

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

API NO. 15- 135-23,801-00021 ORIGINAL

Operator: License # 4058
 Name: American Warrior, Inc.
 Address Box 399
 City/State/Zip Garden City, KS 67846

County Ness
NW-SE-NE - Sec. 30 Twp. 19 Rge. 21 X
1650 Feet from S (circle one) Line of Section
990 Feet from E (circle one) Line of Section

Purchaser: /Texaco
 Operator Contact Person: Scott Corsair
 Phone (913) 398-2270
 Contractor: Name: Emphasis Oil Operations
 License: 8241
 Wellsite Geologist: Scott Corsair

Footages Calculated from Nearest Outside Section Corner:
(NE) SE, NW or SW (circle one)
 Lease Name Moore Well # 3-30
 Field Name Schaben

Designate Type of Completion
 New Well Re-Entry Workover
 Oil SUD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, VSW, Expl., Cathodic, etc)

Producing Formation Cherokee
 Elevation: Ground 2297' KB 2302'
 Total Depth 4431' PBD 4414'
 Amount of Surface Pipe Set and Cemented at 310 Feet

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 _____ PBD
 Commingled _____ Docket No. _____
 Dual Completion _____ Docket No. _____
 Other (SWD or Inj?) _____ Docket No. _____
12-30-93 1-7-94 3-22-94
 Spud Date Date Reached TD Completion Date

Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set 1500 Feet
 If Alternate II completion, cement circulated from 1500
 feet depth to surface w/ 300 inches

Drilling Fluid Management Plan ALT 2 JTB 9-18-97
 (Data must be collected from the Reserve Pit)
 Chloride content 42,000ppm Fluid volume 210 bb
 Dewatering method used evaporation
 Location of fluid disposal if hauled offsite: _____

Operator Name 09-12-1997
 Lease Name _____ License No. _____
 Quarter _____ Sec. _____ Twp. _____ S Rng. _____ E/W
 County _____ Docket No. _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colored Derby Building, 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 Scott Corsair
 Title Agent Date 7-28-94
 Subscribed and sworn to before me this 28th day of July, 19 94.
 Notary Public Bernice Moore
 Date Commission Expires 2/7/98

K.C.C. OFFICE USE ONLY		
F	<input type="checkbox"/>	Letter of Confidentiality Attached
C	<input checked="" type="checkbox"/>	Wireline Log Received
C	<input checked="" type="checkbox"/>	Geologist Report Received
Distribution		
<input checked="" type="checkbox"/>	KCC	<input type="checkbox"/> SVD/Rep
<input type="checkbox"/>	KGS	<input type="checkbox"/> Plug
		<input type="checkbox"/> NGPA
		<input type="checkbox"/> Other
		(Specify)

My Appt. Exp. 2/7/98

Operator Name AMERICAN WARRIOR Lease Name Moore Well # 3-30
 Sec. 30 Twp. 19 Rge. 21 East County Ness
 West

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.

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 Spaces
 Neutron II Log
 Dual Induction Laterlog

Log Formation (Top), Depth and Datum Sample

Name	Top	Datum
Anhydrite	1521	+781
Heebner	3787	-1485
Lansing	3827	-1525
Base Kansas City	4163	-1861
Pawnee	4244	-1942
Fort Scott	4326	-2024
Mississippian Osage	4423	-2121

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	# Sacks Used	Type and Percent Additives
surface	12 1/2	8 5/8	20	310'	40/60Poz	180	2% Ge13% CC
production	7 7/8	4 1/2	10.5	4427'	EA2	125	2% Ge1 0.33% HALAD-322
		PORT COLLAR		1500'	HALLIBURTON LITE	350	1/4% /SK FLOCCEL

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	Depth
4	4397-4400	250 gal. 15% MCA	4397-4400

TUBING RECORD Size 2 3/8 Set At 4375 Packer At NA Liner Run Yes No

Date of First, Resumed Production, SWD or Inj. 4-1-94 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	10		40		40

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Conmingled Cherokee conglomerate

Production Interval Other (Specify) _____ 4397-4400

ORIGINAL

SCOTT CORSAIR
AMERICAN WARRIOR, INC.
PETROLEUM GEOLOGIST
Intern Petroleum Engineer #10906
210 Avenue A
P.O. Box 6
Bazine, Ks 67516
913-398-2270 Fax 913-398-2586
Mobile 913-731-5060

September 11, 1997

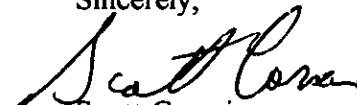
Re: ACO-1 for the Moore #3-30

Kansas Corporation Commission
Mr. Jim Hemmen
Conservation Division
130 S. Market - Room 2078
Wichita, Kansas 67202

Dear Jim:

I am enclosing copies of the requested documents for the Moore #3-30. I have reconstructed the back page of the ACO-1. If you need further information, please advise and I will attempt to provide it.

Sincerely,


Scott Corsair



HALLIBURTON ENERGY SERVICES

FORM 1906 R-12

CHARGE TO: **AMERITON WARDIOR**
 ADDRESS: **P.O. Box 399**
 CITY, STATE, ZIP CODE: **Garden City, KS**

TICKET No. **663235 - 1**
 PAGE 1 OF 2

SERVICE LOCATIONS 1. WESS CO. KS	WELL/PROJECT NO. 3-30	LEASE MOORE	COUNTY/PARISH WESS	STATE KS	CITY/OFFSHORE LOCATION	DATE 12-30-93	OWNER SAME
2. HAYS, KS	TICKET TYPE <input checked="" type="checkbox"/> SERVICE	NITROGEN JOB? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	CONTRACTOR EMPHASIS DRILL	RIG NAME/NO. #7	SHIPPED VIA STMS	DELIVERED TO LOANOW	ORDER NO.
3.	WELL TYPE 01	WELL CATEGORY 01	JOB PURPOSE 010	WELL PERMIT NO. 15-135-23801	WELL LOCATION S 30 - 19S - 20W		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT		UNIT PRICE	AMOUNT
		LOC	ADCT	DF							
000-117		1			MILEAGE	38	MT	1		2.75	104.50
001-016		1			PUMP CHARGE	303	FT	6	WES	620.00	620.00
030-503	401.4221	1	5103		LA-11 PLUG	1	EA	87	"	95.00	95.00
ORIGINAL											

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.

CUSTOMER OR CUSTOMER'S AGENT SIGNATURE: **X Scott Corsair**
 DATE SIGNED: **12-30-93** TIME SIGNED: **2130**

do do not require IPC (Instrument Protection). Not offered

SUB SURFACE SAFETY VALVE WAS: <input type="checkbox"/> PULLED & RETURN <input type="checkbox"/> PULLED <input type="checkbox"/> RUN		SURVEY		AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL	819.50
TYPE LOCK	DEPTH	OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				FROM CONTINUATION PAGE(S) 2	1562.21	
BEAR RIZE	SPACERS	WE UNDERSTOOD AND MET YOUR NEEDS?						
TYPE OF EQUALIZING SUB.	CASING PRESSURE	OUR SERVICE WAS PERFORMED WITHOUT DELAY?						
TUBING SIZE	TUBING PRESSURE	WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?						
WELL DEPTH		ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO						
TREE CONNECTION	TYPE VALVE	<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND						
							SUB-TOTAL APPLICABLE TAXES WILL BE ADDED ON INVOICE	2381.7

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): **X Scott Corsair**
 CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE): **WAYNE E WILSON**
 HALLIBURTON OPERATOR/ENGINEER: **WAYNE E WILSON** EMP # **89377**
 HALLIBURTON APPROVAL: **Scott Corsair**
2576 Cont'd on

P. 5
JAN 20 '94 12:51PM HALLIBURTON SERVICES HAYS KS



WELL DATA

FIELD _____ SEC. **30** TWP. **19S** RING. **31W** COUNTY **NESS** STATE **KS**

FORMATION NAME _____ TYPE _____
 FORMATION THICKNESS _____ FROM _____ TO **0652**
 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 PSI ALLOWABLE
CASING	N	20	8 5/8	KB	307	
LINER						
TUBING						
OPEN HOLE			12 1/4	307	312	SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

JOB DATA

CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE 12-30	DATE 12-30	DATE 12-30	DATE 12-30
TIME 1830	TIME 2115	TIME 2325	TIME 2359

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
FLOAT COLLAR		
FLOAT SHOE		
GUIDE SHOE		
CENTRALIZERS		
BOTTOM PLUG		
TOP PLUG LA-11	1	HOWCO
HEAD PC	1	"
PACKER		
OTHER		

ORIGINAL

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. _____
 PERFRAC BALLS TYPE _____ QTY. _____
 OTHER _____
 OTHER _____

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
W. WELSON	R9377	NESS CITY, KS
	PEEK-UP	
	39604	
	COMBO	
M. GANTT	R1231	"
	S1145	
	BULK	
A. GABLE	88686	HAYS, KS
	S1352-76103	

DEPARTMENT **CEMENT**
 DESCRIPTION OF JOB **8 5/8" SURFACE**

JOB DONE THRU: TUBING CASING ANNULUS TBO/ANN.

CUSTOMER REPRESENTATIVE **X Scott Corwin**
 HALLIBURTON OPERATOR **Wayne Wt** COPIES REQUESTED _____

CEMENT DATA

STAGE	NUMBER OF BAGS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./BK.	MIXED LB./GAL.
	180	4070 P02	6070 STD	R	27066, 27066	1.30	13.96

PRESSURES IN PSI

SUMMARY

VOLUMES

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 **15'** REASON **REQUESTED**

PREFLUSH: BBL.-GAL. _____ TYPE _____
 LOAD & BKDN: DDL.-GAL. _____ PAD: BBL.-GAL. _____
 TREATMENT: BBL.-GAL. _____ DISPL. **BB** **19.24**
 CEMENT BLURRY: **EBL** **41.7**
 TOTAL VOLUME: BBL.-GAL. _____

REMARKS

TOTAL PDE - 310.24
SET @ 303.24 (FROM GL)

CUSTOMER **AMERICAL WARRIOR**
 LEASE **MOORE**
 WELL NO. **3-30**
 JOB TYPE **8 5/8" SURFACE**
 DATE **12-30-93**

JOB LOG FORM 2013 R-4

CUSTOMER		WELL NO.		LEASE		JOB TYPE		TICKET NO.	
AMERICAN WARRIOR		3-30		MOORE		8 5/8" SURFACE		663225	
CHART NO.	TIME	RATE (BPM)	VOLUME (BBL/GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS	
				T	C	TUBING	CASING		
	1830								CALLED OUT
	2115								ORIGINAL ON LOCATION
	2310								BREAK CIRCULATION
	2328	6	41.7		✓		300		MIX CEMENT
	2338								RELEASE PLUG
	2339	6	0		✓		350		DISPLACE PLUG
	2342		19.24						PLUG DOWN 25 SKS TO PET
									SHUT IN
									WASH-UP
									RACK-UP
	2359								JOB COMPLETE

THANK YOU
 WAYNE WISAW
 MIKE GANT
 ALAN GABLE



HALLIBURTON ENERGY SERVICES

TICKET CONTINUATION

ORIGINAL

TICKET No. 722526

CUSTOMER American Warrior WELL Moore #3-30 DATE 7-2794 PAGE 2 OF 2

FORM 1911 R-10

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LOC	ACCT	DF			U/M			
504-316		1		B	Halliburton Light Cement	350		6	82	2,387 00
507-210		1		B	Flocele Blended	88	1b	1	65	145 20
510-222		1		B	Sand 20/40 Brady onsite	2		9	80	19 60
500-207		1		B	SERVICE CHARGE			1	35	483 30
500-306		1		B	MILEAGE CHARGE		16		95	247 44
					TOTAL WEIGHT		32,558			
					LOADED MILES		16			
					CUBIC FEET		358			
					TON MILES		260.464			

ORIGINAL

CONTINUATION TOTAL 3,282.54

No. B 232894



JOB LOG FORM 2013 R-4

CUSTOMER **AMERICAN WARRIOR** WELL NO. **3-30** LEASE **MOORE** JOB TYPE **CEMENT PORT COLLAR** TICKET NO. **722526**

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1430							CALLED OUT
	1630							ON LOCATION
	1723	3	56		✓		450	CIRCULATE HOLE CLEAN
	1744	2	13		✓		300	SPOT 2 SKS SAND @ 3860' BP @ 3900
	1750				✓		800	TEST B.P. - HELD
								PULL TUBING TO FEED PORT COLLAR @ 1500'
	1855		4		✓		500	LOAD HOLE
	1858	2	5		✓		375	OPEN PORT COLLAR - INJECTION RATE
	1906	3	0		✓		300	START MIXING CEMENT
	1945	3	114.7		✓		750	FINISH MIXING
	1945	3	0					START DISPLACEMENT
	1947		5		✓		800	FINISH DISPLACEMENT
								CIRCULATED 25 SKS CEMENT TO PCT
	1851						1200	CLOSE PORT COLLAR - PSE TEST - HELD
	1853						1200	RELEASE PSE - HELD
								RUN 2 JTS
	2003	3	15		✓		400	REVERSE OUT - WASH UP TRUCK
								RUN TUBING TO CIRCULATE SAND OFF BP
	2100	3	43		✓		600	CIRCULATE SAND OFF BRIDGE PLUG
								RACK-UP
	2200							JOB COMPLETE

THANK YOU
 WAYNE WILSON
 DALE ASH
 MIKE GAJTT



HALLIBURTON SUMMARY

HALLIBURTON WELL DATAHALLIBURTON LOCATION HAYS, KSBILLED ON TICKET NO. 722536

WELL DATA

FIELD _____ SEC 30 TWP 19S RNG. 21W COUNTY NESS 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 PSI ALLOWABLE
CASING	U	10.5	4 1/2	0	3900	8P
LINER						
TUBING			2 3/8	0	1500	
OPEN HOLE						SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

ORIGINAL

JOB DATA

CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE <u>7-27</u>	DATE <u>7-27</u>	DATE <u>7-27</u>	DATE <u>7-27</u>
TIME <u>1430</u>	TIME <u>1630</u>	TIME <u>1720</u>	TIME <u>2100</u>

TOOLS AND ACCESSORIES

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

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
<u>W. WATSON</u>	<u>B9317</u>	<u>HAYS, KS</u>
<u>D. ASH</u>	<u>E1609</u>	<u>"</u>
<u>M. GANTT</u>	<u>B1231</u>	<u>"</u>
	<u>POZZ-UP</u>	
	<u>39604</u>	
	<u>COMBO</u>	
	<u>51143</u>	
	<u>BULK</u>	
	<u>51253-76103</u>	

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

DEPARTMENT CEMENT
 DESCRIPTION OF JOB CEMENT BAKER PORT CEMENT 1500'

JOB DONE THRU: TUBING CASING ANNULUS TBO/ANN.

CUSTOMER REPRESENTATIVE X SCOTT CORSAIR

HALLIBURTON OPERATOR Wayne W

COPIES REQUESTED _____

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./BK.	MIXED LBS./GAL.
	<u>350</u>	<u>HLC</u>		<u>B</u>	<u>1/4 #/SK FLOCCLE</u>	<u>1.84</u>	<u>12.7</u>

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 _____ REASON _____

SUMMARY

FRESHWASH: BBL.-GAL. _____ TYPE _____
 LOAD & BKON: BBL.-GAL. _____ PAD: BBL.-GAL. _____
 TREATMENT: BBL.-GAL. _____ DISPL. (BBL) 5.8
 CEMENT SLURRY (BBL) 114.7
 TOTAL VOLUME: BBL.-GAL. _____

REMARKS

SEE JOB LOG & CHART
THANK YOU

CUSTOMER AMERICAN WATER CO.
 LEASE MOORE
 WELL NO. 3-30
 JOB TYPE CEMENT PORT CEMENT
 DATE 7-27-71



HALLIBURTON ENERGY SERVICES

ADDRESS: *Ames via Wainwright*

CITY, STATE, ZIP CODE: *Ames, IA 50010*

COPY: _____

FIGURE: _____

No. **663928 - 1**

PAGE 1 OF 2

FORM 1906 R-13

SERVICE LOCATIONS	WELL/PROJECT NO.	LEASE	COUNTY/PARISH	STATE	CITY/OFFSHORE LOCATION	DATE	OWNER
1. <i>Ames P. 025225</i>	<i>= 3-30</i>	<i>Alcora</i>	<i>NESS</i>	<i>IA</i>		<i>1-6-94</i>	<i>Gene</i>
2.	TICKET TYPE	NITROGEN JOB?	CONTRACTOR	RIG NAME/NO.	SHIPPED VIA	DELIVERED TO	ORDER NO.
3.	<input checked="" type="checkbox"/> SERVICE	<input type="checkbox"/> YES	<i>EMPHASIS</i>	<i>F7</i>	<i>via truck</i>	<i>S/BAZEVIC, KS.</i>	
4.	<input type="checkbox"/> SALES	<input checked="" type="checkbox"/> NO					
REFERRAL LOCATION	WELL TYPE	WELL CATEGORY	JOB PURPOSE	WELL PERMIT NO.	WELL LOCATION		
	<i>01</i>	<i>01</i>	<i>035</i>	<i>135-23801</i>	<i>NE/E/NE 3018-21W</i>		
INVOICE INSTRUCTIONS							

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
<i>000-111</i>		<i>1</i>			<i>MILEAGE 3472 (RT)</i>		<i>1</i>	<i>MI</i>		<i>2.75</i>	
<i>201-016</i>		<i>1</i>			<i>Pump Seal</i>		<i>4427</i>	<i>FT</i>		<i>1545.00</i>	<i>1545.00</i>
<i>40</i>		<i>1</i>			<i>Com. Lines 5-4</i>	<i>5</i>	<i>EA</i>	<i>4 1/2 IN</i>		<i>431.00</i>	<i>135.00</i>
<i>327</i>		<i>1</i>			<i>Connet Buckets</i>	<i>2</i>	<i>EA</i>	<i>4 1/2 IN</i>		<i>105.00</i>	<i>210.00</i>
<i>430</i>		<i>1</i>			<i>Arresting Plug Catch down</i>	<i>1</i>	<i>EA</i>	<i>4 1/2 IN</i>		<i>92.00</i>	<i>92.00</i>
<i>442</i>		<i>1</i>			<i>Catcher Catch down</i>	<i>1</i>	<i>EA</i>	<i>4 1/2 IN</i>		<i>94.00</i>	<i>94.00</i>
<i>80</i>		<i>1</i>			<i>Function Pressure</i>	<i>1</i>	<i>EA</i>	<i>4 1/2 IN</i>		<i>2300.00</i>	<i>2300.00</i>
<i>82</i>		<i>1</i>			<i>Fill up unit</i>	<i>1</i>	<i>EA</i>	<i>1 IN</i>		<i>551.00</i>	<i>551.00</i>
<i>018-317</i>		<i>1</i>			<i>Sup flt</i>	<i>800</i>	<i>EA</i>			<i>1.00</i>	<i>800.00</i>

ORIGINAL

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.

CUSTOMER OR CUSTOMER'S AGENT SIGNATURE: **X**

DATE SIGNED: *1-6-94* TIME SIGNED: *2:00* A.M. P.M.

do do not require IPC (Instrument Protection). Not offered

SUB SURFACE SAFETY VALVE WAS: <input type="checkbox"/> PULLED & RETURN <input type="checkbox"/> PULLED <input type="checkbox"/> RUN		SURVEY		AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL
TYPE LOCK	DEPTH	OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?					
BEAN SIZE	SPACERS	WE UNDERSTOOD AND MET YOUR NEEDS?					
TYPE OF EQUALIZING SUB.	CASING PRESSURE	OUR SERVICE WAS PERFORMED WITHOUT DELAY?					
TUBING SIZE	TUBING PRESSURE	WELL DEPTH	WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				
TREE CONNECTION	TYPE VALVE		ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO				
				<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND			

FROM CONTINUATION PAGE(S) **2487 99**

SUB-TOTAL APPLICABLE TAXES WILL BE ADDED ON INVOICE

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)	CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE)	HALLIBURTON OPERATOR/ENGINEER	EMP #	HALLIBURTON APPROVAL
<i>Scott WRAIR</i>	<i>X Scott Wrair</i>	<i>Alan Gabriel</i>	<i>281810</i>	

WELL DATA

FIELD _____ SEC 30 TWP. 19S RING. 21W COUNTY N.S. 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 Electric Drive SET AT 4427
 BOTTOM HOLE TEMP. _____ PRESSURE _____
 MISC. DATA 1500' TOTAL DEPTH 4431

	NEW USED	WEIGHT	SIZE	FROM	TO	MAXIMUM PSI ALLOWABLE
CASING	<u>U</u>	<u>125</u>	<u>4 1/2</u>		<u>4427</u>	
LINER						
TUBING						
OPEN HOLE				<u>4427</u>	<u>4431</u>	SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

JOB DATA

CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE <u>10-94</u>	DATE <u>1-6</u>	DATE <u>1-6</u>	DATE <u>1-7</u>
TIME <u>1200</u>	TIME <u>2000</u>	TIME <u>2225</u>	TIME <u>2415</u>

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
FLOAT COLLAR <u>4 1/2</u>	<u>1</u>	<u>B.K.C.</u>
FLOAT SHOE		
GUIDE SHOE		
CENTRALIZERS <u>5-4 1/2</u>	<u>5</u>	<u>H...</u>
BOTTOM PLUG		
TOP PLUG <u>1.113 4 1/2</u>	<u>1</u>	<u>H...</u>
HEAD		
PACKER <u>1.113 4 1/2</u>	<u>1</u>	<u>H...</u>
OTHER		

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
<u>A. Gabel</u>	<u>41285</u>	<u>1123 1/2</u>
<u>A. K. ...</u>	<u>3472</u>	<u>1123 1/2</u>
<u>J. ...</u>	<u>5123 26103</u>	<u>1123 1/2</u>

MATERIALS

TREAT. FLUID _____ DENSITY _____ LB/GAL. °API
 DISPL. FLUID _____ DENSITY _____ LB/GAL. °API
 PROP. TYPE _____ SIZE _____ LB.
 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. _____
 PERFPAC BALLS TYPE _____ QTY. _____
 OTHER _____

ORIGINAL

DEPARTMENT _____
 DESCRIPTION OF JOB _____
 JOB DONE THRU: TUBING CASING ANNULUS TBG./ANN.
 CUSTOMER REPRESENTATIVE X Scott ...
 HALLIBURTON OPERATOR A. Gabel COPIES REQUESTED _____

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
<u>1</u>	<u>52</u>	<u>47-2</u>	<u>H...</u>	<u>2 1/2</u>		<u>1.34</u>	<u>15.4</u>
<u>1</u>	<u>125</u>	<u>KA-2</u>	<u>H...</u>	<u>B</u>	<u>59. Cal-seal 1# 2 salt 5# Cal-seal</u> <u>.75 1/4 H...</u>	<u>1.34</u>	<u>15.4</u>

PRESSURES IN PSI

SUMMARY

VOLUMES

CIRCULATING _____ DISPLACEMENT _____ PRESLUSH: BBL.-GAL. _____ TYPE _____
 BREAKDOWN _____ MAXIMUM _____ LOAD & BKDN: BBL.-GAL. _____ PAD: BBL.-GAL. _____
 AVERAGE _____ FRACTURE GRADIENT _____ TREATMENT: BBL.-GAL. _____ DISPL: BBL. 69.43
 SHUT-IN: INSTANT _____ 5-MIN. _____ 15-MIN. _____ CEMENT SLURRY: BBL.-GAL. 11.58
 HYDRAULIC HORSEPOWER _____ TOTAL VOLUME: BBL.-GAL. _____
 ORDERED _____ AVAILABLE _____ USED _____
 AVERAGE RATES IN BPM _____
 TREATING _____ DISPL. _____ OVERALL _____
 CEMENT LEFT IN PIPE _____
 FEET 31 REASON 2 1/2" shoe off

REMARKS

see ...
...

CUSTOMER
LEASE
WELL NO.
JOB TYPE
DATE

JOB LOG FORM 2013 R-3

CUSTOMER		WELL NO.		LEASE		JOB TYPE		TICKET NO.	
[Handwritten]		2-30		Mona		Long string		663295	
CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS	
				T	C	TUBING	CASING		
	18:00								called out
	18:10								was having trouble trying to run 2 1/2" pipe
	18:25								Start with 174 lbs used 4" 10.5" pipe
									From Prestite in bottom, cant in well
									12344 + 87 cement Basket in # 5" & 6"
									Port call down 88 sig 11, 7418 in
									sig a hole back to casing
									at 18:00
									having trouble getting sig hole
	18:45								called out
	18:55								Decided to pull egg spread out
									egg spread to where it had by 18:00
									18:00
	19:15								Down string 1 1/2" pipe
	19:30								back to top
			2						Start 2 1/2" pipe
			8						Start 2 1/2" pipe
									13:00
									Back to 1 1/2" pipe
									Back to 1 1/2" pipe
	19:57								Back to 1 1/2" pipe
									Back to 1 1/2" pipe
									Back to 1 1/2" pipe
									Back to 1 1/2" pipe
	20:08								Back to 1 1/2" pipe
									Back to 1 1/2" pipe
	20:56								Back to 1 1/2" pipe
									Back to 1 1/2" pipe
	21:02								Back to 1 1/2" pipe
	21:12		70						Back to 1 1/2" pipe
	21:14								Back to 1 1/2" pipe
	21:15								Back to 1 1/2" pipe

ORIGINAL

Thank You!
 [Signature]