

ORIGINAL

FORM MUST BE TYPED

SIDE ONE

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

Operator: License # 3882
Name: Samuel Gary Jr. & Associates
Address 1670 Broadway - Suite 3300

City/State/Zip Denver, Colorado 80202

Purchaser: NA

Operator Contact Person: Tom Fertal

Phone (303) 831-4673

Contractor: Name: Duke Drilling Co., Inc.

License: 5929

Wellsite Geologist: Dale Padgett

Designate Type of Completion
 New Well Re-Entry Workover

Oil SWD SIOV Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSV, Expl., Cathodic, etc)

If Workover/Re-Entry: old well info as follows:

Operator: Tuthill & Barbie

Well Name: 1-34 Gillet

Comp. Date 1-24-81 Old Total Depth 5230'

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

05-12-97 05-17-97 05-18-97

Date of REENTRY Date Reached TD Completion Date

API NO. 15- 033-20431-00-02

County Comanche County, Kansas

C-NW - - - - - Sec. 34 Twp. 32S Rge. 19 XX^E

1320 Feet from S (circle one) Line of Section

1326 Feet from E (circle one) Line of Section

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

Lease Name Gillet OWWO Well # 1-34

Field Name Colter West

Producing Formation NA

Elevation: Ground 1932' XB 1945'

Total Depth 4795' PBSD 5100'

Amount of Surface Pipe Set and Cemented at 797 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 cat.

Drilling Fluid Management Plan UNSUCCESSFUL REENTRY
(Data must be collected from the Reserve Pit) 9-13-97

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used _____

Location of fluid disposal if hauled offsite: _____

Operator Name _____

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 Colorado 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 Thomas Fertal

Title Geologist Date Aug. 19, 1997

Subscribed and sworn to before me this 19th day of August 19 97.

Notary Public Judith D. Harmon

Date Commission Expires January 30, 1999

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
RECEIVED Geologist Report Received
KANSAS CORPORATION COMMISSION
Distribution
 XCC SWD/Rep NGPA
 KGS Plug Other
8-22-97
(Specify)

SIDE TWO

Operator Name Samuel Gary Jr. & Associates Lease Name Gillet OWWO Well # 1-34

Sec. 34 Twp. 32S Rge. 19
 East
 West

County Comanche County, Kansas

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 type="checkbox"/> Log	Formation (Top), Depth and Datum	<input 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	Formation tops were on the original ACO-1		
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

List All E.Logs Run:

Array induction, Gamma-Ray Compensated Neutron Photo Density.

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
		NA					

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	4038-			.5% Friction reducer
<input checked="" type="checkbox"/> Plug Back TD	3840	C1 H	100	
<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
	NA		

TUBING RECORD	Size NA	Set At NA	Packer At NA	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---------------	------------	--------------	-----------------	---

Date of First, Resumed Production, SWD or Inj. NA	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) NA
--	---

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

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

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval: P&A

NA

TRILOBITE TESTING L.L.C.

ORIGINAL

OPERATOR : Samual Gary Jr.
 WELL NAME: Gillet #1-34
 LOCATION : Sec.34 Twp.32s Rge.19w
 INTERVAL : 4710.00 To 4740.00 ft

DATE 05/16/97
 KB 1945.00 ft
 GR 1932.00 ft
 TD 4740.00 ft
 TICKET NO: 10012
 FORMATION: Swope
 TEST TYPE: CONV
 DST #1

15-033-20431-0002

RECORDER DATA

Mins	Field	1	2	3	4	TIME DATA-----
PF 10 Rec.	13849	13849	2350			PF Fr. 1502 to 1512 hr
SI 90 Range(Psi)	4375.0	4375.0	4995.0	0.0	0.0	IS Fr. 1512 to 1642 hr
SF 105 Clock(hrs)	12hr.	12hr.	Elec.			SF Fr. 1642 to 1827 hr
FS 210 Depth(ft)	4737.0	4737.0	4716.0	0.0	0.0	FS Fr. 1827 to 2157 hr

	Field	1	2	3	4	
A. Init Hydro	2313.0	2332.0	2282.0	0.0	0.0	T STARTED 1243 hr
B. First Flow	89.0	112.0	36.0	0.0	0.0	T ON BOTM 1500 hr
B1. Final Flow	100.0	118.0	122.0	0.0	0.0	T OPEN 1502 hr
C. In Shut-in	1809.0	1813.0	1799.0	0.0	0.0	T PULLED 2157 hr
D. Init Flow	200.0	226.0	127.0	0.0	0.0	T OUT 0100 hr
E. Final Flow	422.0	449.0	442.0	0.0	0.0	
F. Fl Shut-in	1754.0	1791.0	1785.0	0.0	0.0	TOOL DATA-----
G. Final Hydro	2236.0	2238.0	2181.0	0.0	0.0	Tool Wt. 2100.00 lbs
Inside/Outside	0	0	I			Wt Set On Packer 20000.00 lbs
						Wt Pulled Loose 90000.00 lbs
						Initial Str Wt 72000.00 lbs
						Unseated Str Wt 76000.00 lbs
						Bot Choce 0.75 in
						Hole Size 7.88 in
						D Col. ID 2.25 in
						D. Pipe ID 3.80 in
						D.C. Length 240.00 ft
						D.P. Length 4449.00 ft

RECOVERY

Tot Fluid 950.00 ft of 240.00 ft in DC and 710.00 ft in DP
 600.00 ft of Slight Mud Cut Water
 0.00 ft of 10% mud 90% water
 180.00 ft of Salt Water
 0.00 ft of 100% water
 170.00 ft of Water Cut Mud
 0.00 ft of 40% water 60% mud
 0.00 ft of
 0.00 ft of
 SALINITY 10000.00 P.P.M. A.P.I. Gravity 0.00

BLOW DESCRIPTION

Initial Flow:
 Fair blow, built to 9"
 Initial Shut In:
 Bled down for 10 mins, No blow back
 Final Flow:
 Fair blow, Built
 in 17 mins
 Final Shut In:
 Bled down for 30 mins, No blow Back

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SAMPLES:
 SENT TO:

Test Successful: Y

MUD DATA-----

Mud Type	Chemical
Weight	9.00 lb/cf
Vis.	48.00 S/L
W.L.	9.60 in3
F.C.	0.32 in
Mud Drop N	
Amt. of fill	1.00 ft
Btm. H. Temp.	123.00 F
Hole Condition	good
% Porosity	0.00
Packer Size	6.75 in
No. of Packers	2
Cushion Amt.	0.00 n
Cushion Type	
Reversed Out N	
Tool Chased	
Tester	Darren Amerine
Co. Rep.	David Rice
Contr.	Duke
Rig #	7
Unit #	
Pump T.	

*** TOOL DIAGRAM *** CONV

ORIGINAL

WELL NAME: Gillet #1-34

LOCATION : Sec.34 Twp.32s Rge.19w

TICKET No. 10012 D.S.T. No. 1 DATE 05/16/97

TOTAL TOOL TO BOTTOM OF TOP PACKERS 31'

INTERVAL TOOL

BOTTOM PACKERS AND ANCHOR 30'

TOTAL TOOL 61'

DRILL COLLAR ANCHOR IN INTERVAL

D.C. ANCHOR STND.Stands Single Total

D.P. ANCHOR STND.Stands Single Total

TOTAL ASSEMBLY 61

D.C. ABOVE TOOLS.Stands 4 Single Total 240'

D.P. ABOVE TOOLS.Stands 71 Single 1 Total 4449'

TOTAL DRILL COLLARS DRILL PIPE & TOOLS .. 4750'

TOTAL DEPTH 4740'

TOTAL DRILL PIPE ABOVE K.B. 10'

REMARKS:

Fluid sampler data:

Sampler recovery	Gas _____ ml.	resistivity-.4 ohms.@
	Oil _____ ml.	--66----degrees F
	Mud _____ ml.	Chlorides--20000--ppm.
	water 4000 ml.	
	other _____ ml.	
	pressure 150 PSI.	
	Total 4000 ml.	

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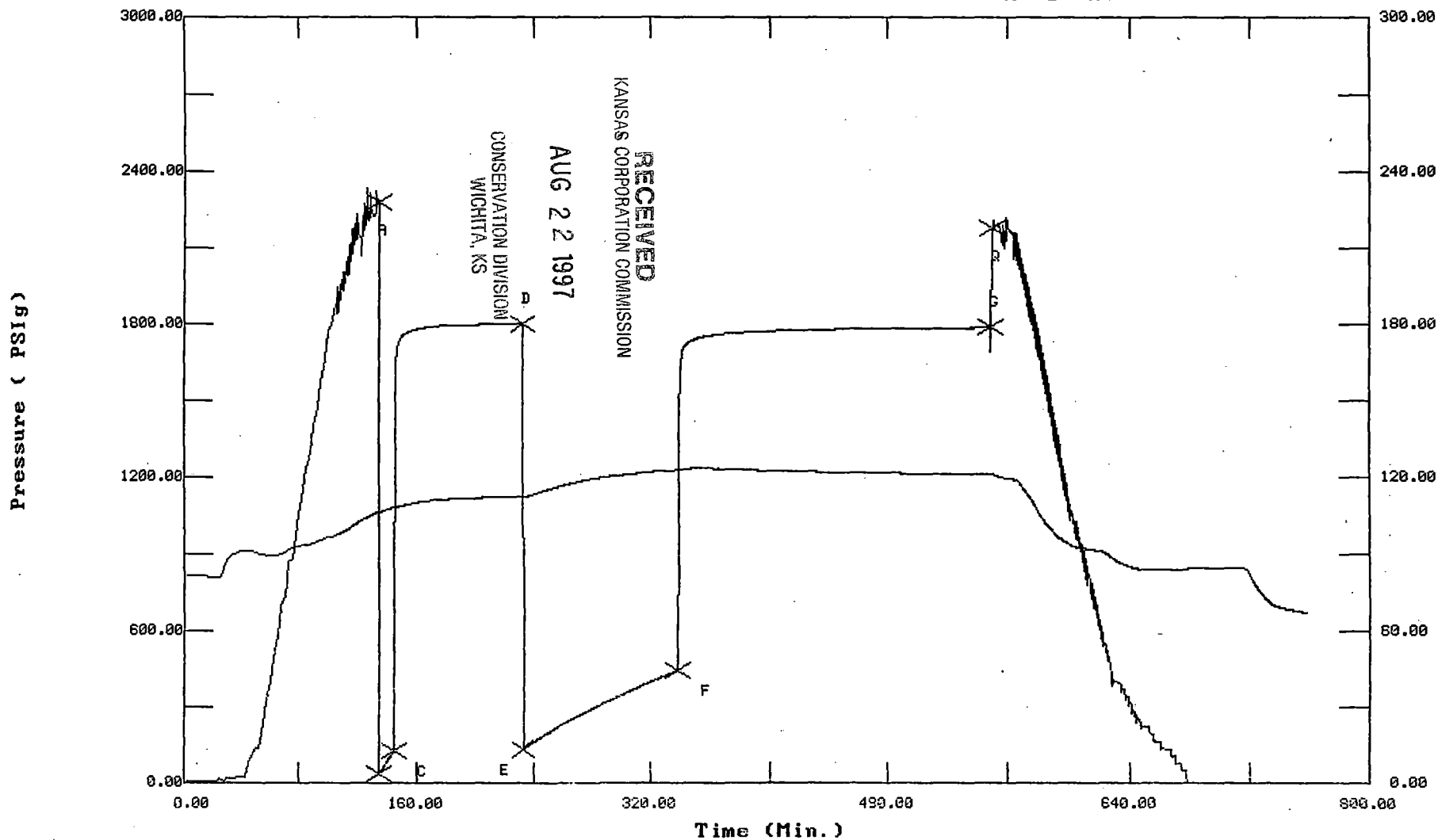
P.O. SUB	
C.O. SUB	4680'
S.I. TOOL	4685'
Fluid sampler @	4688'
HMV	4693'
JARS	4699'
SAFETY JOINT	4701'
PACKER	4705'
PACKER	4710'
DEPTH 4710'	
STUBB 1'stubb to ANCHOR	4711'
Alpine rec @ 4716'	
	4711'
27'of perfs.to	4738'
T.C. DEPTH	
	4738'
Ak-1 rec.@ 4737'	
BULLNOSE 2'bullnose to T.D.	4740'

TEST HISTORY

TK#10012 Gillet #1-34 DST#1 Samuel Gary Jr.

Flag Points
t (Min.) P (PSig)

A:	0.00	2282.49
B:	0.00	35.83
C:	10.00	122.19
D:	87.50	1799.40
E:	0.00	127.39
F:	106.25	442.12
G:	210.25	1785.39
Q:	0.00	2180.86



ALLIED CEMENTING CO., INC. 6498

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

ORIGINAL

SERVICE POINT:
med. lodge, ks.

DATE <u>5-4-97</u>	SEC. <u>34</u>	TWP. <u>32S</u>	RANGE <u>19W</u>	CALLED OUT <u>6:00A.M.</u>	ON LOCATION <u>9:00A.M.</u>	JOB START <u>10:30A.M.</u>	JOB FINISH <u>11:30A.M.</u>
LEASE <u>Gillet</u>		WELL # <u>1-34</u>		LOCATION <u>Coldwater, SS-3W-13/4N-E/S</u>		COUNTY <u>Comanche</u>	STATE <u>KS.</u>

OLD OR NEW (Circle one)

CONTRACTOR Clarke Corp.
 TYPE OF JOB Whipstock Plug
 HOLE SIZE 7 7/8 T.D.
 CASING SIZE _____ DEPTH _____
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE 2 7/8 x 6.50 DEPTH 4038'
 TOOL _____ DEPTH _____
 PRES. MAX 650 MINIMUM 200
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____

OWNER Sam Gary Fr. + Associates
CEMENT

AMOUNT ORDERED 300 Gals. mud-Clean
100sxs. CLASS H + 1/2 of 1% CD-31

COMMON H	<u>100</u>	@	<u>7.55</u>	<u>755.00</u>
POZMIX		@		
GEL		@		
CHLORIDE		@		
<u>MUD CLEAN</u>	<u>300 Gals</u>	@	<u>.75</u>	<u>225.00</u>
<u>CD-31</u>	<u>47#</u>	@	<u>4.45</u>	<u>209.15</u>
		@		
		@		
HANDLING	<u>100</u>	@	<u>1.05</u>	<u>105.00</u>
MILEAGE	<u>100 x 45</u>	@	<u>.04</u>	<u>180.00</u>

EQUIPMENT

PUMP TRUCK CEMENTER ANNY D. CARL B.
 # 233-302 HELPER Shane Winsor
 BULK TRUCK
 # 242 DRIVER Randy L.
 BULK TRUCK
 # _____ DRIVER _____

TOTAL \$1474.15

REMARKS:

SERVICE

Pipe set 4038' Circ. w/Rig Pump
mix + Pump 300 Gals mud Clean.
Cement 100sxs. CLASS H + 1/2 of 1% CD-31
start + Displace Cement w/ mud.
mud In. Pull tubing.

DEPTH OF JOB	<u>4038'</u>		
PUMP TRUCK CHARGE			<u>1090.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>45</u>	@	<u>2.85</u> <u>128.25</u>
PLUG		@	
		@	
		@	

TOTAL \$1218.25

CHARGE TO: SAM GARY Fr. + Associates
 STREET 1670 Broadway Suite #3300
 CITY Denver STATE Co. ZIP 80203

FLOAT EQUIPMENT

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KANSAS CORPORATION COMMISSION @

AUG 22 1997 @

AUG 22 1997

CONSERVATION DIVISION
WICHITA, KS

CONSERVATION DIVISION
WICHITA, KS

TOTAL _____

TAX \$ 172.31

TOTAL CHARGE \$2864.71

DISCOUNT \$ 403.86 IF PAID IN 30 DAYS

NET \$ 2460.85

To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

SIGNATURE X David E Ric

TELEPHONE
AREA CODE 913 483-2627
AREA CODE 913 483-3887

ALLIED CEMENTING COMPANY, INC.

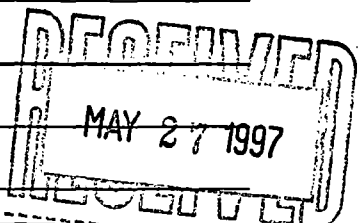
ORIGINAL

P. O. BOX 31
RUSSELL, KANSAS 67665

Federal Tax I.D.# 48-0727860

TO: Sam Gary Jr. & Associates
1670 Broadway, #3300
Denver, CO 80203

INVOICE NO. 75022
PURCHASE ORDER NO. _____
LEASE NAME Gillet 1-34
DATE 5-4-97



SERVICE AND MATERIALS AS FOLLOWS:

6692

Common H 100 sks @\$7.55 \$755.00
Mud Clean 300 gal @\$.75¢ 225.00
CD-31 47# @\$4.45 209.15

\$1,189.15

Handling 100 sks @\$1.05 105.00
Mileage (45) @\$.04¢ per sk er mi 180.00
Plug 1,090.00
Mi @\$2.85 pmp trk chg 128.25

1,503.25

Sales Tax

172.31

GILLET 3-4 Total

\$2,864.71

700/60
J. Benton

If Account CURRENT a
Discount of \$ 403.86
will be Allowed ONLY if
Paid Within 30 Days from
Date of Invoice.

Thank You!

All Prices Are Net, Payable 30 Days Following Date of Invoice. 1½% Charged Thereafter.

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ORIGINAL

Halliburton Energy Services

DATE:05-17-1997

TIME:17:41:03

SERVICE TICKET: 185717

HUGOTON-25535

BULK TICKET ONLY: 800122

JOB PURPOSE:PLUG TO ABANDON

COMPANY TRUCK::75237 DRIVER: L.PATTERSON

CUSTOMER: Samuel Gary Jr. ASSOC. LEASE & WELL#:Gillet OWWO 1-34

504-043	PREMIUM CEMENT	75	SKS.	13.70	1027.50
506-105	POZMIX-A	3700	LBS.	0.073	270.10
504-121	2% GEL	3	SKS.		N/C
507-277	4 % ADDED GEL	5	SKS.	18.60	93.00
500-207	SERVICE CHARGES	135	CU FT	1.55	209.25
				TOTAL	1599.85
500-306	WEIGHT: 11395	MILES: 70	TON MILES: 398.83	1.16	470.62
			TOTAL BOOK PRICE OF BULK TICKET:		\$ 2070.47

500-225 RETURN SERVICE CHARGES _____ CU FT 1.55

500-306 WEIGHT: _____ RETURN MILES: 70 TON MILES: _____ 1.18

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JOB LOG 4239-5

REGION North America	NW/COUNTRY	SDA/STATE	COUNTY
MBU ID / EMP #	EMPLOYEE NAME	PSL DEPARTMENT	
LOCATION	COMPANY	CUSTOMER REP / PHONE	
TICKET AMOUNT	WELL TYPE	API / UWI #	
WELL LOCATION	DEPARTMENT	JOB PURPOSE CODE	
LEASE / WELL #	SEC / TWP / RNG		

ORIGINAL

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

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL/GAL)	PUMPS		PRESS. (psi)		JOB DESCRIPTION / REMARKS
				T	O	T00	C20	
	1745							Called out - Requested 2230
	2130							ON Loc - Nipple Down T. I. H.
	11320-4	50	✓			130		Set Plug @ 810'
	1203	4	13 1/2	✓		139/100		Pump out
	1206	4	8			100/70		Pump H ₂ O
	1208	40				110		Shut down - T.O.H
	12340-3	4	✓			160		Set Plug @ 400'
	1235	3	10 1/2	✓		60		Pump H ₂ O
	1239	3	3	✓		30		Pump out
	1239	3-0		✓		10/0		Pump H ₂ O
								shut down - T.O.H
								Set Plug @ 40'
	01450-2	3	✓			130		Pump out
	0146	2	1/2	✓		30		H ₂ O
	0147	2 1/2		✓		30		Shut down ✓
								Set Rat hole plug
	01520-2	4	✓			130		Pump out
	0154	2	1/2	✓		30		Pump H ₂ O
	0154	2-0		✓		30		Shut down
								Set mouse hole plug
	0200	0-2	3	✓		130		Pump out
	0201	2	1/2	✓		30		Pump H ₂ O
	0201	2-0		✓		30		Shut down

Release from Loc.

Sith

T. I. H.

Thank you!

[Signature]

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REGION North America	NWA/COUNTRY Mid Continent	BDA / STATE KANSAS	COUNTY Comanche
MBU ID / EMP # 110104 48120	EMPLOYEE NAME Tom Payer	PSL DEPARTMENT Cement	
LOCATION LIBERAL	COMPANY SAMUEL CARY JR Assoc.	CUSTOMER REP / PHONE Keith	
TICKET AMOUNT 3788.00	WELL TYPE DL	API / UWI #	
WELL LOCATION Protection ks	DEPARTMENT 501	JOB PURPOSE CODE 115	
LEASE / WELL # Lillet 0W40	SEC / TWP / RNG 34 - 22 - 19		

ORIGINAL

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
Tom Payer 48120			
ED Clarke H3456			
Low Patterson			

HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES
470014	207						
53554-71920	207						

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
5-17-97	1745	5-17-97	2130	5-18-97
				2352

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY	MAKE
Float Collar		
Float Shoe		
Guide Shoe		
Centralizers		
Bottom Plug		
Top Plug		
Head		
Packer		
Other		

WELL DATA

NEW/USED	WEIGHT	SIZE	FROM	TO	MAX ALLOW
Casing					
Liner					
Liner					
Tbg/D.P.	11	16.60	4 1/2	KB	810
Tbg/D.P.					
Open Hole					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		
Other		
Other		

HOURS ON LOCATION		OPERATING HOURS		DESCRIPTION OF JOB
DATE	HOURS	DATE	HOURS	
				RECEIVED
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				AUG 22 1997
				CONSERVATION DIVISION
				WICHITA, KS
TOTAL		TOTAL		

HYDRAULIC HORSEPOWER

ORDERED	Avail.	Used
TREATED	AVERAGE RATES IN BPM	Overall
FEET	CEMENT LEFT IN PIPE	Reason

CEMENT DATA

STAGE	SACKS	CEMENT	BULK/SKS	ADDITIVES	YIELD	LBS/GAL
410'	50	49/60 H	B	10% C.P.	1.5	13.0
400'	40	"	"	"		
40	10	"	"	"		
RT	15	"	"	"		
Miss	10	"	"	"		

Circulating _____ Displacement _____ Pretlush: Gal - BBI _____ Type _____
 Breakdown _____ Maximum _____ Load & Bkdn: Gal - BBI _____ Pad: BBI - Gal _____
 Average _____ Frac Gradient _____ Treatment Gal - BBI _____ Disp: BBI - Gal _____
 Shut in: Instant _____ 5 Min _____ 15 Min _____ Cement Slurr Gal - BBI _____ Total Volume Gal - BBI 13+11+3+4+3

Frac Ring #1 _____ Frac Ring #2 _____ Frac Ring #3 _____ Frac Ring #4 _____
 THE INFORMATION STATED HEREIN IS CORRECT CUSTOMER'S REPRESENTATIVE SIGNATURE *Samuel E. Riv*



HALLIBURTON ENERGY SERVICES
HAL-1906-P

CHARGE TO
SAMUEL CRAIG JR Assoc

ADDRESS

CITY, STATE, ZIP CODE

CUSTOMER COPY
TICKET No. **185717**

PAGE 1 OF 2

SERVICE LOCATIONS 1. 25540	WELL PROJECT NO. 1-34	LEASE Gillet ONWD	COUNTY/PARISH CANAWAHS	STATE Ks	CITY/OFFSHORE LOCATION Protection	DATE 5-18-97	OWNER
2. 25535	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	NITROGEN JOB? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	CONTRACTOR Duke	RIG NAME NO 7	SHIPPED HES	DELIVERED TO well site	ORDER NO
3.	WELL TYPE 02	WELL CATEGORY 06	JOB PURPOSE 115	WELL PERMIT NO	WELL LOCATION LAND (34-32-19)		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LOC	ACCT	OF		EA	U/M	EA	U/M	
000 117		1			MILEAGE	EA	mi	140.00	3.20	410.00
000 119		1			CREW mileages	EA	mi	140.00	1.95	273.00
009-019		1			Pump Charge	6 hrs		810.00		996.00
RECEIVED AUG 22 1997 KANSAS CORPORATION COMMISSION CONSERVATION DIVISION WINTERVILLE, MO										

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

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?					1717
BEAN SIZE	SPACERS	WE UNDERSTOOD AND MET YOUR NEEDS?					FROM CONTINUATION PAGE(S)
TYPE OF EQUALIZING SUB.	CASING PRESSURE	OUR SERVICE WAS PERFORMED WITHOUT DELAY?					2070
TUBING SIZE	TUBING PRESSURE	WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?					3787
	WELL DEPTH	ARE YOU SATISFIED WITH OUR SERVICE?		<input type="checkbox"/> YES	<input type="checkbox"/> NO		SUB-TOTAL
TREE CONNECTION	TYPE VALVE						APPLICABLE TAXES WILL BE ADDED ON INVOICE
		<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) David E Rice	CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE) X [Signature]	HALLIBURTON OPERATOR/ENGINEER [Signature]	EMP # 48120	HALLIBURTON APPROVAL
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