

Operator Name: CLX ENERGY, INC. Lease Name: ADELHARDT Well #: 1112
 Sec. 12 Twp. 30 S. R. 11 East West County: Barber

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 (Attached)(2) 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:

DIL, DC Porosity, Micro-Log

Log Formation (Top), Depth and Datum Sample

Name	Top	Datum
Indian Cave	2702'	- 894'
Tarkio Limestone	2894'	-1086'
Elgin Limestone	3487'	-1679'
Heebner Shale	3678'	-1870'
Lower Douglas Sand	3794'	-1986'

CASING RECORD New 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	# Sacs Used	Type and Percent Additives
Surface	12-1/4"	8-5/8"	23#/Ft.	326'	60/40 Pos.	230	3%CC & 2% gel

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 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

UBING RECORD Size Set At Packer At Liner Run Yes No

ation of First, Resumed Production, SWD or Enhr. Producing Method Flowing Pumping Gas Lift Other (Explain)

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

osition of Gas **METHOD OF COMPLETION** Production Interval
 Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
 (If vented, Sumit ACO-18.) Other (Specify) _____

ALLIED CEMENTING CO., INC.

17732

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

SERVICE POINT:
med. lodge, ks

DATE	9-17-04	SEC.	12	TWP.	30s	RANGE	11w	CALLED OUT	3:30 P.m.	ON LOCATION	4:30 P.m.	JOB START	6:30 P.m.	JOB FINISH	7:30 P.m.
LEASE	Adelhardt	WELL #	1-12	LOCATION	Isabel + 42 Fet. 2s-4e-						COUNTY	Barber	STATE	KS	
OLD OR NEW	(Circle one)		NEW												
	1/20/w to Rig														

CONTRACTOR Pickrell Drp. OWNER CLX Inc.

TYPE OF JOB Rotary Plug

HOLE SIZE 7 7/8 T.D. 3810'

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4 1/2 - x hole DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX 100 MINIMUM 50

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT H₂O Fresh

EQUIPMENT _____

PUMP TRUCK CEMENTER Larry Dreiling

368-265 HELPER Bill m^c

BULK TRUCK _____

364 DRIVER Ferry L.

BULK TRUCK _____

_____ DRIVER _____

CEMENT	AMOUNT ORDERED	PRICE	TOTAL
COMMON	<u>75 A</u>	@ <u>7.85</u>	<u>588.75</u>
POZMIX	<u>50</u>	@ <u>4.10</u>	<u>205.00</u>
GEL	<u>6</u>	@ <u>11.00</u>	<u>66.00</u>
CHLORIDE	_____	@ _____	_____
ASC	_____	@ _____	_____
RECEIVED			
OCT 12 2004			
KCC WICHITA			
HANDLING	<u>131</u>	@ <u>1.35</u>	<u>176.85</u>
MILEAGE	<u>16 x 131 x .05</u>		<u>150.00</u>
			<u>min chrg</u>
			TOTAL <u>1186.60</u>

REMARKS:

750' w/ 50sx

350' w/ 50sx

40' w/ 10sx

RH w/ 15sx

Cemented w/ 12.5sx 60' 40' 6% Gel

CHARGE TO: CLX Inc.

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB	<u>750'</u>		
PUMP TRUCK CHARGE			<u>570.00</u>
EXTRA FOOTAGE	_____	@ _____	_____
MILEAGE	<u>16</u>	@ <u>4.00</u>	<u>64.00</u>
	_____	@ _____	_____
	_____	@ _____	_____
	_____	@ _____	_____

TOTAL 634.00

PLUG & FLOAT EQUIPMENT

MANIFOLD	_____	@ _____	_____
	_____	@ _____	_____
	_____	@ _____	_____
	_____	@ _____	_____
	_____	@ _____	_____

TOTAL _____

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.

TAX _____

TOTAL CHARGE ~~_____~~

DISCOUNT ~~_____~~ IF PAID IN 30 DAYS

SIGNATURE X Mike Kern X Mike Kern

ANY APPLICABLE TAX WILL BE CHARGED UPON INVOICING PRINTED NAME