABLE _____ USED _____

TREATING _____ DISPL _____ CEMENT LEFT IN PIPE _____

FEET _____ REASON _____

PRESSURES IN PSI _____

VOLUMES _____

PRESLUSH: BBL-GAL _____ TYPE _____

LOAD & BKDN: BBL-GAL _____ PAD: BBL-GAL _____

TREATMENT: BBL-GAL _____ DISPL: BBL-GAL 8

CEMENT SLURRY: BBL-GAL (160+12) 172 F

TOTAL VOLUME: BBL-GAL _____

REMARKS See Job Log
Thank you John Crew

FIELD OFFICE

LEASE White WELL NO. 1 JOB TYPE Cement Plug Cellar DATE 10-31-91