

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 300

City/State/Zip Tulsa, OK 74102-0300

Purchaser: NN

Operator Contact Person: Raymond Hui

Phone (918) 561-3548

Contractor: Name: Cheyenne Drilling Co.

License: 5382

Wellsite Geologist: None

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. _____

4-4-97 4-7-97 7-17-97
Spud Date Date Reached TD Completion Date

API NO. 15-129-21486-00-00 ORIGINAL

County Morton

SW NE NE Sec. 8 Twp. 34S Rge. 40 E W

4030 FSL Feet from N (circle one) Line of Section

1250 FEL Feet from E/W (circle one) Line of Section

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

Lease Name Central Life A Well # 2

Field Name Hugoton

Producing Formation chase

Elevation: Ground 3355' KB _____

Total Depth 2744 PBTD 2693'

Amount of Surface Pipe Set and Cemented at 550' 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 cnt.

Drilling Fluid Management Plan AH 1, 3-13-98 U.C.
(Data must be collected from the Reserve Pit)

Chloride content 2400 ppm Fluid volume 600 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. _____

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 Raymond Hui

Title Analyst Date 7-20-97

Subscribed and sworn to before me this 20th day of July, 1997.

Notary Public Elizabeth Kinion ELIZABETH KINION

Date Commission Expires 2-26-2000

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)

Operator Name OXY USA Inc. Lease Name Central Life A Well # 2

Sec. 8 Twp. 34S Rge. 40 East West
 County Morton

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 checked="" type="checkbox"/> Log Formation (Top), Depth and Datums <input type="checkbox"/> Sample <table border="1"> <thead> <tr> <th>Name</th> <th>Top</th> <th>Datum</th> </tr> </thead> <tbody> <tr> <td>Hollenberg</td> <td>2390</td> <td>970</td> </tr> <tr> <td>Herington</td> <td>2426</td> <td>934</td> </tr> <tr> <td>Krider</td> <td>2458</td> <td>902</td> </tr> <tr> <td>Winfield</td> <td>2490</td> <td>870</td> </tr> <tr> <td>Towanda</td> <td>2568</td> <td>792</td> </tr> <tr> <td>Ft. Riley</td> <td>2626</td> <td>734</td> </tr> </tbody> </table>	Name	Top	Datum	Hollenberg	2390	970	Herington	2426	934	Krider	2458	902	Winfield	2490	870	Towanda	2568	792	Ft. Riley	2626	734
Name	Top		Datum																				
Hollenberg	2390		970																				
Herington	2426		934																				
Krider	2458	902																					
Winfield	2490	870																					
Towanda	2568	792																					
Ft. Riley	2626	734																					
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																						
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																						
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																						

List All E.Logs Run: Ran cased hole log

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	550	Class A	230 sx	3% CC
Production	7 7/8"	5 1/2"	14	2716	Class A	305 sx	3% CC

ADDITIONAL CEMENTING/SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated		Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) Depth	
	2	Her. 2443-2436'; Kri 2460-2464';	Acidized w/1800	2432-2522
	Win. 2518-2522'; Tow 2572-76'	gal. 7 1/2% HCL		
		Frac'd w/49000 gal. gel		

TUBING RECORD	Size <u>2 3/8"</u> Set At <u>2600</u> Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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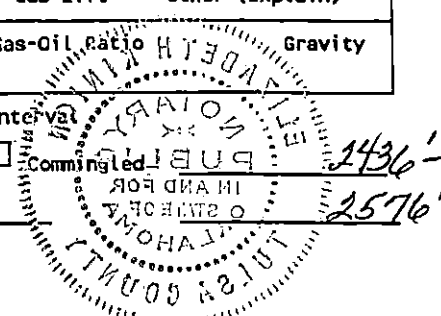
Date of First, Resumed Production, SWD or Inj. Pump Testing <u>Waiting for connection</u>	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf <u>563 CAOF</u>	Water Bbls.	Gas-Oil Ratio	Gravity
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Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)

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

Production Interval: Commingled Other (Specify)



OXY USA
CENTRAL LIFE A-2
SECTION 8-T34S-R40W
MORTON COUNTY, KANSAS

COMMENCED: 04-04-97
COMPLETED: 04-07-97

ORIGINAL

SURFACE CASING: 550' OF 8 5/8" CMTD
W/130 SKS MIDCON + 3% CC + 1/4 #/SK
FLOCELE. TAILED IN W/100 SKS
PREMIUM PLUS + 2% CC + 1/4 #/SK
FLOCELE.

FORMATION

15-129-21486

DEPTH

SURFACE HOLE	0 - 550
RED BED	550 - 1220
GLORIETTA	1220 - 1383
RED BED	1383 - 2744 RTD

I DO HEREBY CERTIFY THAT THE FOREGOING STATEMENTS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

CHEYENNE DRILLING, INC.

Wray Valentine

WRAY VALENTINE

STATE OF KANSAS : ss:

SUBSCRIBED AND SWORN TO BEFORE ME THIS 9TH DAY OF APRIL, 1997.

JOLENE K. RUSSELL

Jolene K. Russell
NOTARY PUBLIC



RECEIVED
KANSAS CORP. CO.
1997 SEP 12 P 1:28

15-129-21486

WELL NAME: CENTRAL LIFE A-2

SPUD DATE: 04-04-97 TIME: 12:15 PM

DEVIATION SURVEY : DEPTH: 550 ANG: 3/4 ° DEPTH: _____ ANG: _____
DEPTH: _____ ANG: _____ DEPTH: _____ ANG: _____

STD: 550 DATE: 04-04-97 TIME: 2:30 P.M.

PD DATE: 04-01-97 TIME: 5:00 P.M. DRLG OUT DATE: 04-05-97 TIME: 1:00 A.M.

T.D. 2744 DATE: 04-06-97 TIME: 9:45 P.M. PD DATE: 04-07-97 TIME: 7:00 A.M.

AMOUNT CEMENT CIRCULATED TO PIT: surface csg: 40 BBL prod csg: NONE

PIT CHLORIDE: 2400 PIT VOLUME: 200 BBL

CSG REPORT: SURFACE 550 HOLE SIZE: 14 3/4" MW: 9#

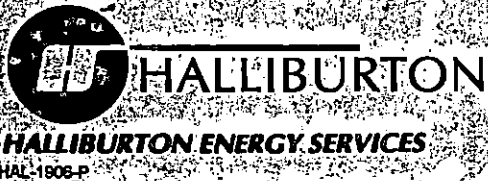
TOTAL PIPE ON LOCATION: JTS: 14 FEET: 619.46 threads off
PIPE LEFT OUT: -JTS: 2 FEET: 75.40
PIPE RAN IN HOLE: JTS: 12 FEET: 544.06
LANDING JT: +FEET: 5.94
TOTAL: FEET: 550.00

CSG REPORT: PRODUCTION RTD: 2744 HOLE SIZE: 7 7/8" MW: 9#

TOTAL PIPE ON LOCATION: JTS: 68 FEET: 2884.22 threads off
PIPE LEFT OUT: -JTS: 4 FEET: 173.53
PIPE RAN IN HOLE: JTS: 64 FEET: 2710.69
LANDING JT: +FEET: 5.31
TOTAL: FEET: 2716.00

RIG SUMMARY: (LOST CIRC, HOLE TROUBLE, ETC.)

ORIGINAL



CHARGE TO: *Org USA*

ADDRESS:

CITY STATE ZIP CODE:

ORIGINAL - DUNCAN COPY: TICKET No. 183694 - 5

PAGE 1 OF 1

SERVICE LOCATIONS 25540 <i>Liperal Ks</i>	WELL/PROJECT NO A2	LEASE <i>Central LITE</i>	COUNTY/PARISH MORTON	STATE Ks	CITY/OFFSHORE LOCATION	DATE 4-4-97	OWNER <i>Org USA</i>
25535 <i>Higotank</i>	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	NITROGEN JOB? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	CONTRACTOR	RIG NAME/NO <i>Cherone Pkg</i>	SHIPPED VIA <i>Loc</i>	DELIVERED TO	ORDER NO.
3	WELL TYPE 02	WELL CATEGORY 01	JOB PURPOSE <i>8 5/8 SURFACE</i>	WELL PERMIT NO.	WELL LOCATION <i>W of Pella Ks</i>		
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		41	MILEAGE	102		<i>mls</i>		3.20	326.40
000-119		1			<i>Green Mileage</i>	102		<i>mls</i>		1.95	198.90
001-016		1			<i>Pump choice</i>	550		<i>FT</i>			1025.00
030-018		1			<i>5ml Top Pkg</i>	1		<i>Eq</i>		210.00	210.00
24A	815-19502	1		32	<i>Center Shoe</i> Insert Float	1		<i>Eq</i>		188.00	188.00
27	815-19415	1			Fillup	1				70.00	70.00
41	806-61048	1			Centralizers	3				68.00	204.00
320	806-70060	1			Basket	1				161.00	161.00
66	806-72650	1			Fastgrip	1				18.00	18.00
350	890-15802	1			<i>Hardware A</i>	1		<i>lbs</i>		16.75	16.75

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 *Damaso Castillo*

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
TYPE LOCK	DEPTH	OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				
BEAN SIZE	SPACERS	WE UNDERSTOOD AND MET YOUR NEEDS?				
TYPE OF EQUALIZING SUB.	CASING PRESSURE	OUR SERVICE WAS PERFORMED WITHOUT DELAY?				
TUBING SIZE	TUBING PRESSURE	WELL DEPTH	WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?			
TREE CONNECTION	TYPE VALVE		ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO			
			<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND			

PAGE TOTAL: 2338.05

FROM CONTINUATION PAGE(S): 4746.97

7085.02

SUB-TOTAL APPLICABLE TAXES WILL BE ADDED ON INVOICE: 4239.39

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>Cal Wylie</i>	CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE) X	HALLIBURTON OPERATOR/ENGINEER <i>Liouoz Dennis Love</i>	EMP # 59179	HALLIBURTON APPROVAL <i>Larry Smith *</i>
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HALLIBURTON

TICKET CONTINUATION

ORIGINAL

TICKET No. 183694

HALLIBURTON ENERGY SERVICES

FORM 1911 R-10

DDM

CUSTOMER Oxy USA INC.

WELL Central Life A # 2

DATE 4-4-97

PAGE OF

PRICE REFERENCE	SECONDARY REFERENCE PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M	UNIT PRICE	AMOUNT
		LOC	ACCT	DF		QTY.	U/M			
504-282				41	Midcon Premium Plus	130	sks		17.06	2217.80
507-285	70.15250									
508-127	516.00335									
504-050	516.00265				Premium Plus Cement	100	sks		14.01	1401.00
509-406	890.50812				Calcium Chloride 3% w/130 midcon 2% w/100 prem plus	6	sks		46.90	281.40
507-210	890.50071				Flocele 1/2# w/130 midcon 1/4# w/100 prem plus	90	lbs		1.90	171.00
500-207					SERVICE CHARGE					
500-306					MILEAGE CHARGE					
					TOTAL WEIGHT					
					LOADED MILES					
					TON MILES					
					CUBIC FEET					
						255			1.55	395.25
									1.18	280.52

ORIGINAL

No. B 389247

CONTINUATION TOTAL 4746.97



JOB SUMMARY 4239-1

TICKET #	183694	TICKET DATE	4-4-97
BDA / STATE	Ks	COUNTY	Marion
PSL DEPARTMENT	5001	CUSTOMER REP / PHONE	
API / UWI #		JOB PURPOSE CODE	010 8 3/8 SURFACE

REGION	North America	NWA/COUNTRY	
MBU ID / EMP #	L10102 59179	EMPLOYEE NAME	Dennis's Garber
LOCATION	25540	COMPANY	Day USA
TICKET AMOUNT		WELL TYPE	
WELL LOCATION	W of Bell	DEPARTMENT	5001
LEASE / WELL #	A2 Central Lite	SEC / TWP / RNG	8/34S/40W

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 Garber	59179						
R Elwood	04360						

HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES
420041	102	50737	21				
53552		75817					
78202							

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

DATE	TIME	CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
4-4-97	1030	4-4-97	1400	4-4-97	1700

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY	MAKE
Float Collar <i>Input</i>	1	
Float Shoe <i>Fib 4</i>	1	
Guide Shoe <i>Reg</i>	1	
Centralizers	3	
Bottom Plug		
Top Plug	1	
Head	1	
Packer <i>Basket</i>	1	
Other <i>Harvester A</i>	1	

WELL DATA

NEW/USED	WEIGHT	SIZE	FROM	TO	MAX ALLOW
Casing	24	8 3/4	KB	550	
Liner					
Liner					
Tbg/D.P.					
Tbg/D.P.					
Open Hole		12 3/4	6L	550	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	
Perpac Balls	Qty.	
Other		
Other		
Other		
Other		

HOURS ON LOCATION		OPERATING HOURS		DESCRIPTION OF JOB
DATE	HOURS	DATE	HOURS	
				8 3/8 SURFACE
TOTAL		TOTAL		

ORIGINAL

HYDRAULIC HORSEPOWER
 Avail. _____ Used _____
AVERAGE RATES IN BPM
 Disp. _____ Overall _____
CEMENT LEFT IN PIPE
 Reason *Shoe Joint*

CEMENT DATA

STAGE	SACKS	CEMENT	BULK/SKS	ADDITIVES	YIELD	LBS/GAL
	100	Prem Plus	Mild Case	3% CC 1/2 # Flocc	3.22	11.1
	100	Prem Plus		2% CC 1/4 # Flocc	1.32	14.8

Circulating _____	Displacement _____	Preflush: Gal - BBI _____	Type _____
Breakdown _____	Maximum _____	Load & Bkdn: Gal - BBI _____	Pad: BBI - Gal _____
Average _____	Frac Gradient _____	Treatment Gal - BBI _____	Disp: BBI - gal 32.0
Shut In: Instant _____	5 Min _____ 15 Min _____	Cement Slurr Gal - BBI _____	
		Total Volume Gal - BBI 98.0	

TICKET #	183694	TICKET DATE	4-14-97
REGION	North America	NWA/COUNTRY	
MBU ID / EMP #	L10102. 5174	EMPLOYEE NAME	Donna Lingo
LOCATION	30910	COMPANY	Dayco
TICKET AMOUNT		WELL TYPE	
WELL LOCATION	Wolf Hill	DEPARTMENT	3001
LEASE / WELL #	AL 2000 LITE	SEC / TWP / RNG	5 / 24 E / 41 W
BDA / STATE	Ks	PSL DEPARTMENT	5001
COUNTY	Marion	CUSTOMER REP / PHONE	
API / UWI #		JOB PURPOSE CODE	010 471 SURFACE

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	C	Tbg	Csg	
	1030							Time Collected
	1400							Time out of hole
	1430							Time Ready
								Start Pumping Cement
	1615							Casing in Hole
	1615							Hookup To Circulate Casing
	1621							Circulate Casing w/ Rig Pump
	1622							Circulate Mud to General Level
	1630							Hookup To Pump Truck
	1633	6				200		Start Mixing Cement
	1642		74.5			150		Start Tail Cement
	1647		23.5			150		Final Mixing Cement
	1648		98.0 total			10		Start Cement Pump Plug
	1649	3				75		Start Displacement
	1700		32.0			200/500		Plug Done
								WASH Pumps + Lines
								Float Hole
								Circulate Cement to PER
								270 BBL / 35 5/8"

Thanks For Calling
 Halliburton Energy
 Dennis [Signature]
 Crew

ORIGINAL



HALLIBURTON ENERGY SERVICES
HAL-1906-P

CHARGE TO:
Oxy USA Inc
ADDRESS:
CITY, STATE, ZIP CODE:

ORIGINAL - DUNCAN COPY TICKET

No. 183877-1

RECEIVED
USAG COR.

PAGE 1 OF 2

SERVICE LOCATIONS 1. <i>025540</i>	WELL/PROJECT NO. <i>2</i>	LEASE <i>Central Life A</i>	COUNTY/PARISH <i>Morton</i>	STATE <i>KS</i>	CITY/OFFSHORE LOCATION <i>Rolla</i>	DATE <i>4-7-97</i>	OWNER <i>Same</i>
2. <i>025535</i>	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	NITROGEN JOB? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	CONTRACTOR <i>Cheyenne Drly #8</i>	RIG NAME/NO.	SHIPPED VIA <i>CT</i>	DELIVERED TO <i>Well site</i>	ORDER NO.
3.	WELL TYPE <i>02</i>	WELL CATEGORY <i>01</i>	JOB PURPOSE <i>035</i>	WELL PERMIT NO.	WELL LOCATION <i>Land</i>		
4.	REFERRAL LOCATION	INVOICE INSTRUCTIONS					

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT	
		LOC	ACCT	OF								
000-117				41	MILEAGE	102			MI	RT	3.20	326.40
000-119				41	Crew Mileage	102			MI	RT	1.95	198.90
001-016				41	Pump Charge	2693		6	HR		1680.00	1680.00
030-016				41	S.W. Top plug			1	EA	5/8 in	60.00	60.00
12A	825.205			32	Guide Shoe			1	EA	5/8 in	121.00	121.00
018-315				41	Mud Flush	500		1	EA		.75	375.00
218-517				41	SSO-21	3		1	EA		33.00	99.00
314-163				41	Clay Sx 11	3		1	EA		30.50	91.50
313-396				41	BE-6	1		1	EA		83.00	83.00
045-050				85	Compupac	1		1	day		660.00	660.00
24A	815.19251			32	Insert float	1		1	EA	5/8 in	121.00	121.00
27	815.19311			32	Fill up Ass	1		1	EA	5/8 in	76.00	76.00

ORIGINAL

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

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

X

DATE SIGNED	TIME SIGNED	<input type="checkbox"/> A.M. <input type="checkbox"/> P.M.	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	3891.80
			TYPE LOCK	DEPTH	OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?			FROM CONTINUATION PAGE(S)	9340.54
			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?			13232.34
			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	7605.64
I <input type="checkbox"/> do <input type="checkbox"/> do not require IPC (Instrument Protection). <input type="checkbox"/> Not offered			<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>Cal Wylie</i>	CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE) <i>X</i>	HALLIBURTON OPERATOR/ENGINEER <i>John Woodrow</i>	EMP #	HALLIBURTON APPROVAL <i>Larry Smith *</i>
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HALLIBURTON ENERGY SERVICES

TICKET CONTINUATION

ORIGINAL

TICKET No. 183877

FORM 1911 R-10

CUSTOMER mg OXY USA INC. WELL Central Life A #2. DATE 04-06-97 PAGE 2 OF 2

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QUANTITY				UNIT PRICE	AMOUNT	
		LOG	ACCT	DF		QTY.	U/M	QTY.	U/M			
504-282				41	Midcon Premium Plus Cement	405	sk	12	sk	17.06	6909.30	
507-285	70.15250					761	1b					
508-127	516.00335					8	sk					
507-210	890.50071			41	Flocele 1/2" W/ 405	101	1b			1.90	191.90	
509-406	890.50812			41	Calcium Chloride 2" W/ 405	8	sk			46.90	375.20	
40	806.60022			32	Centralizers	10	EA	5 1/2	in	67.00	670.00	
SERVICE CHARGE					CUBIC FEET							
500-207								448		1.55	694.40	
500-306					MILEAGE CHARGE	TOTAL WEIGHT	LOADED MILES	TON MILES				
						40334	21	423.507		1.18	499.74	

ORIGINAL

No. B 389253

CONTINUATION TOTAL 9340.54



JOB SUMMARY 4239-1

TICKET # 193877	TICKET DATE 4-7-97
BDA / STATE KS	COUNTY Morton
PSL DEPARTMENT Cmt	CUSTOMER REP / PHONE Cal Wyle
API / UWI # 15129214860000	JOB PURPOSE CODE 035

REGION North America	NWA/COUNTRY USA
MBU ID / EMP # L10104 G3601	EMPLOYEE NAME O. McHane
LOCATION W Kolla	COMPANY Oxy Usa Inc
TICKET AMOUNT	WELL TYPE 02
WELL LOCATION Land	DEPARTMENT Cmt
LEASE / WELL # Central Life A 2	SEC / TWP / RNG 8 34 40

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
J. Woodrow 62573							
L. Patterson 18760							

HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES
420044	102						
53554-76900	102						
4115-75237	21						

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
4-6-97	1845	4-6-97	2200	

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY	MAKE
Float Center Insert 5/8	1	H
Float Shoe		
Guide Shoe Reg 5/8	1	O
Centralizers 5/8	10	
Bottom Plug		W
Top Plug 5W 5/8	1	
Head PIC 5/8	1	C
Packer		
Other		O

WELL DATA

	NEW/USED	WEIGHT	SIZE	FROM	TO	MAX ALLOW
Casing	N	14	5 1/2	KB	2693	
Liner						
Liner						
Tbg/D.P.						
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	
Perpac Balls	Qty.	
Other		
Other		
Other		
Other		

HOURS ON LOCATION		OPERATING HOURS		DESCRIPTION OF JOB
DATE	HOURS	DATE	HOURS	
				See Job Log
TOTAL		TOTAL		

ORDERED _____ HYDRAULIC HORSEPOWER _____
 TREATED _____ AVERAGE RATES IN BPM _____
 FEET **22.5** CEMENT LEFT IN PIPE _____ Overall _____
 Reason **Shoe Joint**

CEMENT DATA

STAGE	SACKS	CEMENT	BULK/SKS	ADDITIVES	YIELD	LBS/GAL
1	280	Mdcon P+	B	2% CC 1/4# /sk Flocele	3.22	11.1
2	125	Mdcon P+	B	2% CC 1/4# /sk Flocele	1.84	13.2

Circulating _____ Displacement _____ Preflush: Gal - **(BB) 12** Type **Mud Wash**
 Breakdown _____ Maximum _____ Load & Bkdn: Gal - **BB1** Pad: **BB1** Gal _____
 Average _____ Frac Gradient _____ Treatment Gal - **BB1** Disp: **(BB)** Gal **65.3**
 Shut In: Instant _____ 5 Min _____ 15 Min _____ Cement Slurr Gal - **(BB) K.C 10.15 T.C 41**
 Total Volume Gal - **BB1**

Frac Ring #1 _____ Frac Ring #2 _____ Frac Ring #3 _____ Frac Ring #4 _____
 THE INFORMATION STATED HEREIN IS CORRECT CUSTOMER'S REPRESENTATIVE SIGNATURE _____



JOB LOG 4239-5

TICKET # 143477	TICKET DATE 4-7-77
BDA / STATE KS	COUNTY
PSL DEPARTMENT	
CUSTOMER REP / PHONE	
API / UWI #	
JOB PURPOSE CODE	

REGION North America	NWA/COUNTRY
MBU ID / EMP #	EMPLOYEE NAME
LOCATION	COMPANY
TICKET AMOUNT	WELL TYPE
WELL LOCATION	DEPARTMENT
LEASE / WELL #	SEC / TWP / RNG

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	C	Tbg	Csg	
	1845							Called for Job
	2000							Job Ready
	2200							On location with Pump truck & Bulk truck Rig still On
	2242							Rig has hole - Cut
	2320							Start tripping out D.P
	0230							Start running Log & Float Equip
	0420							Log on Bottom
	0429							Hook up P/C & Circulating Iron through Circulating Hook up to Halliburton
								<u>Job Procedure 5 1/2 Long String</u>
	633	6	12			X	0/100	Run mud Flush Ahead
	636	7	166.2			X	0/119	Start Lead Cement @ 11.1
	700	7	62				121	Start Tail Cement @ 13.2
	707							through mixing Cement
	707							Shut Down & Release top plug
	11							Wash up pumps & lines
	711	7	66			X	66	Start Displacement
	11						300	Max P/T Before Plug Lands
	721					X	50/1078	Plug Landed Release Float
	723							Release float held

ORIGINAL

Thank You

Danny & Woody & Lou