

AMENDED **

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

Operator: License # 5447

Name: OXY USA Inc.

Address P. O. Box 26100

City/State/Zip Oklahoma City, Ok 73126-0100

Purchaser: * KP & L

Operator Contact Person: Jerry Ledlow

Phone (405) 749-2309

Contractor: Name: Brandt Drilling Co

License: 3840

Wellsite Geologist: Harold Trapp

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:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PBTD
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

2/28/95 3/11/95 * 6/21/95
Spud Date Date Reached TD Completion Date

API NO. 007-22472-0000 ORIGINAL

County Barber

- NE - NE - NE Sec. 3 Twp. 34S Rge. 14 X W

405 Feet from X (circle one) Line of Section

330 Feet from X (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
XX, XX, XX or XX (circle one)

Lease Name Wheat A Well # 1

Field Name Aetna

Producing Formation Mississippian

Elevation: Ground 1683 KB 1696

Total Depth 5296 PBTD 5140

Amount of Surface Pipe Set and Cemented at 1041 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan ALT 1 9/1 4-9-96
(Data must be collected from the Reserve Pit)

Chloride content 1250 ppm Fluid Volume 650 bbls

Dewatering method used Evaporation

Location of fluid disposal if hauled off site SEP 1 1995

Operator Name CONSERVATION DIVISION

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, 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.

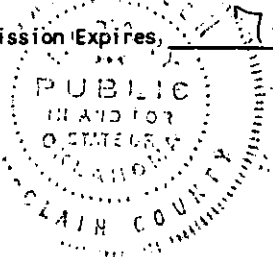
Signature [Signature]

Title Staff Analyst Date 8/30/95

Subscribed and sworn to before me this 30th day of August, 1995.

Notary Public Care Allen

Date Commission Expires 7-14-99



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

SIDE TWO

Operator Name OXY USA Inc. Lease Name Wheat A Well # 1
 Sec. 3 Twp. 34S Rge. 14 East West
 County Barber

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datums	<input checked="" type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Howard	3312	- 1616
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Topeka	3428	- 1732
List All E.Logs Run:		Heebner	3960	- 2264
High Resolution Induction DFL Log		Lansing	4150	- 2454
Spectral Density Dual Spaced Neutron II		Hertha	4566	- 2878
		Miss	4722	- 3026
		Kinderhook	4970	- 3274
		Chattanooga	4993	- 3297
		Viola	5038	- 3342
		Simpson Shale	5172	- 3476
		Simpson Sand	5204	- 3508

CASING RECORD <input checked="" type="checkbox"/> New <input 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	12 1/4"	8 5/8"	24	1041	See * 1 below		
Production	7 7/8"	5 1/2"	14	5295	See * 2 below		
*1-200sks Class A w/3%cc, had no circ, RIH w/1" to 210. Cmt down 1" w/200sks Halco Lite w/3%cc no circ							

ADDITIONAL CEMENTING/S

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				WOC 5hrs. Cmt w/200sks Halco Lite w/3%cc, no circ. WOC 5hrs. RIH to 210. Cmt w/50sks Thixotropic w/ 5% Cal-seal, 1/4 pps Flo-seal. No circ. WOC 3 hrs. RIH to 210. Cmt w/200sks Halco Lite w/3%cc 1/4 pps Flo-seal. No circ. Ran 1" to 190, Ran 2nd 1" to 170. Pmp 50sks Thixotropic w/50sks Class A down short string. WOC 4hrs. Pmp 25bbls mud/500# hulls down hole. RIH to 180. Pmp 50 sks Thixotropic cmt @ 2bpm WOC 2HRS. Pmp 150sks Class A w/3%cc. Cmt to surface. * 2-85sks 65/35 Class A poz w/6%gel, 1/4 pps Flocele & 225sks 50/50 Class H w/2% gel, 12% salt, .5 Halad-322, 1%cc & 1/4 pps Flocele.

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.	5208-5212	Acidize 12 bbls 15% NE-FE	5208-12
	CIBP @ 5155	Acidize w/2000 gal 7.5% FE	4716-4834
1	4716-70, 4808-34.	Frac w/75,450 70 quality foam & 128,000# 12/20 Brady sand	

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2 3/8	* 4867		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumed Production, SWD or Inj. * 6/21/95	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls.	Gas * 500 Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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Disposition of Gas: **METHOD OF COMPLETION** Production Interval 4716-4834

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
 (If vented, submit ACO-18.) Other (Specify) _____

ORIGINAL

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

API NO. 007-22472-0000

County Barber

NE - NE - NE Sec. 3 Twp. 34S Rge. 14 X W

405 Feet from X/N (circle one) Line of Section

330 Feet from E/X (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
XX, SE, XX or XX (circle one)

Lease Name Wheat A Well # 1

Field Name Aetna

Producing Formation Mississippian

Elevation: Ground 1683 KB 1696

Total Depth 5296 PBDT 5140

Amount of Surface Pipe Set and Cemented at 1041 Feet

Multiple Stage Cementing Collar Used? Yes X No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 210'
feet depth to Surface w/ 1460 SX sx cmt.

Drilling Fluid Management Plan ACT 1 DPW
(Data must be collected from the Reserve Pit) 5-17-95

Chloride content 1250 ppm Fluid volume 650 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 # 5447

Name: OXY USA Inc.

Address P. O. Box 26100

City/State/Zip Oklahoma City, Ok 73126-0100

Purchaser: _____

Operator Contact Person: Jerry Ledlow

Phone (405) 749-2309

Contractor: Name: Brandt Drilling Co

License: 3840

Wellsite Geologist: Harold Trapp

Designate Type of Completion
X New Well Re-Entry Workover

Oil SWD SLOW Temp. Abd.
X Gas ENHR SIGW
Dry Other (Core, WSW, Expl., Cathodic, etc)

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.

2/28/95 3/11/95 Pending
Spud Date Date Reached TD Completion Date

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 Jerry Ledlow

Title Staff Analyst Date 6/3/95

Subscribed and sworn to before me this 5th day of June, 1995

Notary Public TA Cara Allen

Date Commission Expires 7-14-95

K.C.C. OFFICE USE ONLY

F Letter of Confidentiality Attached

C Wireline Log Received

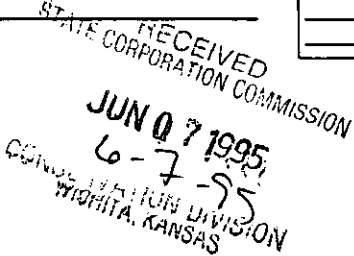
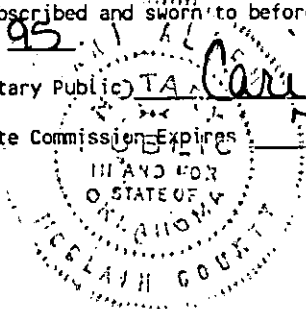
C Geologist Report Received

Distribution

KCC SWD/Rep NGPA

KGS Plug Other

(Specify)



Operator Name OXY USA Inc. Lease Name Wheat A Well # 1
 Sec. 3 Twp. 34S Rge. 14 East County Barber
 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:
 High Resolution Induction DFL Log
 Spectral Density Dual Spaced Neutron II

Name	Top	Datum	<input type="checkbox"/> Log	Formation (Top), Depth and Datums	<input checked="" type="checkbox"/> Sample
			Howard	3312	- 1616
Topeka	3428	- 1732			
Heebner	3960	- 2264			
Lansing	4150	- 2454			
Hertha	4566	- 2878			
Miss	4722	- 3026			
Kinderhook	4970	- 3274			
Chattanooga	4993	- 3297			
Viola	5038	- 3342			
Simpson Shale	5172	- 3476			
Simpson Sand	5204	- 3508			

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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
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*1-200sks Class A w/3%cc, had no circ, RIH w/1" to 210. Cmt down 1" w/200sks Halco Lite w/3%cc no circ							

ADDITIONAL CEMENTING/S					
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	WOC 5hrs. Cmt w/200sks Halco Lite w/3%cc, no circ. WOC 5hrs. RIH to 210. Cmt w/50sks Thixotropic w/ 5% Cal-seal, 1/4 pps Flo-seal. No circ. WOC 3 hrs. RIH to 210. Cmt w/200sks Halco Lite w/3%cc 1/4 pps Flo-seal. No circ. Ran 1" to 190, Ran 2nd 1" to 170. Pmp 50sks Thixotropic w/50sks Class A down short string. WOC 4hrs. Pmp 25bbls mud/500# hulls down hole. RIH to 180. Pmp 50 sks Thixotropic cmt @ 2bpm WOC 2HRS. Pmp 150sks Class A w/3%cc. Cmt to surface. * 2-85sks 65/35 Class A poz w/6%gel, 1/4 pps Flocele & 225sks 50/50 Class H w/2% gel, 12% salt, .5 Halad-322, 1%cc & 1/4 pps Flocele.				

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	5208-5212		Acidize 12 bbls 15% NE-FE
	CIBP @ 5155		Acidize w/2000 gal 7.5% FE	4716-4834
1	4716-70, 4808-34.		Frac w/75,450 70 quality foam &	
			128,000# 12/20 Brady sand	

TUBING RECORD	Size	Set At	Packer At	Liner Run				
	2 3/8	4653		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Date of First, Resumed Production, SWD or Inj. Waiting on Pipeline		Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift, <input checked="" type="checkbox"/> Other (Explain)						
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Water	Bbls.	Gas-Oil Ratio	Gravity

Disposition of Gas: **METHOD OF COMPLETION** Production Interval 4716-4834
 Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
 (If vented, submit ACO-18.) Other (Specify) _____



OXY USA INC.

Box 26100, Oklahoma City, OK 73126-0100
Telephone 405 749-2000

June 3, 1995

Kansas Corporation Commission
Wichita State Office Bldg.
130 S. Market, Room 2078
Wichita, Kansas 67202

RE: Well Completion Report
Wheat A #1
Sec.3-34S-14W
Barber County, Kansas

Gentlemen:

The following items are being submitted for the referenced well which is pending completion:

1. Form ACO-1, Well Completion;
2. A set of electric logs;
3. Cement ticket.

Please advise if additional information is required.

Sincerely yours,

Jerry Ledlow
Mid-Continent Region

Attachments

RECEIVED
STATE CORPORATION COMMISSION
JUN 07 1995
CONSERVATION DIVISION
WICHITA, KANSAS



HALLIBURTON ENERGY SERVICES

HAL-1906-N

CHARGE TO: **Oxy 037819**
 ADDRESS: **WICHITA**
 CITY, STATE, ZIP CODE: **15007224720000**

ORIGINAL

TICKET

No. **773890 - 7**

PAGE **1** OF **2**

SERVICE LOCATIONS: 1. **ENID-25335**

WELL/PROJECT NO.: **A-1** LEASE: **Wheat** COUNTY/PARISH: **Barber** STATE: **KS** CITY/OFFSHORE LOCATION: DATE: **3-2-95** OWNER: **Same**

TICKET TYPE: SERVICE SALES NITROGEN JOB? YES NO CONTRACTOR: RIG NAME/NO.: SHIPPED: **HES Location** DELIVERED TO: ORDER NO.:

WELL TYPE: **Oil** WELL CATEGORY: **Development** JOB PURPOSE: **Top Outside** WELL PERMIT NO.: **KPE 15-007-11472-0000** WELL LOCATION: **N.W. Hartley, Ks.**

REFERRAL LOCATION: **Hartley, Ks.** INVOICE INSTRUCTIONS: **Pumps to be put in Flow-Check 21 For Top Outside**

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOG	ACCT	DF							
600-117					MILEAGE	100		mi		2.75	275.00
011-205					Penny Charge	100		per 100-500 ft		860.00	860.00
156-099					Flow-Check 21	160		each		1.60	1056.00
019-200					1" Tubing Rental	170		ft		.45	76.50

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: **3-2-95** TIME SIGNED: **3:00 P.M.**

SUB SURFACE SAFETY VALVE WAS: PULLED & RETURN PULLED RUN

TYPE LOCK	DEPTH	SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL
BEAN SIZE	SPACERS		OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?			
TYPE OF EQUALIZING SUB.	CASING PRESSURE	WE UNDERSTOOD AND MET YOUR NEEDS?				FROM CONTINUATION PAGE(S) 3387 1/2
TUBING SIZE	TUBING PRESSURE	OUR SERVICE WAS PERFORMED WITHOUT DELAY?				
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 5763.24
		<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): **Timothy J. Voss** CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE): **X Timothy J. Voss**

HALLIBURTON OPERATOR/ENGINEER: **Robert Almsell** EMP # **30222** HALLIBURTON APPROVAL: **R-20**

WOS



JOB LOG HAL-2013-C

CUSTOMER Oxy WELL NO. A-1 LEASE Wheat JOB TYPE Top Outside TICKET NO. 773890

CHART NO. TIME RATE (BPM) VOLUME (BBL) (GAL) PUMPS T C PRESSURE (PSI) TUBING CASING DESCRIPTION OF OPERATION AND MATERIALS

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
								ON Location, Safety Meeting
1	1700	2	0	1				Pump 3% C.C. w/ 10 BBL H ₂ O
2		2	10-0	1				Pump 1 BBL H ₂ O
3		2	1	1				Shut Down
4			-	1				2nd Pumping Cont Thix-o-tropic
5		2	0	1				Pump Floz Chok 2 w/ Cont (15.7)
6		2	15.7-0	1				Pump 1 BBL Fresh H ₂ O
7	1800	2	1	1				Shut Down Pack Up

ORIGINAL

Thank you

Robert Allen Bell



JOB SUMMARY

HALLIBURTON DIVISION MINCON
 HALLIBURTON LOCATION ENID

BILLED ON TICKET NO. 77-190

FIELD N.W. Hawk SEC 3 TWP 24S RANG 14W COUNTY Pusher 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						
LINER						
TUBING	<u>W</u>		<u>1"</u>	<u>K15</u>	<u>200</u>	
OPEN HOLE						SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

TOOLS AND ACCESSORIES

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

JOB DATA
 CALLED OUT DATE 3-2-95 ON LOCATION DATE 3-2-95 JOB STARTED DATE 3-2-95 JOB COMPLETED DATE 3-2-95
 TIME 10:00 TIME 15:30 TIME 17:00 TIME 18:00

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
<u>R.A. RILRO</u>	<u>4000</u>	<u>ENID</u>
<u>M. LEWIS</u>	<u>5063 UF</u>	<u>ENID</u>
<u>H. LADIG</u>	<u>4713-5747</u>	<u>RT</u>

MATERIALS
 TREAT. FLUID DENSITY _____ LB/GAL. API _____
 DISPL. FLUID DENSITY _____ LB/GAL. API _____
 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 _____

DEPARTMENT CMT
 DESCRIPTION OF JOB Pump Flo - Well 2.1 - FOR
Top outside
 JOB DONE THRU: TUBING CASING ANNULUS TBG/ANN.
 CUSTOMER REPRESENTATIVE [Signature]
 HALLIBURTON OPERATOR [Signature] COPIES REQUESTED 1

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK BACKED	ADDITIONS	YIELD CU. FT./SK	MIXED LBS./GAL

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
 PRESFLUSH: BBL-GAL _____ TYPE _____
 LOAD & BKDN: BBL-GAL _____ PAD: BBL-GAL _____
 TREATMENT: BBL-GAL _____ DISPL: BBL-GAL _____
 CEMENT SLURRY: BBL-GAL _____
 TOTAL VOLUME: BBL-GAL _____

REMARKS
41-7419 Pratt
11-19-95

CUSTOMER: OK
 EAST: Wheat
 WELL NO: A-1
 JOB TYPE: 194242-10 WAT 5-2-70



HALLIBURTON ENERGY SERVICES

HAL-1906-N

CHARGE TO
OXY USA INC
 ADDRESS
PO Box 26100
 CITY, STATE, ZIP CODE
OKLAHOMA CITY, OK 73126-0100

BUNCAH COPY

TICKET

No. **741668 - 4**

PAGE **1** OF **2**

SERVICE LOCATIONS 125555	WELL/PROJECT NO. Pratt	LEASE 1	CONTRACTOR Wheat A Barber	COUNTY/PARISH Barber	STATE KS	CITY/OFFSHORE LOCATION	DATE 3-11-95	OWNER Same
2. ENID	TICKET TYPE <input checked="" type="checkbox"/> SERVICE	NITROGEN JOB? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	CONTRACTOR Brudt Drly	RIG NAME/NO.	SHIPPED VIA CT	DELIVERED TO Location	ORDER NO.	
3.	WELL TYPE GAS	WELL CATEGORY 02 Dev	JOB PURPOSE 01 L-String	WELL PERMIT NO. 035	WELL LOCATION 15-007-224720000	LAND		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS							

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
000-117		1			MILEAGE		100	mi		2.75	275.00
001-016		1			Pump Charge		6	hrs			1895.00
030-016		1			SW Plug		1	ea	5 1/2 in		60.00
019-241		1			Rotating Head		1	ea	5 1/2 in		185.00
018-315		1			Mud Flush		500	gal		.65	325.00
12A	825-205	1			Guide Shoe		1	ea	5 1/2 in		121.00
24A	815-19251	1			Insert Float Valve		1	ea	5 1/2 in		110.00
27	815-19313	1			Auto Fillup Tube		1	ea	5 1/2 in		55.00
40	806-60022	1			Centralizers	S-4	12	ea	5 1/2 in	60.00	720.00

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 *Donald [Signature]*

DATE SIGNED: **3-11-95** TIME SIGNED: **11:00**

A.M. P.M.

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

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

OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN? AGREE UN-DECIDED DIS-AGREE

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: **3746.00**

FROM CONTINUATION PAGE(S): **466549**

SUB-TOTAL APPLICABLE TAXES WILL BE ADDED ON INVOICE: **8411.49**

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) <i>Don Harmon</i>	CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE) X <i>Donald [Signature]</i>	HALLIBURTON OPERATOR/ENGINEER <i>Blane Byerly</i>	EMP # 85826	HALLIBURTON APPROVAL <i>BZ</i>
--	---	--	-----------------------	-----------------------------------

RECEIVED
 STATE CORPORATION COMMISSION
 JUN 9 4 1995



TICKET CONTINUATION

DUNCAN COPY

TICKET No. 741663

HALLIBURTON ENERGY SERVICES

FORM 1911 R-10

4453

CUSTOMER OXY USA Inc

WELL Wheat A-1

DATE 03-11-95

PAGE 2 OF 2

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	WELL				UNIT PRICE	AMOUNT
		LOC	ACCT	DF		QTY.	U/M	QTY.	U/M		
504118		2			Halli Light Prem	110sk				7.40	814.00
507210	890.50071	2			Flocele 1/4lb	281b				1.65	46.20
504131		2			50/50 Poz Mix Prem 2% Gel	225sk				6.96	1566.00
509968	516.00315	2			Salt 12%	12931b				1.15	193.95
509406	890.50812	2			Calcium Chloride 1%	2sk				36.75	73.50
507775	516.00144	2			Hadaad 322	941b				7.00	658.00
507210	890.50071	2			Flocele 1/4lb	561b				1.65	92.40
500200		N			SERVICE CHARGE						
500306		N			MILEAGE CHARGE						
					TOTAL WEIGHT						
					LOADED MILES						

ORIGINAL

CONTINUATION TOTAL **4665.49**

No. B 286947

WELL DATA

FIELD: _____ SEC. 3 TWP. 34s RNG. 14w COUNTY Barber 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	N		5 1/2"	KB	5295	
LINER						
TUBING						
OPEN HOLE			7 7/8"	5295	5296	SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

JOB DATA

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
FLOAT COLLAR <u>105RT 5 1/2</u>	<u>1</u>	<u>HCS</u>
FLOAT SHOE		
GUIDE SHOE <u>R6 5 1/2</u>	<u>1</u>	<u>"</u>
CENTRALIZERS <u>S-4 5 1/2</u>		<u>"</u>
BOTTOM PLUG		
TOP PLUG <u>SW 5 1/2</u>	<u>1</u>	<u>"</u>
HEAD <u>Rotating 5 1/2</u>	<u>1</u>	<u>"</u>
PACKER		
OTHER		

CALL OUT DATE	ON LOCATION DATE	JOB STARTED DATE	JOB COMPLETED DATE
<u>3-11-95</u>	<u>3-11-95</u>	<u>3-11-95</u>	<u>3-11-95</u>
TIME <u>07:00</u>	TIME <u>10:00</u>	TIME <u>13:00</u>	TIME <u>19:45</u>

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
<u>L. Byerly 85826</u>	<u>39601 P.H.</u>	<u>PRATT KS</u>
<u>L. Garner 62723</u>	<u>52504 RCM</u>	<u>"</u>
<u>H. Branham 61882</u>	<u>4453 BULK 4150</u>	<u>ENZO OK</u>

ORIGINAL

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 _____

DEPARTMENT Cement

DESCRIPTION OF JOB 5 1/2" long string

JOB DONE THRU: TUBING CASING ANNULUS TBG./ANN.

CUSTOMER REPRESENTATIVE X

HALLIBURTON OPERATOR Alan Byerly COPIES REQUESTED _____

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
	<u>110</u>	<u>HLC</u>	<u>PRM</u>	<u>B</u>	<u>1/4" F10 CMC</u>	<u>1.84</u>	<u>12.40</u>
	<u>225</u>	<u>50/50 R2</u>	<u>PRM</u>	<u>B</u>	<u>275, 125, 122 Salt, 57 Haled-327, 1/4" Haled</u>	<u>1.26</u>	<u>14.3</u>

PRESSURES IN PSI

SUMMARY

VOLUMES

CIRCULATING _____ DISPLACEMENT _____ PRESLUSH: BBL.-GAL. 12.7 TYPE Disco - Mud Flush

BREAKDOWN _____ MAXIMUM _____ LOAD & BKDN: BBL.-GAL. _____ PAD: BBL.-GAL. _____

AVERAGE _____ FRACTURE GRADIENT _____ TREATMENT: BBL.-GAL. _____ DISPL: BBL.-GAL. _____

SHUT-IN: INSTANT _____ 5-MIN _____ 15-MIN _____ CEMENT SLURRY: BBL.-GAL. 86.5

HYDRAULIC HORSEPOWER _____ TOTAL VOLUME: BBL.-GAL. _____

ORDERED _____ AVAILABLE _____ USED _____ AVERAGE RATES IN BPM _____

TREATING _____ DISPL. _____ OVERALL _____ CEMENT LEFT IN PIPE _____

FEET 37.11 REASON Shoe pt

REMARKS

Cmt 1-2-3-9-10-11-12-13-14-15-16-17
266L SPACER
15 SKs Rotating
10 SKs Mousse

CUSTOMER OXY USA
 LEASE WHEAT A
 WELL NO. 1
 JOB TYPE Long string
 DATE 3-11-95



JOB LOG - HAL-2013-C

CUSTOMER OXY WELL NO. 1 LEASE Wheat A JOB TYPE Long string TICKET NO. 741668

CHART NO. TIME RATE (BPM) VOLUME (BBL) (GAL) PUMPS ST. LC. PRESSURE (PSI) CTUBNG CACNG. DESCRIPTION OF OPERATION AND MATERIALS

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS ST. LC.	PRESSURE (PSI) CTUBNG CACNG.	DESCRIPTION OF OPERATION AND MATERIALS
	10:00					ON Location
	13:00					Start Casing in hole
	13:20					Run Float Equipment - ^{CCNT} 1-2-3-4-10-11-12 13-14-15-16-17
	16:00					Casing on bottom
	16:15					Break Circulation (Rig Pump)
	17:45					Finish Circulating
	17:50					Hook up To well
	17:51	6	12		200	Run Deck water
	17:53	6	12		200	Run Mud Flush ORIGINAL
	17:55	6	3		200	Run SPACER
	17:56		0			Start Mixing lead cement 12.4 [#]
	18:01	3	5			Plug Rathole 15 sks
	18:05	3	8			Plug mouse hole 10 sks
	18:11	6	8		200	Start cement Downhole
	18:16	6.5	36.0		100	Start Mixing Tail Cement 14.3 [#]
	18:25	6.5	86.5		50	Finish Mixing
	18:26					Wash out pump lines
	18:26					Release Plug
	18:27	8	0		150	Start Displacement
	18:33	8	44		150	Cement on Bottom
	18:43	6	125		850	Reduce Rate
	18:49	2	128.3		1100	Land Plug
	18:50		-		1500	PSI up
	18:51					Release
	18:52					Float Held
	18:55					Wash up
	19:45					Job Complete
						Thanks
						Glen Larry



CHARGE TO: **BOX USA INC.**
 ADDRESS: **BOX 26100**
 CITY, STATE, ZIP CODE: **OKLAHOMA CITY, OK. 73126-100**

ORIGINAL

TICKET

No. **741684 - 9**

PAGE **1** OF **5**

HAL-1906-N

1. SERVICE LOCATIONS PRAG FS.	WELL/PROJECT NO. A-1	LEASE WHEAT	COUNTY/PARISH BARBER	STATE KS.	CITY/OFFSHORE LOCATION	DATE 3-1-95	OWNER SAMG
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	NITROGEN JOB? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	CONTRACTOR BRANDT DRLLG.	RIG NAME/NO.	SHIPPED VE.T.	DELIVERED TO WELL SITE	ORDER NO.
3.	WELL TYPE 01	WELL CATEGORY 01	JOB PURPOSE 01 SURF. & LOST CIRC.	WELL PERMIT NO. API 15-007-22472 0000	WELL LOCATION 3-343.-14W,		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS ENID TIC 773890 FOR FROCKEL & CNT THEY BROUGHT 40.5% DISC FROM EQUIP/30% DISC.						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LOC	ACCT	DF		QTY.	U/M	QTY.	U/M	
000-117		1			MILEAGE ROUND TRIP	100	MI.		2.75	275.00
001-014		1			RAMP CHARGE	6	HS	4.	1145.00	1145.00
030-583		1			8 7/8" TOP DRG	1	EA.		95.00	95.00
144	830,2171	1			8 7/8" TEXAS ATWOOD GUIDE SHOES	1	EA.		161.00	161.00
244	815,19502	1			8 7/8" INSRET FLOAT VALVE	1	EA.		171.00	171.00
27	815,19415	1			8 AUTO FILL UP UNIT	1	EA.		55.00	55.00
40	806,60059	1			8 7/8" S-4 CENTRALIZED	1	EA.		80.00	80.00
320	806,70060	1			8 7/8" CNT. BASKET	1	EA.		122.00	122.00
158,402	806,70060	1			8 7/8" CNT. BASKET	2	EA.		341.25	341.25
019-000		1			1" TSC	200	FT.	200	1.35	270.00
001-018					EX. NCS.	26	HS		235.00	6110.00
001-018					EX. NCS.	20	HS	255	20.00	4700.00

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 Timothy J. Voss
 DATE SIGNED **3-1-95** TIME SIGNED A.M. P.M.

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

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

OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN? AGREE UN-DECIDED DIS-AGREE

WE UNDERSTOOD AND MET YOUR NEEDS? AGREE UN-DECIDED DIS-AGREE

OUR SERVICE WAS PERFORMED WITHOUT DELAY? AGREE UN-DECIDED DIS-AGREE

WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY? AGREE UN-DECIDED DIS-AGREE

ARE YOU SATISFIED WITH OUR SERVICE?
 YES NO

CUSTOMER DID NOT WISH TO RESPOND

PAGE TOTAL	882526
FROM CONTINUATION PAGE(S)	1291804
SUB-TOTAL APPLICABLE TAXES WILL BE ADDED ON INVOICE	21743.80

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) Timothy J. Voss	CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE) X Timothy J. Voss	HALLIBURTON OPERATOR/ENGINEER M.R. Boljund	EMP # 50848	HALLIBURTON APPROVAL Bj
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TICKET CONTINUATION

CUSTOMER COPY

TICKET No. *281143*

HALLIBURTON ENERGY SERVICES

FORM 1911 R-10

CUSTOMER OXY USA INC	WELL WHEAT A-2	DATE 03-01-95	PAGE 2	OF 2
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PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT	
		LOC	ACCT	DF								
504-308	516.00261	1			STANDARD CEMENT	200	sk			7.82	1564	00
509-406	890.50812	1			CALCIUM CHLORIDE BLENDED 3%	6	sk			38.75	220	50
LOADED ON TRUCK #3711/7488-FRONT												
504-316		1			HALLIBURTON LIGHT CEMENT	200	sk			7.37	1474	00
509-406	890.50812				CALCIUM CHLORIDE BLENDED 3%	5	sk			36.75	183	75
LOADED ON TRUCK #3711/7488-BACK												
ORIGINAL												
500-207		1			SERVICE CHARGE					1.35	569	70
500-306		1			MILEAGE CHARGE					95	894	88
					TOTAL WEIGHT							
					37,679							
					LOADED MILES							
					50							
					TON MILES							
					941.975							
					CUBIC FEET							
					622							

CONTINUATION TOTAL

No. B 281143



TICKET CONTINUATION

CUSTOMER COPY

TICKET No. 281144

HALLIBURTON ENERGY SERVICES

FORM 1911 R-10

CUSTOMER OXY USA INC	WELL WHEAT A-2	DATE 03-01-95	PAGE 2	OF 2
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PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	WHEAT		UNIT PRICE	AMOUNT	
		LOC	ACCT	DF		QTY.	U/M		QTY.	U/M
504-316		1			HALLIBURTON LIGHT CEMENT	200	sk	7.37	1474	00
509-406	890.50812	1			CALCIUM CHLORIDE BLENDED 3%	5	sk	36.75	183	75
ORIGINAL										
					LOADED ON TRUCK #4413-SPLIT					
500-207		1			SERVICE CHARGE			1.35	283	50
500-306		1			MILEAGE CHARGE	50		95	436	98
					TOTAL WEIGHT					
					18,399					
					LOADED MILES	50				
					CUBIC FEET	210				
					TON MILES	459.975				

CONTINUATION TOTAL

No. B 281144



HALLIBURTON

TICKET CONTINUATION

CUSTOMER COPY

TICKET No. 281139

HALLIBURTON ENERGY SERVICES

FORM 1911 R-10

CUSTOMER OXY USA INC

WELL WHEAT A-2

DATE 03-01-95

PAGE 4 OF 2

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M	UNIT PRICE	AMOUNT
		LOC	ACCT	DF						
504-316		1			HALLIBURTON LIGHT CEMENT	200	sk		7 37	1474 00
509-406	890.50812	1			CALCIUM CHLORIDE BLENDED 3%	5	sk		36 75	183 75
507-210	890.50071	1			FLOCELE BLENDED 1/4#/SK	30	lb		1 65	82 50
LITE CEMENT LOADED ON TRUCK #3711/7488-FRONT										
504-308	516.00261	1			STANDARD CEMENT	50	sk		7 82	391 00
507-277	516.00259	1			HALLIBURTON GEL BLENDED 4%	2	sk		18 60	37 20
508-127	890.50131	1			CALSEAL BLENDED 5%	2	sk		25 90	51 80
509-406	890.50812	1			CALCIUM CHLORIDE BLENDED 1%	1	sk		36 75	36 75
507-210	890.50071	1			FLOCELE BLENDED 1/4#/SK	13	lb		1 65	21 45
THIXOTROPIC CEMENT LOADED ON TRUCK #3711/7488-BACK										
ORIGINAL										
500-207		1			SERVICE CHARGE	CUBIC FEET			1 35	369 90
500-306		1			MILEAGE CHARGE	TOTAL WEIGHT	LOADED MILES	TON MILES	95	561 21
					23,630	50		590.75		

No. B 281139

CONTINUATION TOTAL



HALLIBURTON

TICKET CONTINUATION

CUSTOMER COPY

TICKET No. 281138

HALLIBURTON ENERGY SERVICES

FORM 1911 R-10

CUSTOMER OXY USA INC

WELL WHEAT A-2

DATE 03-03-95

PAGE 4 OF 2

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
504-308	516.00261	1			STANDARD CEMENT	150	sk			7.82	1173.00
507-277	516.00259	1			HALLIBURTON GEL BLENDED 4%	6	sk			18.60	111.60
508-127	890.50131	1			CALSEAL BLENDED 10%	14	sk			25.90	362.60
509-406	890.50812	1			CALCIUM CHLORIDE BLENDED 1%	2	sk			36.75	73.50
507-210	890.50071	1			FLOCELE BLENDED 1/4#/SK	38	1b			1.65	62.70
LOADED ON TRUCK #4413-SPLIT											
ORIGINAL											
500-207		1			SERVICE CHARGE	CUBIC FEET		1888		1.35	253.80
500-306		1			MILEAGE CHARGE	TOTAL WEIGHT	LOADED MILES	TON MILES		95	386.22
						16,262	50	406.55			

CONTINUATION TOTAL

No. B 281138

WELL DATA FIELD: SEC. 3 TWP. 34S. RNG. 14W COUNTY: BARCEL STATE: MO

FORMATION NAME TYPE FORMATION THICKNESS INITIAL PROD. OIL BPD. WATER B-D. 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

Table with columns: NEW USED, WEIGHT, SIZE, FROM, TO, MAXIMUM PSI ALLOWABLE. Rows: CASING (24, 8 7/8, 0, 1041), LINER, TUBING, OPEN HOLE (12 1/4, RB, 1076 1/2, SHOTS/FT.), PERFORATIONS

JOB DATA

Table with columns: CALLED OUT, ON LOCATION, JOB STARTED, JOB COMPLETED. Includes dates and times for each stage.

TOOLS AND ACCESSORIES

Table with columns: TYPE AND SIZE, QTY., MAKE. Lists items like ELOOP COLLAR, FLOAT SPRD, 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. 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

PERSONNEL AND SERVICE UNITS

Table with columns: NAME, UNIT NO. & TYPE, LOCATION. Lists personnel like M. Bolyard, K. GARDNER, L. GARDNER, C. BARKER, C. BARKER.

ORIGINAL

DEPARTMENT (MEMPHIS) DESCRIPTION OF JOB UMT 8 7/8 SUCT. CSG 1" FOR LAST CIRC. CUSTOMER REPRESENTATIVE X Tim Voss HALLIBURTON OPERATOR M.S. Bolyard COPIES REQUESTED

CEMENT DATA

Table with columns: STAGE, NUMBER OF SACKS, CEMENT, BRAND, BULK SACKED, ADDITIVES, YIELD CU.FT./SK., MIXED LBS./GAL. Rows: 200 STJ 3% L.C., 200 HCC 3% L.C. SEC LOGS.

PRESSURES IN PSI

SUMMARY

VOLUMES

CIRCULATING DISPLACEMENT PRES LUSH: BBL.-GAL. TYPE BREAKDOWN MAXIMUM LOAD & BKDN: BBL.-GAL. PAD: BBL.-GAL. AVERAGE FRACTURE GRADIENT TREATMENT: BBL.-GAL. DISPL: BBL.-GAL. 6347 SHUT-IN: INSTANT 5-MIN 15-MIN CEMENT SLURRY: BBL.-GAL. 42.03 STJ. TOTAL VOLUME: BBL.-GAL. REMARKS ENID (REV) R. BILBO 56222 M. L. GARDNER 53876 K. LARSON 86036

CUSTOMER: GUY USA 120C. LEASE: ADITCAY. WELL NO: A-1. JOB TYPE: MEMPHIS. DATE: 3-1-95.



JOB LOG HAL-2013-C

CUSTOMER OKY USA INC	WELL NO. A-1	LEASE WHEAT	JOB TYPE CEMENT	TICKET NO. 741684
-------------------------	-----------------	----------------	--------------------	----------------------

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS	PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
					TUBING	CASING	

	2100							CALLED OUT 2-28-95
	0130							ON LOCATION 3-1-95
								RIG STILL DILL.
1	0600							START CCG.
								GUIDE SNGS (TEXAS SNGS) CENTRALIZED
								HALF WAY 1st ST. INSERT & FILL UP
								CMT. SNGS ON 3s, 6, 8, 18
								RIG PUMP PUMPING TO FILL PIPE
								& BLEW OUT AUTO FILL.
								CIRC LAST ST & LAND ST DOWN.
								HOOK UP
	0946							MIX CMT. (200 SKS STD.)
	0947	6	0			350		PUMPING
	0957		42.03					FINISHED MIX START IN RELEASE HCG.
	0958	4	0			200		START DISP.
		2						LIFT PSI @ 57 BBS DISP. (SLOW RATE 2BPM @ 60 BBS)
	1018		63.47			400		PLUG DOWN & PSI UP
								RELEASE & HOLD
								RUN 1" ON OUTSIDE CCG. 200'
								MIX CMT. (200 SKS HCG.)
	1132	2				400		PUMPING
	1217					0		FINISHED CMT. NO RETURNS
								WAIT 1 HR. RUN WIRE LINE COULDN'T
								GET BELOW 172' NO CMT.
	1400							ORDERED CMT.
	1635							CMT. ON LOCATION
								RUN 1" 736 11' TO 200'
2	1730					400		PUMPING CMT.
	1747					0		100 SKS START DOWN
	1751					400		PUMPING
	1811					0		FINISHED MIX (200 SKS HCG TOTAL)
								WAIT 1 HR. RUN WIRE LINE NO CMT. SAME
								AS BEFORE
								ORDERED CMT

ORIGINAL



JOB LOG - HAL-2013-C

CUSTOMER OMA USA INC WELL NO. Q-1 LEASE WHEAT JOB TYPE CEMGOT TICKET NO. 741684

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS	PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
					TUBING	CASING	
2							CMT ON LOCATION
							Run 1" TBC.
	0149		0		550		MIX CMT 50 SEC THX.
	0202		14.25		0		FINISHED MIX 1.60" 14.11"
3							Pull TBC WAIT
							Run TBC IN
	0609	2	0		400		MIX CMT. (200 SEC HLC.)
	0648		63.47		0		Pumping FINISHED MIX
4							WASH UP
							WAIT ON CMT.
							CALLER FOR FLOCTEK & CMT.
							50 SEC THX & 200 STD.
							ACK UP Pump to PIT
							2 STRINGS 1" IN WELL
							(1" END TENCEL Pump 10 BBS CC HO 1 BBS STD)
	1730		0				ON LINE MIX THX
			2	5			5 BBS PUMPED END TRC START FLOCTEK
			1	7			ALMOST SHUT TRX OFF WITH THX HAD
		2				TO THIN UP CMT. TO GET PUMP GOING AGAIN	
			12			MIX 50 SEC STD. & Pump	
	1748		23			FINISHED MIX Pull STRINGS OF TBC.	
						WASH UP WAITING ON CMT.	
						CMT DECIDED TO ORDER 150 SEC STD THX	
	2216	1	0			LINE OUGE TOP MIX UP 25 BBS	
		1 1/2				8.9M MUD	
						Pumping RIG CREW Dump 7 SEC HALLS	
						Down TOP 4 SEC.	
	2230		25			FLUID TO FLOW T @ 20 BBS PUMP	
						WASH UP FLUID DROP SLOWLY	
						Run 1" TBC. WAIT	
5	2415	2	0		450	MIX & Pump 50 SEC THX	
					0	FINISHED MIX	
						WASH UP TRC.	
						Run TBC 50' ALL THAT WOULD GO.	
	0310	2				Pump HCU TO LOAN	
	0324					CIRC. WATER	

ORIGINAL

Pump Run Chart



JOB LOG HAL-2013-C

CUSTOMER OKY USA INC	WELL NO. A-1	LEASE OCEAN	JOB TYPE CEMENT	TICKET NO. 741684
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CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PI PIPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				I	C	TUBING	CASING	
5	0335	2	0			500		MIX CMT. SEC.
			10					CMT. COLOR H2O RETURNS
	0351		25					GOOD CMT. ORIGINAL SHUT DOWN
								WASH UP DRAIN UP
								PULL 1"
	0445							CMT. STOPPED FALLING
								CUST SATISFIED RELEASED FROM JOB
								RACK UP
	0530							JOB Comp
								JOB TIME ON LOC. 52 HRS.

15-007-22472-0000
STATE OF KANSAS - CORPORATION COMMISSION
MULTIPOINT BACK PRESSURE TEST

FORM CG-1

TYPE TEST: Initial Annual Special TEST DATE: 11-15-95

COMPANY: OXY USA INC LEASE: WHEAT 'A' WELL NO.: 2

COUNTY: BARBER LOCATION: SE SECTION: 3 TWP: 34S RNG: 14W ACRES:

FIELD: AETNA RESERVOIR: MISSISSIPPI PIPELINE CONNECTION: WESTERN GAS/KPL

COMPLETION DATE: 8-95 PLUG BACK TOTAL DEPTH: 5146 PACKER SET AT: NONE

CASING SIZE: 5 1/2 WT.: 14.0 ID.: 5.012 SET AT: 5243 PERF.: 4708-4790 TO:

TUBING SIZE: 2 3/8 WT.: 4.7 ID.: 1.995 SET AT: 5040 PERF.: TO:

TYPE COMPLETION (Describe): SINGLE GAS TYPE FLUID PRODUCTION: NONE

PRODUCING THRU: CASING RESERVOIR TEMPERATURE: 128 @ 4749 BAR PRESS - P_a: 14.4 Psia

GAS GRAVITY - G_g: .674 % CARBON DIOXIDE: N/A % NITROGEN: N/A API GRAVITY OF LIQUID:

VERTICAL DEPTH (ft): 4749 TYPE METER CONN.: FLA (METER RUN) (PROVER) SIZE: XXXX 2"

REMARKS:

OBSERVED DATA

DURATION OF SHUT-IN: HR.

RATE No.	ORIFICE SIZE In.	(METER) (PROVER) PRESSURE psig	DIFF. (h _w) (h _d)	FLOWING TEMP. t	WELL-HEAD TEMP. t	CASING WELLHEAD PRESS.		TUBING WELLHEAD PRESS.		DURATION HOURS	LIQUID PROD. Bbls.
						psig	(P _w)(P _i)(P _o) psia	psig	(P _w X P _i)(P _c) psia		
SHUT IN											
1	1/2	109	1.5	48	74	387.6	402.0			72.0	0.0
2	1/2	116	7.0	42	74	386.3	400.7			1.0	0.0
3	1/2	122	38.0	42	74	379.1	393.5			1.0	0.0
4	1/2	122	38.0	42	74	360.5	374.9			1.0	0.0
5	1/2	223	41.5	51	74	334.3	348.7			1.0	0.0

RATE OF FLOW CALCULATIONS

RATE NO.	COEFFICIENT (F _d)(F _p) Mcfd	(METER) (PROVER) PRESSURE psia	EXTENSION $\sqrt{P_m h_w}$	GRAVITY FACTOR F _g	FLOWING TEMP FACTOR F _t	DEVIATION FACTOR F _{pv}	RATE OF FLOW Q Mcfd	GOR	G _m
1	1.22	123.2	13.6	1.218	1.012	1.014	20.7	0	0.674
2	1.22	130.4	30.2	1.218	1.018	1.016	46.4	0	0.674
3	1.22	136.1	71.9	1.218	1.018	1.017	110.5	0	0.674
4	1.22	237.6	99.3	1.218	1.009	1.028	152.9	0	0.674
5									

PRESSURE CALCULATIONS

RATE NO.	P _i psia	P _o psia	P _w psia	(P _o) ² THOUSANDS	(P _w) ² THOUSANDS	PLOTTING POINTS		% SHUT-IN $100 \left[\frac{P_w - P_a}{P_o - P_a} \right]$
						(P _o) ² - (P _w) ² THOUSANDS	Q Mcfd	
1	400.7	402.0	400.7	161.6	160.6	1.0	20.7	99.7
2	393.5	402.0	393.5	161.6	154.8	6.8	46.4	97.8
3	374.9	402.0	374.9	161.6	140.6	21.1	110.5	93.0
4	348.7	402.0	348.7	161.6	121.6	40.0	152.9	86.2
5								

INDICATED WELLHEAD OPEN FLOW 324.5 Mcfd @ 14.65 psia "n" = 0.539

The undersigned authority, on behalf of the Company, states that he is duly authorized to make the above report and that he has knowledge of the facts stated therein, and that said report is true and correct.

Executed this the 15TH day of NOVEMBER 1995

NOV 27 1995

PRECISION WELL TESTING

For Company

STEVE HELM

Checked by

Witness (if any)

For Commission

CONSERVATION COMMISSION
 WANDA BARBER

BACK PRESSURE CURVE

OPERATOR: OXY USA INC

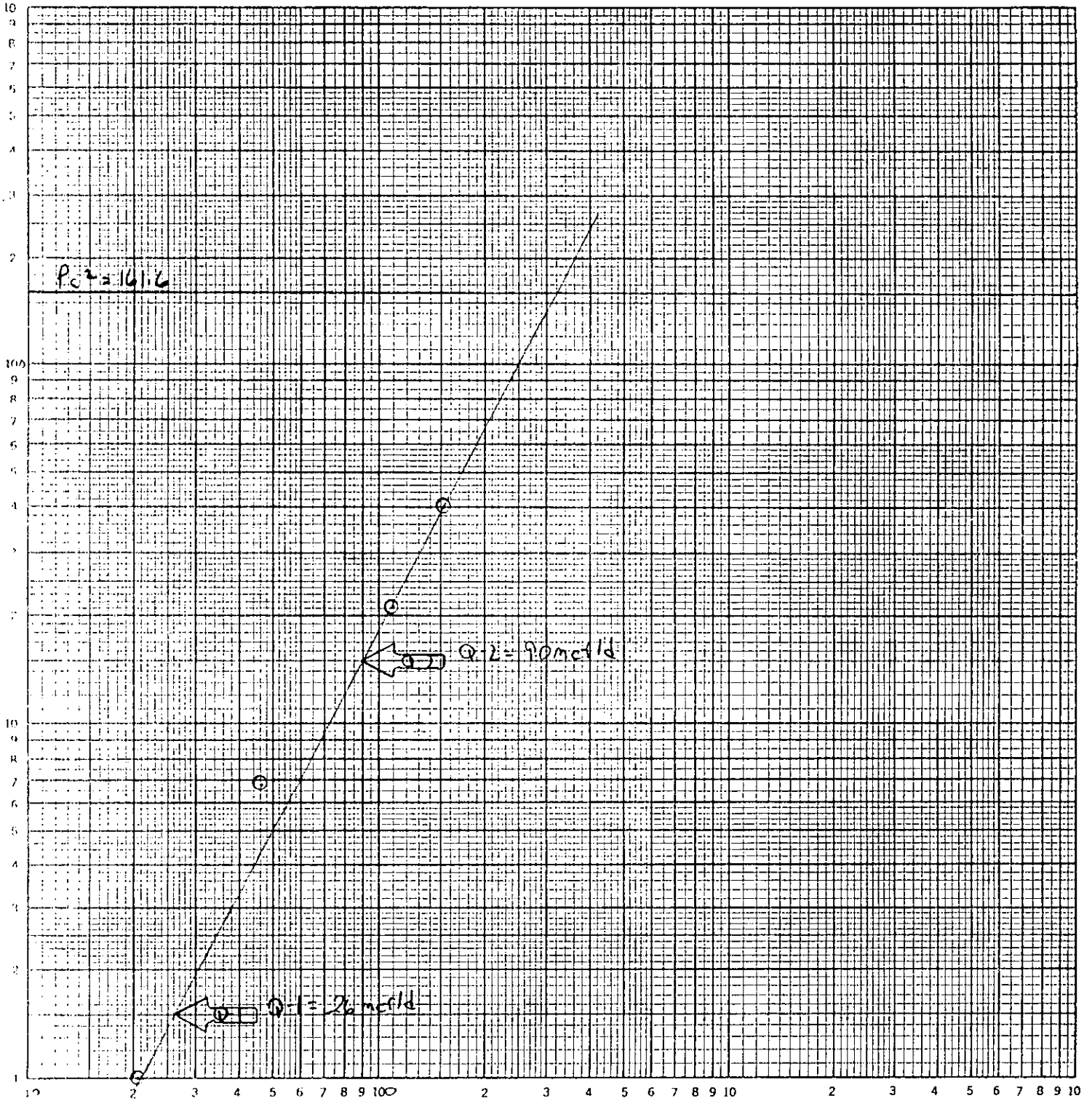
DATE OF TEST: 11-15-95

WELL NAME: WHEAT 'A' #2

TYPE OF PLOT: _____

LOCATION: 3-34S-14W

COUNTY: BARBER STATE: KS



Q in MCF/DAY

LOG Q-2 = 1.954
 LOG Q-1 = 1.415

'n' = .539

Precision Well Testing

P.O. BOX 1843
LIBERAL, KANSAS 67905-1843
PHONE: 316-624-4505
MOBILE: 316-624-6258 UNIT 9390

PRODUCER OXY USA INC
WELL NAME WHEAT 'A' #2
LOCATION SE 3-34S-14W
COUNTY BARBER STATE KS

CSG 5 1/2 WT 14.0 SET 5243 TD _____ PB 5146 GL _____
TBG 2 3/8 WT 4.7 SET 5040 SN _____ PKR _____ KB _____
PERFS. 4708 TO 4790 TO _____ TO _____
PROVER _____ METER 2" TAPS FLA ORIFICE .500 PCR _____ TCR _____
GG .674 API _____ GM _____ RESERVOIR MISSISSIPPI

DATE TIME OF READING	ELAP TIME HOURS	WELLHEAD PRESSURE DATA						MEASUREMENT DATA				LIQUIDS		TYPE TEST:	INITIAL ANNUAL	SPECIAL RETEST	ENDING DATE
		CSG PSIG	Δ P CSG	TBG PSIG	Δ P TBG	BHP PSIG	Δ P BHP	PRESS. PSIG	DIFF.	TEMP	Q MCF/D	COND. BBL.	WATER BBL.				
WEDNESDAY 11-15-95																	250# 50" 0-150 ⁰
0945	72.0	387.6		PUMP OFF													
0945		WELL ON 1ST RATE OF MULTI-PT. TEST THROUGH METER RUN.															
1000		387.2	-0.4					108.1	2.0	51	23						
1015	.5	387.0	-0.2					108.1	2.0	51	23						
1030		386.7	-0.3					108.2	2.0	48	23						
1045	1.0	386.3	-0.4	PUMP OFF				108.8	1.5	48	21	0	0				
1045		WELL ON 2ND RATE OF MULTI-PT. TEST THROUGH METER RUN.															
1100		384.2	-2.1					114.5	10.0	45	55						
1115	1.5	382.0	-2.2					114.5	8.5	42	51						
1130		380.2	+1.8					115.2	8.0	42	50						
1145	2.0	379.1	-1.1	PUMP OFF				116.0	7.0	42	46	0	0				
1145		WELL ON 3RD RATE OF MULTI-PT. TEST THROUGH METER RUN.															
1200		372.3	-6.8					118.2	42.0	42	115						
1215		367.6	-5.6					118.3	38.0	42	109						
1230		364.1	-3.5					119.8	38.0	42	110						
1245		360.5	-3.6	PUMP OFF				121.7	38.0	42	111	0	0				
1245		WELL ON 4TH RATE OF MULTI-T. TEST THROUGH METER RUN.															
1300		352.6	-7.9					234.4	43.0	48	159						
1315	3.5	346.4	-6.2					230.8	42.5	49	157						

Precision Well Testing

OXY USA INC - WHEAT 'A' #2

DATE TIME OF READING	ELAP TIME HOURS	WELLHEAD PRESSURE DATA						MEASUREMENT DATA				LIQUIDS		TYPE TEST: _____	INITIAL _____	SPECIAL _____	ENDING DATE	
		CSG PSIG	Δ P CSG	TBG PSIG	Δ P TBG	BHP PSIG	Δ P BHP	PRESS. PSIG	DIFF.	TEMP	Q MCF/D	COND. BBL.	WATER BBL.					
WEDNESDAY 11-15-95 (CONTD) REMARKS PERTINENT TO TEST DATA QUALITY																		
1330		339.2	-7.2					226.3	42.0	51	154							
1400	4.0	334.3	-4.9	PUMP OFF				223.2	41.5	51	153	0	0					
1400		WELL ON 1-PT. TEST																
1430	4.5	331.7	-2.6	PUMP OFF				118.4	23.0	48	85							

STATE OF KANSAS - CORPORATION COMMISSION
ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

FORM O-2
8-7-58

TYPE TEST: Deliverability Open Flow TEST DATE: 11-16-95

COMPANY: OXY USA, INC. LEASE: WHEAT LAI WELL NO.: 2

COUNTY: BARBER LOCATION: SE SECTION: 3 TWP: 34S RPO: 14W ACRES:

FIELD: AETNA RESERVOIR: MISSISSIPPI PIPELINE CONNECTION: WESTERN GAS/KPI

COMPLETION DATE: 8-95 PLUG BACK TOTAL DEPTH: 5146 PACKER SET AT: NONE

CASING SIZE: 5 1/2 WT. 14.0 I.D. 5.012 SET AT 5243 PERF. 4708 TO 4790

TUBING SIZE: 2 3/8 WT. 4.7 I.D. 1.995 SET AT 5040 PERF. TO

TYPE COMPLETION (Describe): SINGLE GAS TYPE FLUID PRODUCTION:

PRODUCING THRU CASING RESERVOIR TEMPERATURE F: 138 @ 4749 BAR. PRESS - P_s: 14.4 Psia

GAS GRAVITY - G_g: .674 % CARBON DIOXIDE: % NITROGEN: API GRAVITY OF LIQUID:

VERTICAL DEPTH (H): 4749 TYPE METER CONN.: Flange (METER RUN) (PROVER) SIZE: 2"

SHUT-IN PRESSURE: SHUT IN 11-12 19 95 AT 0945 (AM)(PM) TAKEN 11-15 19 95 AT 0945 (AM)(PM)

FLOW TEST: STARTED 11-15 19 95 AT 0945 (AM)(PM) TAKEN 11-16 19 95 AT 0945 (AM)(PM)

OBSERVED DATA

DURATION OF SHUT-IN HR.

SHUT-IN OR FLOW	ORIFICE SIZE in.	(METER) (PROVER) PRESSURE psig	DIFF. in. (h _w /h _d)	FLOWING TEMP. t	WELL-HEAD TEMP. t	CASINO WELLHEAD PRESS		TYING WELLHEAD PRESS		DURATION HOURS	LIQUID PROD. Bbls.
						psig	(P _w)(P _i)(P _c) psia	psig	(P _w)(P _i)(P _c) psia		
SHUT-IN						387.6	402			72	
FLOW	1/2	113	18	45	74	247.0	261.4			24	

RATE OF FLOW CALCULATIONS

COEFFICIENT (F _p)(F _v) ² Mcfd	(METER) (PROVER) PRESSURE psia	EXTENSION $\sqrt{P_m \cdot h_w}$	GRAVITY FACTOR F _g	FLOWING TEMP. FACTOR F _L	DEVIATION FACTOR F _{pv}	RATE OF FLOW R Mcfd	GOR	G _m
1.22	127.4	47.9	1.218	1.015	1.015	73.2	0	0.000

(OPEN FLOW) (DELIVERABILITY) CALCULATIONS

(P_c)² = 161.6 (P_w)² = 68.3 P_d = 65.0 % (P_c - 14.4) + 14.4 = 402.0 (P_w)² = 0.207 (P_d)² =

$\frac{(P_c)^2 - (P_w)^2}{(P_c)^2 - (P_d)^2}$	$(P_c)^2 - (P_w)^2$	$\frac{P_c^2 - P_d^2}{P_c^2 - P_w^2}$	LOG []	"n"	n = LOG []	ANTILOG	OPEN FLOW DELIVERABILITY EQUALS R = ANTILOG Mcfd
161.4	93.3	1.730	0.2381	0.5390	0.1284	1.344	98

OPEN FLOW 98 Mcfd @ 14.65 psia DELIVERABILITY Mcfd @ 14.65 psia

The undersigned authority, on behalf of the Company, states that he is duly authorized to make the above report and that he has knowledge of the facts stated therein, and that said report is true and correct.

Executed this the 16TH day of NOVEMBER, 1995.

Witness (if any)

For Commission

PRECISION WELL TEST

STEVE BELM by