

ORIGINAL

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

Operator: License # 5225
Name: Quinque Operating Company
Address P. O. Box 2738
Liberal, KS 67905-2738
City/State/Zip _____

Purchaser: N/A

Operator Contact Person: Michael Moore

Phone (316) 624-2578

Contractor: Name: Beredco, Inc.

License: 5147

Wellsite Geologist: Marvin Harvey

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD S10W Temp. Abd.
 Gas ENHR S16W
 Dry Other (Core, WSW, Expl., Cathodic, etc)

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

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

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

4-18-96 4-26-96 N/A
Spud Date Date Reached TD Completion Date

API NO. 15- 119-209600000

County Meade County, Kansas

W/2 - NW - NE Sec. 34 Twp. 34 Rge. 30 ^E

510 Feet from S/N (circle one) Line of Section

2490 Feet from E/W (circle one) Line of Section

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

Lease Name Adams Well # 1-34

Field Name Adams Ranch

Producing Formation N/A

Elevation: Ground 2654 KB 2666

Total Depth 6100' PBDT N/A

Amount of Surface Pipe Set and Cemented at 1497' 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/ _____ ex cnt.

Drilling Fluid Management Plan D&A JH 10-16-96
(Data must be collected from the Reserve Pit)

Chloride content 4350 ppm Fluid volume 120 bbls

Dewatering method used Hauled to disposal

Location of fluid disposal if hauled offsite: _____

Operator Name Nichols

Lease Name Nichols #2 License No. 285972

SW Quarter Sec. 30 Twp. 4N S Rng. 11E

County Beaver, OK Docket No. 13447

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 Michael Moore

NOTARY PUBLIC - State of Kansas
BEVERLY A. STAHL
My Appt. Expires 11-27-99

Title President Date 5-22-96

Subscribed and sworn to before me this 22 day of May
19 96

Notary Public Beverly A. Stahl

Date Commission Expires 11-27-99

OFFICE USE ONLY
 Letter of Confidentiality Attached
 Wireline Log Received
 Geologist Report Received
Distribution
 KCC SWD/Rep NEPA
 KGS Plug Other
(Specify)

WELL DATA
 FIELD _____ SEC _____ TWP. _____ RING _____ COUNTY Meade 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 LOGS	WEIGHT	SIZE	FROM	TO	MAXIMUM PSI ALLOWABLE
CASING			8 3/8	GL	1500	
LINER						
TUBING		OP	4 1/2	KB	1530	
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		

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

JOB DATA

CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE 4-26	DATE 4-27	DATE 4-27	DATE 4-27
TIME 2400	TIME 0300	TIME 0325	TIME 0600

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
O'bee	420041	Liberal, Ks
R. Burton	52938 / 1505	"
C. Ashby	50866 / 1505	Hopewell, Ks

DEPARTMENT Leann PTA
 DESCRIPTION OF JOB _____
 JOB DONE THRU: TUBING ANNULUS TBC/ANN.
 CUSTOMER REPRESENTATIVE Roger Pearson
 OPERATOR Dennis

CEMENT DATA

STAGE	NUMBER OF BAGS	CEMENT	BRAND	BULK BAGGED	ADDITIVES	YIELD CU FT / BK	MIXED LBS / GAL.
	125	60/40 Poz			2% Gel.	1.43	13.6

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
 PRESURISH: DBL. GAL. 10 BBL TYPE Water
 LOAD & BRON: BBL. GAL. _____ PAD: BBL. GAL. _____
 TREATMENT: BBL. GAL. _____ DISPL. DBL. GAL. 15.3
 CEMENT SLURRY: BBL. GAL. _____
 TOTAL VOLUME: BBL. GAL. _____
 2.79

REMARKS _____

JOB LOG HAL-2012-C

CUSTOMER *Quinn* WELL NO. *1-34* LEASE *Adams* JOB TYPE *Plg To Abandon* RECORD NO. *919505*

CHART NO.	TIME	RATE (GPM)	VOLUME (GAL)	PUMPS	PRESSURE (PSI)	TUBING	CABLE	DESCRIPTION OF OPERATION AND MATERIALS	
	2400								Time Collected
	0300								Time Ready
	0200								Time out of Rig Log Done DP
	0315								Rigged Hole w/ mud
	0325							1 st AT 1530 FT / 50 ^{SE}	
	0332							Hookups Pump Truck	ORIGINAL
	0333	10						Start Water Ahead	
	0336	12.7						Start Mixing Cement	
	0337	3						Start Spacers Behind	
	0340	15.3						Start Disp w/ mud	
								Shut Down	Break Loss
	0400							2 nd AT 600 FT / 40 ^{SE}	
	0404							Hookups Pump Truck	
	0406	10						Start Water Ahead	
	0408	10.18						Start Mixing Cement	
	0409	3						Start Spacers Behind	
	0410	7.79 mud						Start Disp w/ mud	
								Shut Down	Break Loss
	0640							3 rd AT 0-40 FT w 10 ^{SE}	
	0645							Hookups Pump Truck	
	0648	2.5						Start Mixing Cement	
								Complete Cement to Good Level	
	0650	2.5						4 th Plugs at 10 ^{SE} 15 th 1st Hole	
	0655	3.5						Finish Setting Plugs	
	0800								

Thanks Tom Collier Halliburton Energy Services
 Dennis Crow
 Crew



HALLIBURTON ENERGY SERVICES

HAL-1906-N

CHARGE TO: *Beredco Drilling*
 ADDRESS:
 CITY, STATE, ZIP CODE:

DUNCAN COPY

TICKET

No.

921498 - 6

PAGE 1 OF 2

SERVICE LOCATIONS 1. <i>Liberal</i>	WELL/PROJECT NO. <i>1-34</i>	LEASE <i>Adams</i>	COUNTY/PARISH <i>Meade</i>	STATE <i>Ky.</i>	CITY/OFFSHORE LOCATION	DATE <i>4-18-76</i>	OWNER <i>Quin Que</i>
2. <i>Hugoton</i>	TICKET TYPE <input checked="" type="checkbox"/> SERVICE	NITROGEN JOB? <input type="checkbox"/> YES	CONTRACTOR <i>Beredco Drilling</i>	RIG NAME/NO. <i>4</i>	SHIPPED VIA <i>HES</i>	DELIVERED TO <i>Meade Lake Rd</i>	ORDER NO.
3.	<input type="checkbox"/> SALES	<input checked="" type="checkbox"/> NO	WELL TYPE <i>02</i>	WELL CATEGORY <i>01</i>	JOB PURPOSE <i>010</i>	WELL PERMIT NO.	WELL LOCATION <i>34-345-30W</i>
4.	REFERRAL LOCATION	INVOICE INSTRUCTIONS					

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING LOC. ACCT. DEF.	DESCRIPTION	QTY.	U/M.	QTY.	U/M.	UNIT PRICE	AMOUNT
<i>000-117</i>			<i>MILEAGE</i>	<i>50</i>	<i>mi</i>	<i>1</i>		<i>2 85</i>	<i>142 50</i>
<i>000-119</i>			<i>Crew mileage</i>	<i>50</i>				<i>1 50</i>	<i>7 50</i>
<i>001-016</i>			<i>Pump Charge</i>	<i>1502</i>	<i>ft</i>	<i>6</i>	<i>hr</i>		<i>1320 00</i>
<i>12A</i>	<i>825.217</i>		<i>Guide Shoe</i>	<i>8 5/8</i>	<i>in</i>	<i>1</i>	<i>EA</i>		<i>216 00</i>
<i>24A</i>	<i>815.19902</i>		<i>Insert Float</i>	<i>8 5/8</i>	<i>in</i>	<i>1</i>	<i>EA</i>		<i>171 00</i>
<i>27</i>	<i>819.19414</i>		<i>Fill Assy</i>			<i>1</i>	<i>EA</i>		<i>64 00</i>
<i>41</i>	<i>806.61048</i>		<i>Centralizer</i>	<i>8 5/8</i>	<i>in</i>	<i>1</i>	<i>EA</i>		<i>61 00</i>
<i>320</i>	<i>806.71460</i>		<i>Basket</i>	<i>8 5/8</i>	<i>in</i>	<i>1</i>	<i>EA</i>		<i>124 00</i>
<i>350</i>	<i>890.10802</i>		<i>Weld A</i>	<i>1</i>	<i>lb</i>	<i>1</i>	<i>EA</i>		<i>16 75</i>

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

[Signature]
 DATE SIGNED: TIME SIGNED: A.M. P.M.

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

SUB SURFACE SAFETY VALVE WAS: <input type="checkbox"/> PULLED & RETURN <input type="checkbox"/> PULLED <input type="checkbox"/> RUN		SURVEY		AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL <i>2190 25</i>
TYPE LOCK	DEPTH	OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?					
BEAN SIZE	SPACERS	WE UNDERSTOOD AND MET YOUR NEEDS?					FROM CONTINUATION PAGE(S) <i>10365</i>
TYPE OF EQUALIZING SUB.	CASING PRESSURE	OUR SERVICE WAS PERFORMED WITHOUT DELAY?					<i>12555 25</i>
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
<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) <i>Charles K. Johnson</i>	CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE) <i>[Signature]</i>	HALLIBURTON OPERATOR/ENGINEER <i>Ron Crist</i>	EMP # <i>DT653</i>	HALLIBURTON APPROVAL
--	--	---	-----------------------	----------------------

JOB LOG HAL-2013-C

CUSTOMER		WELL NO.		LEASE		JOB TYPE		TICKET NO.	
BecedCo Drilling		1-34		Adams		010		921494	
CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS	
				T	C	TUBING	CASING		
	1935							Called Out - Ready Now	
	2100							ON LOC. Still Drilling	
	2310							Trip Out Hole	
	2415							Start Run Csg.	
	0128							Csg Run Hook To Circulate	
	0150							Hook To CMT	
	0156							START Lead CMT	
	0226						0-200	Lead CMT Pumped START Tail	
	0231	6	207				200-150	Tail CMT Pumped START Down Plug	
	0238	6	317					Plug	
	0235						0-300	START Displacement	
	0249	5	75				200-375	Slow Rate	
	0258	2	179				375-500	and Plug	
								Job Ended	
								Thankyou For Calling Halliburton	
								Ron Crist & Crew	



JOB SUMMARY

HALLIBURTON DIVISION Midcontinent
 HALLIBURTON LOCATION Liberal

BILLED ON TICKET NO. 921488

WELL DATA

FIELD _____ SEC. 34 TWP. 34S RNG. 30W COUNTY Meade 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	24	4 5/8	KB	1502	
LINER						
TUBING						
OPEN HOLE						SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

JOB DATA

CALLER OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE <u>4-18-96</u>	DATE <u>4-18-96</u>	DATE <u>4-19-96</u>	DATE <u>4-19-96</u>
TIME <u>1435</u>	TIME <u>2130</u>	TIME <u>2130</u>	TIME <u>0300</u>

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
FLOAT COLLAR <u>Insert</u>	<u>1</u>	<u>H</u>
FLOAT SHOE <u>Fill up</u>	<u>1</u>	
GUIDE SHOE <u>250</u>	<u>1</u>	<u>O</u>
CENTRALIZERS		
BOTTOM PLUG		<u>W</u>
TOP PLUG <u>5W</u>	<u>1</u>	
HEAD		<u>C</u>
PACKER		
OTHER <u>Weld A</u>	<u>1</u>	<u>D</u>

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
<u>R Crist</u>	<u>420045</u>	<u>Liberal Ks</u>
<u>D 7653</u>		
<u>C Carvalleson</u>	<u>5947</u>	<u>"</u>
<u>G 2569</u>	<u>75496</u>	<u>"</u>
<u>D Carpening</u>	<u>50757</u>	<u>Hogansville Ks</u>
<u>H 2441</u>	<u>75817</u>	
<u>R Taliaferro</u>	<u>3732</u>	<u>"</u>
	<u>7620</u>	

ORIGINAL

MATERIALS

TREAT. FLUID _____ DENSITY _____ LB/GAL. API
 DISPL. FLUID _____ DENSITY _____ LB/GAL. API
 PROP. TYPE _____ SIZE _____ LB.
 PROP. TYPE _____ SIZE _____ LB.
 ACID TYPE _____ GAL. _____ %
 ACID TYPE _____ GAL. _____ %
 ACID TYPE _____ GAL. _____ %
 SURFACTANT TYPE _____ GAL. _____ IN
 NE AGENT TYPE _____ GAL. _____ IN
 FLUID LOSS ADD. TYPE _____ GAL.-LB. _____ IN
 GELLING AGENT TYPE _____ GAL.-LB. _____ IN
 FRIC. RED. AGENT TYPE _____ GAL.-LB. _____ IN
 BREAKER TYPE _____ GAL.-LB. _____ IN
 BLOCKING AGENT TYPE _____ GAL.-LB. _____
 PERFPAC BALLS TYPE _____ QTY. _____
 OTHER _____
 OTHER _____

DEPARTMENT 5001
 DESCRIPTION OF JOB D/D
 JOB DONE THRU: TUBING CASING ANNULUS TBG/ANN.
 CUSTOMER REPRESENTATIVE X [Signature]
 HALLIBURTON OPERATOR Ron Crist COPIES REQUESTED _____

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
	<u>360</u>	<u>Midcon</u>		<u>2</u>	<u>3% CC 1/2" Floccle</u>	<u>3.23</u>	<u>11.1</u>
	<u>135</u>	<u>Prom Plug</u>		<u>13</u>	<u>2% C.C. 1/4" Floccle</u>	<u>1.34</u>	<u>14.8</u>

PRESSURES IN PSI

SUMMARY

VOLUMES

CIRCULATING _____ DISPLACEMENT _____ PRESLUSH: BBL.-GAL. _____ TYPE _____
 BREAKDOWN _____ MAXIMUM _____ LOAD & BKDN: BBL.-GAL. _____ PAD: BBL.-GAL. _____
 AVERAGE _____ FRACTURE GRADIENT _____ TREATMENT: BBL.-GAL. _____ DISPL. BBL.-GAL. 92.7
 SHUT-IN: INSTANT _____ 5-MIN _____ 15-MIN _____ CEMENT SLURRY: BBL.-GAL. 207 sk Level 32.2 Tail
 HYDRAULIC HORSEPOWER _____ TOTAL VOLUME: BBL.-GAL. _____

REMARKS

Cement Circulated To Bit

ORDERED _____ AVAILABLE _____ USED _____
 AVERAGE RATES IN BPM _____
 TREATING _____ DISPL. _____ OVERALL _____
 CEMENT LEFT IN PIPE _____
 FEET 41 REASON Shoe Joint

CUSTOMER

CUSTOMER Barclay 11-19
 LEASE Address
 WELL NO. 1-34
 JOB TYPE D/D
 DATE 4-18-96