

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

API NO. 15- 077-21,322-00-00 ORIGINAL
County HARPER
Approx. 30'N 45'W
SE SE NE Sec. 10 Twp. 33 Rge. 6 E
3300 Feet from N (circle one) Line of Section
325 Feet from W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)

Operator: License 8061
Name: OIL PRODUCERS, INC. OF KANSAS
Address P.O. BOX 8647
City/State/Zip WICHITA, KANSAS 67208

Lease Name CAROTHERS C Well # 1 A
Field Name
Producing Formation NA
Elevation: Ground 1297 KB 1308

Purchaser: NA
Operator Contact Person: DIANA RICHECKY
Phone (316) 681-0231

Total Depth 4551' PBDT NA
Amount of Surface Pipe Set and Cemented at 255
Multiple Stage Cementing Collar Used? Yes X No

Contractor: Name: DUKE DRILLING CO., INC.
License: 5929

If yes, show depth set Feet
If Alternate II completion, cement circulated from
feet depth to w/ sx cmt.

Wellsite Geologist: WILLIAM SHEPHERD
Designate Type of Completion
X New Well Re-Entry Workover
Oil SWD SIOW Temp. Abd.
Gas ENHR SIGW
X Dry Other (Core, WSW, Expl., Cathodic, etc)

Drilling Fluid Management Plan D&A 8/8 8-20-97
(Data must be collected from the Reserve Pit)

If Workover:
Operator:
Well Name:
Comp. Date Old Total Depth
Deepening Re-perf. Conv. to Inj/SWD
Plug Back PBDT
Commingle Docket No.
Dual Completion Docket No.
Other (SWD or Inj?) Docket No.
03/22/97 03/29/97 NA
Signed Date Date Reached TD Completion Date

Chloride content 9720 ppm Fluid volume 130 bbls
Dewatering method used: HAUL Reserve to SWD and restore when dry
Location of fluid disposal if hauled offsite:
Operator Name PINTAIL PETROLEUM
Lease Name BARKER SWD License No. 5086
SW Quarter Sec. 28 Twp. 27 S Rng. 11 E/W
County PRATT Docket No. D-24,238

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado 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 John S. Weir John S. Weir
Title President Date 7/19/97
Subscribed and sworn to before me this 19th of July 1997.
Notary Public Diana L. Richecky
Date Commission Expires June 12, 2000

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
Distribution
KCC SWD/Rep NGPA
KGS Plug Other (Specify)

Form ACO-1 (7-91)

DIANA L. RICHECKY
Notary Public - State of Kansas
My Appt. Expires 1/12/2000

07-21-1997

RECEIVED
KANSAS CORP COM
1997 JUL 21 P 1:58

SIDE TWO

Operator Name Oil Producers, Inc. of Kansas Lease Name CAROTHERS C Well # 1 A
 Sec. 10 Twp. 33S Rge. 6 East County HAREPER 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 (Attach Additional Sheets.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datums	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	HEEBNER	3145'	-1837
Electric Log Run	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	IATAN	3502'	-2194
(Submit Copy)		KANSAS CITY	3760'	-2452
List All E.Logs Run: GEOLOGICAL LOG, SONIC LOG, DUAL INDUCTION LOG, COMPENSATED DENSITY NEUTRON LOG		MISS	4388	-3080
		LTD	4551'	-3243

ORIGINAL

CASING RECORD <input type="checkbox"/> New <input checked="" 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		8 5/8"	20#	255	60 40 POZ	175	2% GEL 3% CC
PRODUCTION		4 1/2"	10.5 #	4549	EA-2	100	
					60 40 POZ	35	

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	Acid, Fracture, Shot, Cement Squeeze Record		
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)	Depth	
	SEE ATTACHED INITIAL COMPLETION REPORT			
1	4394' - 4400'			
2	4413' - 4415' + 4420' - 4422' + 4428' - 4430'			
1	4434' - 4439'			
TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumed Production, SWD or Inj.	Producing Method	Flowing	Pumping	Gas Lift	Other (Explain)	Gravity
Plugged as non-commercial		Bbls.	Bbls.	Gas-Oil Ratio		
Estimated Production	Oil <u>N/A</u> Bbls.	Gas <u>N/A</u> Mcf	Water <u>N/A</u>			

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

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled

(If vented, submit ACO-18.) Other (Specify) _____

RECEIVED
KANSAS CORP OCT 11
1977 OCT 21 1:58



REMIT TO:
P.O. BOX 951046
DALLAS, TX 75395-1046
Corporate FIN 73-0271280

INVOICE

HALLIBURTON ENERGY SERVICES

A Division of Halliburton Company

INVOICE NO.	DATE
219045	03/30/1997

WELL/LEASE NO./PHONE	WELL/PROJECT/LOCATION	STATE	OWNER		
SMOTHERS 1-A	HARPER	KS	SABE		
SERVICE/LOCATION	CONTRACTOR	JOB/PURPOSE	PICKET DATE		
PRATT	DUKE DRILLING	SHOWN BELOW	03/30/1997		
ACCT. NO.	CUSTOMER AGENT	VENDOR NO.	CUSTOMER P.O. NUMBER	SHIPPED VIA	FILE NO.
46989	BRAD SIROKY			COMPANY TRUCK	22335

ORIGINAL

DIRECT CORRESPONDENCE TO:
1102 E. 8TH
HAYS KS 67601
913-625-3431

OIL PRODUCERS INC. OF KANSAS
C/O MR. BRAD SIROKY
10264 COUNTRY CLUB ROAD
PRATT, KS 67124-8195

REFERENCE NO.	DESCRIPTION	QUANTITY	UOM	UNIT PRICE	AMOUNT
000-117	MILEAGE CEMENTING ROUND TRIP	146 MI		2.99	436.54
001-016	CEMENTING CASING	4549 FT		1.820-00	8270.00
593	3-WIPER L.D. PLUG - 4 1/2"	1 EA		159.00	159.00
801.0373	4 1/2" LATCH DOWN BAFFLE	1 EA		100.00	100.00
314-163	CLAYFIX II	2 GAL		28.00	56.00
018-317	SUPER FLUSH	17 SK		100.00	1,700.00
26	INSERT VALVE F. S. - 4 1/2"	1 EA		285.00	285.00
847-6316	PILLUP ASSY - 1.125 JD - 4-1/2	1 EA		47.00	47.00
815-19036	CENTRALIZER 4-1/2 X 7-7/8	4 EA		50.00	200.00
006-00004	CEMENT - STANDARD	100 SK		10.83	1,083.00
508-127	CAL SEAL CO	5 SK		25.90	129.50
508-291	GILSONITE BULK	500 LB		.40	200.00
509-968	SALT	900 LB		.15	135.00
507-775	HALAD-322	71 LB		7.00	497.00
507-918	GASSTOP	24 LB		33.55	805.20
504-130	CEMENT - 50/50 POZHIX STANDARD	35 SK		7.69	269.15
500-207	BULK SERVICE CHARGE	165 CFT		1.35	222.75
500-306	MILEAGE CHRG NAT DEL OR RETURN	521.91 TMI		1.05	548.01
JOB PURPOSE-SUBTOTAL					8,193.15

***** 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 agrees to pay attorney fees of 20% of the unpaid account, plus all collection and court costs.

CUSTOMER COPY



REMIT TO:
P.O. BOX 901046
DALLAS, TX 75395-1046
Corporate FIN 73-0271280

INVOICE

HALLIBURTON ENERGY SERVICES
A Division of Halliburton Company

INVOICE NO	DATE
219045	03/30/1997

WELL LEASE NO/PROJECT	WELL PROJECT LOCATION	STATE	OWNER		
BROTHERS 1-A	HARPER	KS	SAHE		
SERVICE LOCATION	CONTRACT#	JOB PURPOSE	TICKET DATE		
PRATT	DUKE DRILLING	SHOWN BELOW	03/30/1997		
ACCT NO	CUSTOMER/AGENT	VENDOR NO	CUSTOMER PO NUMBER	SHIPPED VIA	FILE NO
445989	BRAD STORVY			COMPANY TRUCK	22335

ORIGINAL

DIRECT CORRESPONDENCE TO:

OIL PRODUCERS INC OF KANSAS
C/O MR BRAD STORVY
10264 COUNTRY CLUB ROAD
PRATT, KS 67124-8195

1102 E. 8TH
HAYS, KS 67601
913-625-3431

REFERENCE NO	DESCRIPTION	QUANTITY	UM	UNIT PRICE	AMOUNT
	INVOICE SUBTOTAL				8,193.15
	DISCOUNT - (BID)				2,294.07
	INVOICE BID AMOUNT				5,899.08
	* KANSAS STATE SALES TAX				160.38
	* PRATT COUNTY SALES TAX				32.73
	INVOICE TOTAL				6,092.19

Handwritten notes:
11/1/00
12/1/00
11/1/00

Vertical stamp:
RECEIVED



HALLIBURTON ENERGY SERVICES

HAL-1906-P

CHARGE TO: **Oil Producer of KS Inc**
 ADDRESS:
 CITY, STATE, ZIP CODE:

CUSTOMER COPY

TICKET

No.

219045 - 2

PAGE 1 OF 2

1. SERVICE LOCATIONS Pratt KS	WELL/PROJECT NO. 1-A	LEASE Carother's 'A'	COUNTY/PARISH Harper	STATE KS	CITY/OFFSHORE LOCATION	DATE 3-30-97	OWNER Same
2. TICKET TYPE <input checked="" type="checkbox"/> SERVICE	NITROGEN JOB? <input type="checkbox"/> YES	CONTRACTOR Duke Drlg	RIG NAME/NO #5	SHIPPED Howe	DELIVERED TO Loc	ORDER NO.	
3. <input type="checkbox"/> SALES	<input type="checkbox"/> NO	WELL CATEGORY 02	JOB PURPOSE 035	WELL PERMIT NO.	WELL LOCATION Land		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS API# 15077213200000						

PRICE REFERENCE	SECONDARY REFERENCE / PART NUMBER	ACCOUNTING	DESCRIPTION	QTY.	U/M	QTY.	U/M	UNIT PRICE	AMOUNT	
000.117			MILEAGE 53387 # RD TP	146	mi			2.99	436.54	
001.016			Pump Charge 1 Trk	4549	ft	6	hrs	1820	1820	
593	801.0373	ORIGINAL	Latch Down Plug	1	eg	4 1/2		159	159	
594	801.03734		Latch Down Baffle	1	eg	"		100	100	
314.163			ClayFix II	2	gal			28	56	
018.307			Super Flush	500	gal	12	eg	100	1200	
26	847.6316		Insert Float Shoe 8nd	1	eg	4 1/2		285	285	
27	815.1919		Fill up Assy	1	eg			47	47	
40	806.60004		Centralizer's S-4	4	eg			50	200	
				Bulk TK+ # B-212760						3889

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. MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS X <i>[Signature]</i> DATE SIGNED: 3-29-97 TIME SIGNED: 2200 <input type="checkbox"/> A.M. <input type="checkbox"/> P.M. <input type="checkbox"/> do <input type="checkbox"/> do not require IPC (Instrument Protection). <input type="checkbox"/> 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 8192
	TYPE LOCK	DEPTH	OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?					FROM CONTINUATION PAGE(S)
	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			SUB-TOTAL APPLICABLE TAXES WILL BE ADDED ON INVOICE 8193	
		<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND						

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) Brad Siroky	CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE) X <i>[Signature]</i>	HALLIBURTON OPERATOR/ENGINEER David L Scott	EMP # B9475	HALLIBURTON APPROVAL DL Scott
---	--	---	-----------------------	---



JOB SUMMARY 4239-1

TICKET # 219045	TICKET DATE 3-30-97
BDA / STATE KS	COUNTY Harper
PSL DEPARTMENT Stim	CUSTOMER REP / PHONE Brad Sroky
API / UWI # 1507721320000	JOB PURPOSE CODE 035

REGION North America	NWA/COUNTRY Mid Cont
MBU ID / EMP # PRO503 B9475	EMPLOYEE NAME David Scott
LOCATION Pratt KS	COMPANY Oil Producer's of KS Inc
TICKET AMOUNT 8192.65	WELL TYPE 02
WELL LOCATION Anthony KS	DEPARTMENT Cm+
LEASE / WELL # Carothers "A" 1-A	SEC / TWP / RNG 10 33 6

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
D Scott B9475 3			
TJ Claypool H5236 3			
C Dutoit 86660 6			
D Paradise 66174 2			

ORIGINAL

HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES
40042	146	40083	146				
53387	146						
4192	146						
3621	146						

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

DATE	CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
3-29	1900	3-29	3-30	3-30
		2200	2400	0130

TYPE AND SIZE	QTY	MAKE
Float Collar		
Float Shoe w/Fill	1	Howco
Guide Shoe		
Centralizers 5-4	4	"
Bottom Plug		
Top Plug Latch Down	1	"
Head & manifold	1	"
Packer		
Other Baffle	1	"

WELL DATA						
	NEW/USED	WEIGHT	SIZE	FROM	TO	MAX ALLOW
Casing	4	10.5	4 1/2	KB	4550	
Liner						
Liner						
Tbg/D.P.						
Tbg/D.P.						
Open Hole			11 1/8	4549	50	SHOTS/FT.
Perforations						
Perforations						
Perforations						

MATERIALS		
Treat Fluid _____	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 500 gals Super Flush		
Other _____		
Other _____		

HOURS ON LOCATION		OPERATING HOURS		DESCRIPTION OF JOB
DATE	HOURS	DATE	HOURS	
3-29	3	3-29	1 1/2	035
TOTAL		TOTAL		

HYDRAULIC HORSEPOWER	
ORDERED	Avail. _____ Used _____
TREATED	AVERAGE RATES IN BPM Disp. _____ Overall _____
FEET 14.12	CEMENT LEFT IN PIPE Reason Baffle

STAGE	SACKS	CEMENT	BULK/SKS	ADDITIVES	YIELD	LBS/GAL
1	35	50-50	Poz	2% Gel	1.29	13.9
2	50	EA-2	Standard	5% Gal Seal 18% Salt 17.5% Holo-d-322 5#61	1.43	15.2
3	50	EA-2	Standard	Same as Above w/ 5% Gas stop	1.43	15.2

Circulating _____ Displacement _____
 Breakdown _____ Maximum _____
 Average _____ Frac Gradient _____
 Shut In: Instant _____ 5 Min _____ 15 Min _____

Preflush: Gal - ~~BB~~ 20+12 Type Clay Fix S.F.
 Load & Bkdn: Gal - BBI _____ Pad: BBI - Gal _____
 Treatment Gal - BBI _____ Disp: ~~BB~~ - Gal 72.1
 Cement Slurr Gal - ~~BB~~ 31.1
 Total Volume Gal - BBI _____

CUSTOMER COPY



REMIT TO:
P.O. BOX 951046
DALLAS, TX 75395-1046
Corporate FIN 73-0271280

INVOICE

HALLIBURTON ENERGY SERVICES, INC.

INVOICE NO. 219140 DATE 04/30/1997

WELL/LEASE NO./PROJECT		WELL/PROJECT/LOCATION		STATE	OWNER
BROTHERS "C" 1 A		HARTER		KS	SAME
SERVICE/LOCATION		CONTRACTOR		JOB PURPOSE	
RATT		IOWA WELL SERVICE		SHOWN BELOW	
ACCT. NO.	CUSTOMER AGENT	VENDOR NO.	CUSTOMER P.O. NUMBER	SHIPPED VIA	FUEL
46989	CHARLES KREUTZER			COMPANY TRUCK	23795

ORIGINAL

DIRECT CORRESPONDENCE TO:

OIL PRODUCERS INC. OF KANSAS
C/O MR. BRAD SIROKY
10264 COUNTRY CLUB ROAD
PRATT, KS 62124-8195

1102 E. 8TH
HAYS KS 67601
913-625-3431

REFERENCE NO.	DESCRIPTION	QUANTITY	UM	UNIT PRICE	AMOUNT
PRICING AREA - MID CONTINENT					
JOB PURPOSE - SQUEEZE PERFORATIONS					
000-117	MILEAGE CEMENTING ROUND TRIP	150 MI		3.20	480.00
		1 UNT			
000-119	MILEAGE FOR CREW	150 MI		1.95	292.50
		1 UNT			
009-019	PLUGGING BK SPOT CEMENT OR MUD	4425 FT		2,019.00	2,019.00
		1 UNT			
018-403	FLO-CHER 21, BULK, PER GALLON	1500 GAL		2.00	3,000.00
94	EZ DRILL SV SQZ PRN 4 1/2-5"	1 EA		1,015.00	1,015.00
802-339					
128-401	STAR GUIDE ASSEMBLY		RD	115.00	115.00
			8 HR	PER 8 HR	
			1 EA		
116-434	ENVIRONMENTAL CHARGE		1 EA	13.75	13.75
504-308	CEMENT - STANDARD	25 SK		10.83	270.75
503-406	ANHYDROUS CALCIUM CHLORIDE	RD	1 SK	23.45	23.45
504-211	CEMENT MICRO MATRIX SACK	25 SK		81.00	2,025.00
507-775	HALAD-322	13 LD		7.70	100.10
507-970	D-AIR 1, POWDER	6 LD		3.65	21.90
500-207	BULK SERVICE CHARGE	51 CPT		1.55	79.05
500-306	MILEAGE CHTC MAT DEL OR RETURN	131.688 TMI		1.18	155.39
JOB PURPOSE SUBTOTAL					9,610.89
INVOICE SUBTOTAL					9,610.89
DISCOUNT-(BID)					3,071.06
INVOICE BID AMOUNT					6,539.83

CAUTIONED
015-T-JOB

***** 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 agrees to pay attorney fees of 20% of the unpaid account, plus all collection and court costs.

CUSTOMER COPY



REMIT TO:
P.O. BOX 951046
DALLAS, TX 75395-1046
Corporate FIN 73-0271280

INVOICE

HALLIBURTON ENERGY SERVICES, INC.

INVOICE NO	DATE
219140	04/30/1997

WELL/LEASE NO./PROJECT	WELL/PROJECT LOCATION	STATE	CUSTOMER
ROTHERS "C" 1 A	HARPER	KS	SAHE
SERVICE LOCATION	CONTRACTOR	JOB PURPOSE	TICKET
PRATT	KIOWA WELL SERVICE	SHOWN BELOW	04/30/1997
ACCT. NO.	CUSTOMER AGENT	VENDOR NO.	CUSTOMER P.O. NUMBER
46989	CHARLES KREUTZER		
		SHIPPED VIA	PLATE
		COMPANY TRUCK	23795

ORIGINAL

DIRECT CORRESPONDENCE TO:

OIL PRODUCERS INC. OF KANSAS
C/O MR. BRAD SIROKY
10264 COUNTRY CLUB ROAD
PRATT, KS 67124-8195

1102 E. 8TH
HAYS KS 67601
913-625-3431

REFERENCE NO.	DESCRIPTION	QUANTITY	UM	UNIT PRICE	AMOUNT
	*-KANSAS STATE SALES TAX				122.97
	*-PRATT COUNTY SALES TAX				25.10
INVOICE TOTAL - PLEASE PAY THIS AMOUNT					148.07
					66,687.90

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.



HALLIBURTON

HALLIBURTON ENERGY SERVICES

HAL-1908-P

CHARGE TO: **Oil Producers of Kansas Inc.**
 ADDRESS:
 CITY, STATE, ZIP CODE:

CUSTOMER COPY

TICKET

No.

219140-9

1. SERVICE LOCATIONS: **Fraat Ks.** WELL/PROJECT NO.: **1A** LEASE: **Carothers C** COUNTY/PARISH: **Harper** STATE: **Ks.** CITY/OFFSHORE LOCATION: DATE: **4-30-97** OWNER: **Same**

2. TICKET TYPE: SERVICE SALES NITROGEN JOB? YES NO CONTRACTOR: **Kiowa Well Svc.** RIG NAME/NO.: **#1** SHIPPED: **Howro** DELIVERED TO: **Location** ORDER NO.:

3. WELL TYPE: **02** WELL CATEGORY: **01** JOB PURPOSE: **075** WELL PERMIT NO.:

4. REFERRAL LOCATION: INVOICE INSTRUCTIONS:

PRICE REFERENCE	SECONDARY REFERENCE PART NUMBER	ACCOUNTING LOC ACCT DF	DESCRIPTION	QTY.	U/M	QTY.	U/M	UNIT PRICE	AMOUNT
000-117		1	MILEAGE K# 53387 rnd t/p	150	mi			3.20	480 -
000-119		1	CREW m. lease 40042 rnd t/p	150	mi			1.95	292.50
004-019		1	Pump Charge 1 Trk	4425	ft	6	hrs	20.19	20.19 -
018-403		1	Floche K-21	1500	gal			2.00	3000 -
94	802.339	1	EZ Drill Squeeze PKR	1	sq	4	1/2	10.15	10.15 -
128-401		1	Star Guide Assy	1	sq	8	hrs	11.50	11.50 -
116-434		1	Environmental Cleanup		per/Job			13.75	13.75 -
		1	Bulk Tkt # B-338033						2675.60

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.

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

DATE SIGNED: **4-30-97** TIME SIGNED: **1400**

SUB SURFACE SAFETY VALVE WAS: PULLED & RETURN PULLED RUN

TYPE LOCK: DEPTH: **SURVEY** AGY

BEAN SIZE: SPACERS: **AGREE** UN-DECIDED DIS-AGREE

TYPE OF EQUALIZING SUB.: CASING PRESSURE

TUBING SIZE: TUBING PRESSURE: WELL DEPTH:

TREE CONNECTION: TYPE VALVE:

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

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): **Charles Kreech** CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE): **CK** HALLIBURTON OPERATOR/ENGINEER: **David L Scott** EMP #: **B9475** HALLIBURTON APPROVAL: **D.L. Scott**

PAGE 2 OF 2

AMOUNT

960.80

FROM CONTINUATION PAGE(S)

SUB-TOTAL

APPLICABLE TAXES WILL BE ADDED ON INVOICE

JOB LOG 4239-5

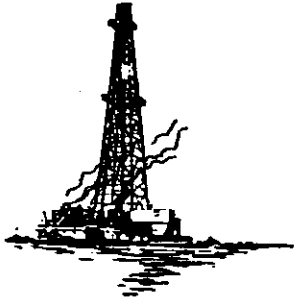
TICKET #	219140	TICKET DATE	
REGION	North America	BDA / STATE	Kansas
NWA/COUNTRY	Mexico	COUNTY	Harvey
MBU ID / EMP #	PROSOS BMR	PSL DEPARTMENT	
EMPLOYEE NAME		CUSTOMER REP / PHONE	
LOCATION		WELL TYPE	03
COMPANY		API / UWI #	
TICKET AMOUNT		DEPARTMENT	Cmt
WELL LOCATION		JOB PURPOSE CODE	075
LEASE / WELL #	LA	SEC / TWP / RNG	10 33E 6W

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
D. Smith 29712							

ORIGINAL

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL)(GAL)	PUMPS		PRESS. (psf)		JOB DESCRIPTION / REMARKS
				T	C	Tbg	Csg	
	0500							Called Out
	0800							On Log w/Trks
	0810							Set Retainer @ 4425' wireline
								T.I.H. w/Stinger + Star Guide
	1115							String Into Retainer
	1118	2 1/2	20	✓		200		Take Trj Rate
								Water Trk pumping on Annulas
	1130	2	7	✓		200		Fresh H2O Spacer
	1133	2 1/2	36	✓		400		St Flochek-21
	1142	2 1/2	7	✓		400		Fresh H2O Spacer
	1200							Annulas Loaded (Continue pumping w/water Trk)
	1213	2	6.2	✓		300		Mix 25sk's micro matrix @ 11.5ppg
	1218	2	5.2	✓		300		Pump micro matrix Cmt
			11.4					mix + pump 25 sk's neat Cmt @ 15.6ppg 2%CC
	1223	2 1/2		✓		200		St Disp w/H2O
	1225	2	6	✓		300		6 Bbl's Disp Out Cmt @ Perfs
	1228	1 1/2	10	✓		500		16 Bbl's Out Decrease Rate
	1229	0	1	✓		600		17 Bbl's Disp Out
	1229			✓		200		String out Retainer + P14 1'
	1235	3	45	✓		400		Rev Out Trg Circ 1 Bbl Cmt
	1251							Shut Down Annulas on Small Vac
								T.I.H. w/Trg

Job Complete
Thank you
Scotty



Ricketts --- ***Testing***

DRILL STEM TEST REPORT

ORIGINAL

Ricketts Testing, Inc.

15-077-21322

Company OIL PRODUCERS, INC. OF KANSAS Lease & Well No. CAROTHERS C #1-A
Elevation 1308 K.B. Formation MISSISSIPPI Effective Pay _____ ft. Ticket No. 1852
Date 3-29-97 Sec. 10 Twp. 33S Range 6W County HARPER State KANSAS
Test Approved by BILL SHEPHERD Ricketts Representative JIM RICKETTS
Formation Test No. 1 Interval Tested from 4395 ft. to 4442 ft. Total Depth 4550 ft.
Packer Depth 4395 ft. Size 6 3/4 in. Packer Depth 4437 ft. Size 6 3/4 in.
Packer Depth 4442 ft. Size 6 3/4 in. Packer Depth 4446 ft. Size 6 3/4 in.
Depth of Selective Zone Set _____
Top Recorder Depth (Inside) 4400 ft. Recorder Number 13307 Cap. 4650
Bottom Recorder Depth (Outside) _____ ft. Recorder Number _____ Cap. _____
Below Straddle Recorder Depth 4547 ft. Recorder Number 13306 Cap. 4625
Drilling Contractor Duke Drilling Rig #5 Drill Collar Length 485 I.D. 2.25 in.
Mud Type Chemical Viscosity 44 Weight Pipe Length _____ I.D. _____ in.
Weight 9.4 Water Loss _____ cc. Drill Pipe Length 4375 I.D. 3.25 in.
Chlorides N/A P.P.M. Test Tool Length 20 ft. Tool Size 5 1/2 in.
Jars: Make _____ Serial Number _____ Anchor Length 57'w/109'tailpipe ft. Size 5 1/2 in.
Did Well Flow? No Reversed Out No Surface Choke Size 3/4 in. Bottom Choke Size 3/4 in.
Gravity Oil _____ Main Hole Size 7 7/8 in. Tool Joint Size 4 1/2 in.

Blow: Strong blow off bottom of 5 gallon bucket in 2 minutes Initial Flow Period.
Strong blow throughout Final Flow Period.

Recovered 10 ft. of Gas cut mud.
Recovered 60 ft. of Slightly gas & oil cut mud. 10% Oil
Recovered 2250 ft. of Gas in pipe.
Recovered _____ ft. of _____
Recovered _____ ft. of _____

Remarks: _____

Table with 4 columns: Time Set Packer (s), Time Started Off Bottom, Maximum Temperature, and Pressure (P.S.I.). Rows include Initial Hydrostatic Pressure, Initial Flow Period, Initial Closed In Period, Final Flow Period, Final Closed In Period, and Final Hydrostatic Pressure.

RICKETTS TESTING, INC.

Pressure Data

Date 3-29-97 Test Ticker No. 1852

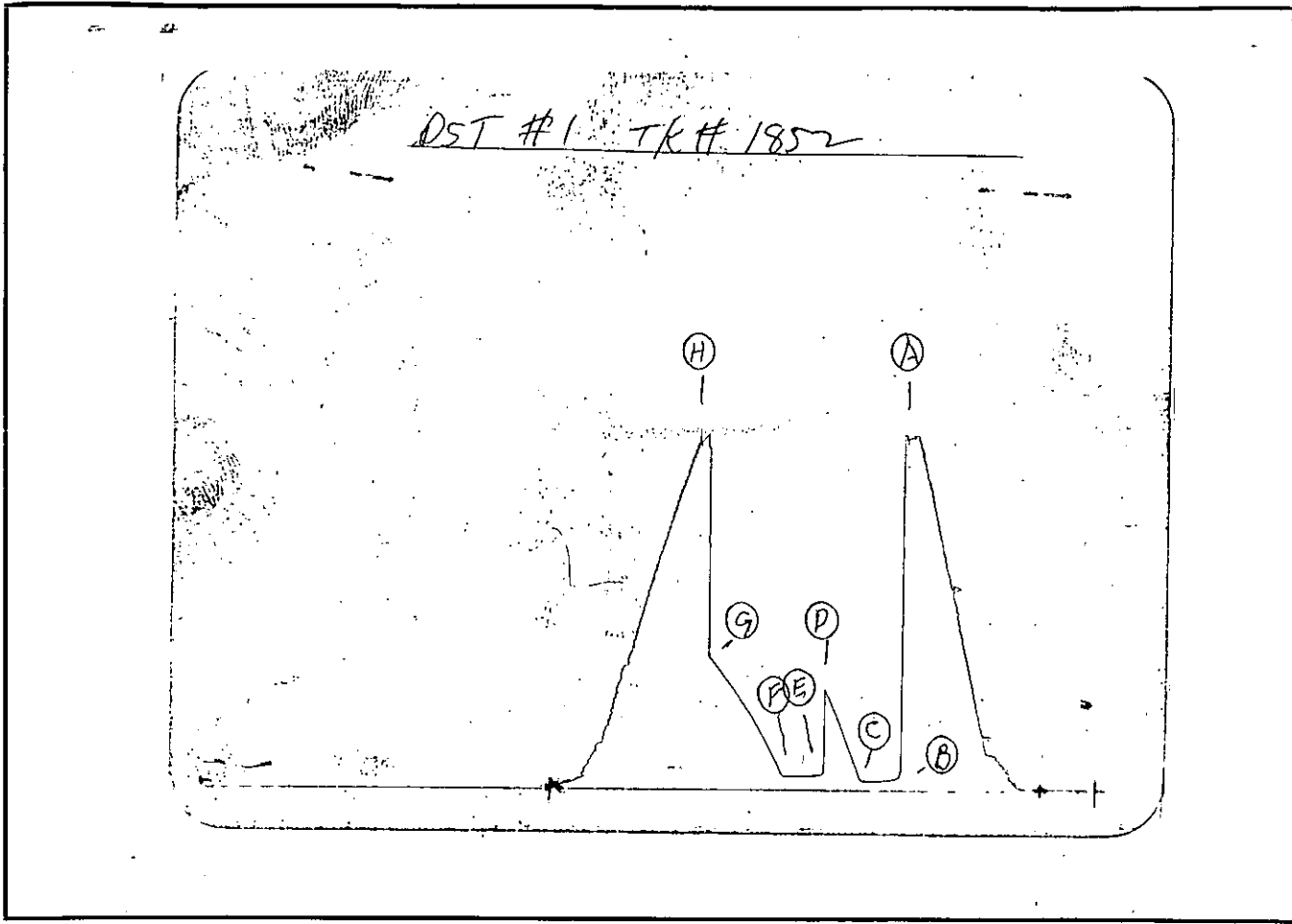
Recorder No. 13307 Capacity 4650 Location 4400 Ft.

Clock No. _____ Elevation 1308 K. B. Well Temperature 119 °F

Point	Pressure		Time Given	Time Computed
		P.S.I.		
A Initial Hydrostatic Mud	<u>2234</u>	P.S.I.	<u>8:02</u> A M	
B First Initial Flow Pressure	<u>58</u>	P.S.I.	<u>30</u> Mins.	<u>30</u> Mins.
C First Final Flow Pressure	<u>58</u>	P.S.I.	<u>30</u> Mins.	<u>30</u> Mins.
D Initial Closed-in Pressure	<u>624</u>	P.S.I.	<u>30</u> Mins.	<u>30</u> Mins.
E Second Initial Flow Pressure	<u>78</u>	P.S.I.	<u>60</u> Mins.	<u>60</u> Mins.
F Second Final Flow Pressure	<u>78</u>	P.S.I.		
G Final Closed-in Pressure	<u>847</u>	P.S.I.		
H Final Hydrostatic Mud	<u>2227</u>	P.S.I.		

PRESSURE BREAKDOWN

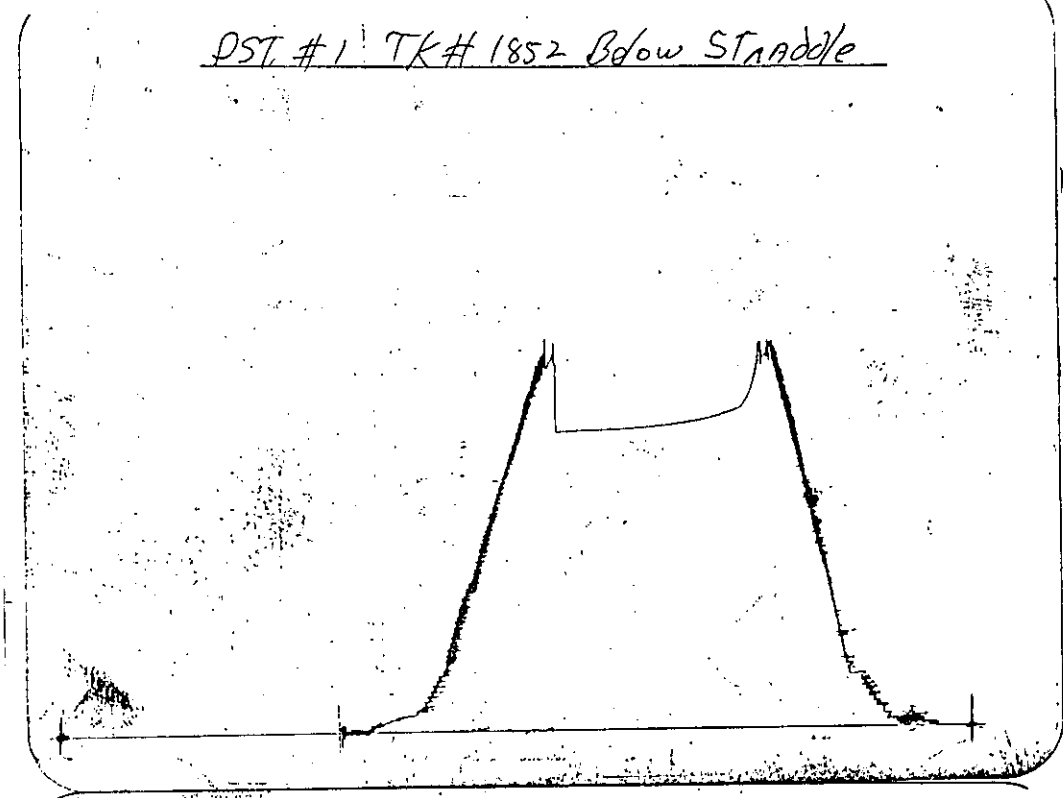
Point Mins.	First Flow Pressure		Initial Shut-In		Second Flow Pressure		Final Shut-In	
	Press.	Breakdown:	Point Minutes	Press.	Point Minutes	Press.	Point Minutes	Press.
P 1 0	58	<u>6</u> Inc. of <u>5</u> mins. and a final inc. of _____ Min.	0	58	0	78	0	78
P 2 5	58		3	82	5	78	3	111
P 3 10	58		6	148	10	78	6	160
P 4 15	58		9	213	15	78	9	210
P 5 20	58		12	273	20	78	12	259
P 6 25	58		15	336	25	78	15	303
P 7 30	58		18	396	30	78	18	354
P 8 35			21	457	35		21	394
P 9 40			24	517	40		24	436
P10 45			27	575	45		27	480
P11 50			30	624	50		30	512
P12 55			33		55		33	547
P13 60			36		60		36	584
P14 65			39		65		39	619
P15 70			42		70		42	652
P16 75			45		75		45	689
P17 80			48		80		48	719
P18 85			51		85		51	760
P19 90			54		90		54	789
P20 95			57				57	826
			60				60	847



This is an actual photograph of recorder chart.

POINT	PRESSURE		PSI
	Field Reading	Office Reading	
(A) Initial Hydrostatic Mud	2215	2234	PSI
(B) First Initial Flow Pressure	58	58	PSI
(C) First Final Flow Pressure	58	58	PSI
(D) Initial Closed-in Pressure	615	624	PSI
(E) Second Initial Flow Pressure	69	78	PSI
(F) Second Final Flow Pressure	69	78	PSI
(G) Final Closed-in Pressure	847	847	PSI
(H) Final Hydrostatic Mud	2204	2227	PSI

DST. #1 TK# 1852 Below Staddle



OPERATION COMMISSION
1000 Derby Building
Kansas 67202

WELL PLUGGING RECORD
K.A.R.-82-3-117

API NUMBER 15-077-21,3220

LEASE NAME Corothers C

WELL NUMBER 1

2970 Ft. from S Section Line

330 Ft. from E Section Line

SEC. 10 TWP. 33 SRGE. 6 (E) or (W)

COUNTY Harper

Date Well Completed 05-01-97

Plugging Commenced 05-15-97

Plugging Completed 05-16-97

TYPE OR PRINT
NOTICE: Fill out completely
and return to Cons. Div.
office within 30 days.

LEASE OPERATOR Oil Producers, Inc. of Kansas

ADDRESS P.O. Box 8647, Wichita, Kansas 67208-8647

PHONE# (316) 672-6373 OPERATORS LICENSE NO. 8061

Character of Well oil

(Oil, Gas, O&A, SWD, Input, Water Supply Well)

The plugging proposal was approved on 05-16-97 (date)

by Steve VanGieson (KCC District Agent's Name).

Is ACO-1 filed? yes if not, is well log attached? _____

Producing Formation _____ Depth to Top 4394 Bottom 4420 T.O. 4550

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS | CASING RECORD

Formation	Content	From	To	Size	Put In	Pulled out
Surface				8 5/8"	255	0
Production				4 1/2"	4549	3874'

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plug were used, state the character of same and depth placed, from feet to feet each set
Bottom plug; sanded off to 4340' 4 sks of cement. Allied mixed cement. @ 948' w/355 sks 60/40 4% gel, 623' w/35 sks, @ 300' w/130 sks, Cemented with a total of 200 sks. Maximum pressure 200 lbs. Shut in pressure 100 lbs.

Name of Plugging Contractor D.S.& W. Well Servicing, Inc. License No. 6901

Address P.O. Box 231, Claflin, Kansas 67525

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Oil Producers, Inc. of Kansas

STATE OF Kansas COUNTY OF Barton, ss.

Joseph J. Strube (Employee of Operator) or (Operator) of above-described well, being first duly sworn on oath, says: That I have knowledge of the facts statements, and matters herein contained and the log of the above-described well as filed the the same are true and correct, so help me God.

(Signature) Joseph J. Strube

(Address) P.O. Box 231, Claflin, Kansas 67525

SUBSCRIBED AND SWORN TO before me this 22 day of May, 1997

Bonnie L. Connell
Notary Public

My Commission Expires: 04-08-2001
USE ONLY ONE SIDE OF EACH FORM.

