

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

API NO. 15-129-21488 <sup>0000</sup>  
County Morton  
SW NE NE Sec. 12 Twp. 34S Rge. 41 X E W

ORIGINAL

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. \_\_\_\_\_  
4-7-97 4-9-97 6-7-97  
Spud Date Date Reached TD Completion Date

4030 FSL Feet from S/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 Bolt A Well # 2  
Field Name Hugoton  
Producing Formation Chase  
Elevation: Ground 3379 KB \_\_\_\_\_  
Total Depth 2620' PBTD 2606'  
Amount of Surface Pipe Set and Cemented at 567 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 AH-1, 3-10-98, 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: 9-12-97  
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 7-19-97  
Subscribed and sworn to before me this 19th day of July, 1997.  
Notary Public Elizabeth Kinion ELIZABETH KINION  
Date Commission Expires 2-25-2000

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

Operator Name OXY USA Inc. Lease Name Bolt A Well # 2

Sec. 12 Twp. 34S Rge. 41  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="0"> <tr> <td>Name</td> <td>Top</td> <td>Datum</td> </tr> <tr> <td>Chase</td> <td>2264</td> <td>2356</td> </tr> </table>	Name	Top	Datum	Chase	2264	2356
Name	Top		Datum					
Chase	2264		2356					
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: <u>Ran cased hole log</u>								

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	567	Class A	230	3% CC
Production	7 7/8"	5 1/2"	14	2619	Class A	390	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	Holl. 2264-68'; Herr. 2302-2306;	Acidized w/600 gal.	2264-2356
	Kri. 2323-2329; Win. 2354-56	7 1/2% HCL		
		Frac'd w/1010 bbls. gel		

TUBING RECORD	Size <u>2 3/8"</u> Set At <u>2356'</u> Packer At :	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
---------------	--	--

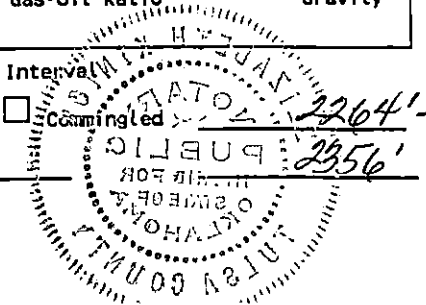
Date of First, Resumed Production, SWD or Inj. Pump Testing Waiting for connection	Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
---	--

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

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: 2264'-2356'





**HALLIBURTON ENERGY SERVICES**  
HAL-1906-P

CHARGE TO: *Oxy USA Inc.*  
ADDRESS: *Oxy USA Inc.*  
CITY, STATE, ZIP CODE: *Wichita, KS 67201*

ORIGINAL - DUNCAN COPY TICKET

No. 183697 - 8

PAGE 1 OF 1

SERVICE LOCATIONS: 1. *25540 Liberal, KS*  
2. *25535 Haggston, KS*  
3. *3.*  
4. *4.*

WELL/PROJECT NO.: *2#* LEASE: *Bolet A* COUNTY/PARISH: *Moxton* STATE: *KS* CITY-OFFSHORE LOCATION: *12 D 1:20* DATE: *4-7-97* OWNER: *Oxy USA*

TICKET TYPE:  SERVICE  SALES NITROGEN JOB?  YES  NO CONTRACTOR: *Revenue Dels 8* RIG NAME/NO.: *Revenue Dels 8* SHIPPED VIA: *Lo* DELIVERED TO: *Lo* ORDER NO.: *Lo*

WELL TYPE: *02101* WELL CATEGORY: *010* JOB PURPOSE: *8 1/2 SURFACE* WELL PERMIT NO.: *W of Polka*

REFERRAL LOCATION: *02101* INVOICE INSTRUCTIONS: *010 8 1/2 SURFACE*

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT	
		LOC	ACCT	DF								
<i>000-117</i>	<i>ORIGINAL</i>	<i>1</i>		<i>41</i>	<i>MILEAGE</i>	<i>104</i>		<i>miles</i>		<i>3.20</i>	<i>332.80</i>	
<i>000-119</i>		<i>1</i>		<i>41</i>	<i>Crew Mileage</i>	<i>104</i>		<i>miles</i>		<i>1.95</i>	<i>202.80</i>	
<i>001-016</i>		<i>1</i>		<i>41</i>	<i>Pump charge</i>	<i>573</i>		<i>FT</i>			<i>1025.00</i>	
<i>030-018</i>		<i>1</i>		<i>41</i>	<i>5w Top Flg</i>	<i>1</i>		<i>End</i>	<i>8 1/2</i>	<i>130.00</i>	<i>130.00</i>	
<i>24A</i>		<i>815-19502</i>	<i>1</i>		<i>32</i>	<i>Insert Flant</i>	<i>1</i>		<i>End</i>	<i>8 1/2</i>	<i>188.00</i>	<i>188.00</i>
<i>27</i>		<i>815-19415</i>	<i>1</i>		<i>32</i>	<i>Films</i>	<i>1</i>				<i>70.00</i>	<i>70.00</i>
<i>41</i>		<i>806-61048</i>	<i>1</i>		<i>32</i>	<i>Centralizers</i>	<i>3</i>				<i>68.00</i>	<i>204.00</i>
<i>380</i>		<i>806-71460</i>	<i>1</i>		<i>32</i>	<i>Basket</i>	<i>1</i>				<i>139.00</i>	<i>139.00</i>
<i>66</i>	<i>806-72750</i>	<i>1</i>		<i>32</i>	<i>Fps Grip</i>	<i>1</i>				<i>23.50</i>	<i>23.50</i>	
<i>350</i>	<i>890-10802</i>	<i>1</i>		<i>32</i>	<i>Household A</i>	<i>1</i>		<i>lbs</i>		<i>16.75</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

*X* *Damaso* *6/8/97*

DATE SIGNED: *6/8/97* TIME SIGNED: *6:00 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	<i>2331</i>	<i>85</i>
FROM CONTINUATION PAGE(S)	<i>4709</i>	<i>78</i>
	<i>7041</i>	<i>63</i>
SUB-TOTAL APPLICABLE TAXES WILL BE ADDED ON INVOICE	<i>4212</i>	<i>131</i>

**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): *X* CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE): *Lio102 Damasco* HALLIBURTON OPERATOR/ENGINEER: *Larry Smith* EMP #: *59179* HALLIBURTON APPROVAL: *Larry Smith \**



HALLIBURTON ENERGY SERVICES

TICKET CONTINUATION

ORIGINAL

TICKET No. 183697

FORM 1911 R-10

ing	CUSTOMER	WELL	DATE	PAGE	OF
	QXY USA INC.	Bolt A #2	04-07-97		

PRICE REFERENCE	SECONDARY REFERENCE / PART NUMBER	ACCOUNTING			DESCRIPTION	WELL				UNIT PRICE		AMOUNT		
		LOC	ACCT.	DF		QTY.	U/M	QTY.	U/M					
504-050	516.00265			41	Premeium Fluid Cement	100	sk			14	01	1401	00	
504-282					Midcon Premium Plus Cement	130	sk			17	06	2217	80	
507-285	70.15250					244	lb							
508-127	516.00335					2	sk							
507-210	890.50071				Flocele 1/2"AW/ 130, 1/4"AW/ 100	90	lb			1	90	171	00	
509-406	890.50812				Calcium Chloride 3/4"AW/ 130, 2/4"AW/ 100	5	sk			46	90	234	50	
					ORIGINAL									
500-207					SERVICE CHARGE	CUBIC FEET 253				1	55	392	15	
500-306					MILEAGE CHARGE	TOTAL WEIGHT 22599	LOADED MILES 22	TON MILES 248.5868			1	18	293	33

APPROVED  
 RECEIVED  
 11/17/97  
 1:20

No. B 389257

CONTINUATION TOTAL 4709 78

## JOB SUMMARY 4239-1

TICKET #	183697	TICKET DATE	4-7-97
BDA / STATE	Ks	COUNTY	Morton
PSL DEPARTMENT	5001	CUSTOMER REP / PHONE	
API / UWI #		JOB PURPOSE CODE	010 2 1/2 SURFACE

REGION	North America	NWA/COUNTRY	
MBU ID / EMP #	L10102	EMPLOYEE NAME	D. Garcia 59179
LOCATION		COMPANY	Oxy USA
TICKET AMOUNT		WELL TYPE	02 GAS
WELL LOCATION	W of Rolla	DEPARTMENT	5001
LEASE / WELL #	2 <sup>nd</sup> BALT A	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
D. Garcia	59179	Chad Hovick					
C. Nicholas							

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	104	50806 - 75505	22				
53552 - 78202	104						

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
	4-7	4-7	4-7	4-7
TIME	0120	1530	1815	1915

### TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY	MAKE
Float Collar <i>Insert End</i>	1	Hauger
Float Shoe <i>Fisher</i>	1	
Guide Shoe		
Centralizers	3	
Bottom Plug <i>Fisher</i>	1	
Top Plug	1	
Head	1	
Packer <i>Basket</i>	1	
Other <i>Hauger tools</i>	148	

### WELL DATA

	NEW/USED	WEIGHT	SIZE	FROM	TO	MAX ALLOW
Casing		24	8 3/4	KB	573	
Liner						
Liner						
Tbg/D.P.						
Tbg/D.P.						
Open Hole			12 1/4	GL	573	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	
				2 1/2 SURFACE
TOTAL		TOTAL		

ORDERED	HYDRAULIC HORSEPOWER	Avail.	Used
TREATED	AVERAGE RATES IN BPM	Disp.	Overall
FEET 42	CEMENT LEFT IN PIPE	Reason	Shoe bit

### CEMENT DATA

STAGE	SACKS	CEMENT	BULK/SKS	ADDITIVES	YIELD	LBS/GAL
	130	Mid Gas	P+	3% CC 1/2 # Floccle	3.22	11.1
	100	Perm H12		2% CC 1/4 # Floccle	1.32	14.8

Circulating Breakdown	Displacement Maximum	Preflush: Gal - BBI	Type
Average	Frac Gradient	Load & Bkdn: Gal - BBI	Pad: BBI - Gal
Shut In: Instant	5 Min 15 Min	Treatment Gal - BBI	Disp: BBI - Gal 37.8
		Cement Slurr Gal - BBI 48.05	
		Total Volume Gal - BBI	

TICKET #	182697	TICKET DATE	4-7-97
REGION	North America	NWA/COUNTRY	
MBU ID / EMP #	Lizma	EMPLOYEE NAME	Sharon 9174
LOCATION		COMPANY	Quinta
TICKET AMOUNT		WELL TYPE	Oil Well
WELL LOCATION	1000	DEPARTMENT	010
LEASE / WELL #	1000	SEC / TWP / RNG	1000
BDA / STATE	K	PSL DEPARTMENT	5001
COUNTY	Moata	CUSTOMER REP / PHONE	
API / UWI #		JOB PURPOSE CODE	010 2 1/2 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
1000	1000		

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL)(GAL)	PUMPS		PRESS. (psi)		JOB DESCRIPTION / REMARKS
				T	C	Tbg	Csg	
	0120							Time Called
	1500	1600						Time Ready
	1530							Time out
	1715							Start Pump Casing
	1815							Casing in hole
	1815							Hookup to Curb
	1825							Curb to Casing by the Pump
	1821							Curb to Mud to Ground Level
	1840							Hookup to Pump Truck
	1845	6				150		Start Mixing Cement
	1855		74.55			185		Start Tall Cement
	1901		23.05			200		Finish Mixing Cement
	1902		98.05			10		Shut Down
	A03	4				75		Start Displacement
	A15	38g	33.8			240		Pl. Displacement
						100		Foot Hold
								518.00 / Cement to the P. 31.50

Thanks For Calling Halliburton Energy Services  
 Dennis GRIE - Lead

ORIGINAL



**HALLIBURTON ENERGY SERVICES**  
HAL-1906-P

CHARGE TO: **Oxy USA FPC**  
ADDRESS: \_\_\_\_\_  
CITY, STATE, ZIP CODE: \_\_\_\_\_

ORIGINAL - DUNCAN COPY TICKET

No. 185447 - 9

RECEIVED  
KANSAS CORP

PAGE 1 OF 2

SERVICE LOCATIONS 1. <b>LIBERAL KS</b> 2. <b>MUGTON KS</b> 3. 4.	WELL/PROJECT NO. <b>A-2</b>	LEASE <b>BOLT</b>	COUNTY/PARISH <b>MORTON</b>	STATE <b>KS</b>	CITY/OFFSHORE LOCATION <b>12 D 1-21</b>	DATE <b>4-9-97</b>	OWNER <b>SAME</b>
TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	NITROGEN JOB? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	CONTRACTOR <b>CHEYENNE</b>	RIG NAME/NO. <b>CHEYENNE 8*</b>	SHIPPED <b>PA.</b>	DELIVERED TO <b>LOCT</b>	ORDER NO. <b>15129214880000</b>	
WELL TYPE <b>02</b>	WELL CATEGORY <b>01</b>	JOB PURPOSE <b>035</b>	WELL PERMIT NO.	WELL LOCATION <b>LAND</b>			

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT	
		LOC	ACCT	DF		U/M	U/M				
000-117				41	MILEAGE	104	mi	1	unit	3.20	332.80
000-119				41	CREW MILEAGE	104	mi	1	unit	1.95	202.80
001-016				41	PUMP CHARGE	2619	FT	6	HR	1680	1680
030-016				41	5w Top Plug	5 1/2	IN	1	EA	60	60
12A	825.205			32	REGULAR SADE	"	"	"	"	121	121
24A	815.19251			32	INSERT FLOAT VALVE	"	"	"	"	121	121
27	815.19311			32	FILLUP ASSY	"	"	"	"	76	76
40	806.60022			32	CENTRALIZERS	"	"	10	EA	67	670
330	806.71430			32	CEMENT BASKET	"	"	1	EA	116	116
218-517				41	SSO 21M	PER GAL		3	GAL	33	99
018-315				41	mud flush	PER GAL		500	GAL	.75	375
018-303				41	CLAY Fix II	PER GAL		3	GAL	30.50	91.50

ORIGINAL

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

**X**

DATE SIGNED: \_\_\_\_\_ TIME SIGNED: \_\_\_\_\_  
 A.M.  
 P.M.

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

SUB SURFACE SAFETY VALVE W/S:  
 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**

AGREE  UN-DECIDED  DIS-AGREE

OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?

WE UNDERSTOOD AND MET YOUR NEEDS?

OUR SERVICE WAS PERFORMED WITHOUT DELAY?

WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?

ARE YOU SATISFIED WITH OUR SERVICE?  
 YES  NO

CUSTOMER DID NOT WISH TO RESPOND

PAGE TOTAL	3945.10
FROM CONTINUATION PAGE(S)	8422.37
	12367.47
SUB-TOTAL APPLICABLE TAXES WILL BE ADDED. ON INVOICE	7396.20

**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): **CAL WYLIE O**

CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE): \_\_\_\_\_

HALLIBURTON OPERATOR/ENGINEER: **Je Broadfoot** EMP # **14604**

HALLIBURTON APPROVAL: **Larry Smith \***



TICKET CONTINUATION

ORIGINAL

TICKET No. 185447

HALLIBURTON ENERGY SERVICES

FORM 1911 R-10

CUSTOMER	WELL	DATE	PAGE	OF
QXY USA INC.	Bolt A #2	04-08-97	2	2

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE	AMOUNT
		LOC	ACCT	DF		U/M	U/M		
504-282				41	Midcon Premium Plus Cement	390	sk	17.06	6653.40
507-285	70.15250					733	lb		
508-127	516.00335					7	sk		
509-406	890.50812				Calcium Chloride 2%W/ 390	7	sk	46.90	328.30
507-210	890.50071				Flocele 1/4W/ 390	98	lb	1.90	186.20
313-396		1			BE-6	PER LB	1 LB	83	83
500-207					SERVICE CHARGE	CUBIC FEET	431	1.55	668.05
500-306					MILEAGE CHARGE	TOTAL WEIGHT	38784	LOADED MILES	22
						TON MILES	426.6284		503.42

ORIGINAL

No. B 389263

CONTINUATION TOTAL 8422.31



North America

102741 4-9-97

NWA/COUNTRY: **MID CONTINENT** BDA/STATE: **Ks.** COUNTY: **MORTON**

EMPLOYEE NAME: **TIM BROADFOOT** PSL DEPARTMENT: **CEMENT**

LOCATION: **LIBERAL KS.** COMPANY: **LES** CUSTOMER REP / PHONE: **316-272-2032**

WELL TYPE: **02** API / UWI #: **1512914880000**

DEPARTMENT: **CEMENT** JOB PURPOSE CODE: **035**

SEC / TWP / RNG: **12-345-41W**

BUILD / EMP #: **10101 - 24604**

WELL LOCATION: **SEC 12-345-41W**

WELL NAME: **ALT A-2**

EMP NAME/EMP#(EXPOSURE HOURS)	HRS	EMP NAME/EMP#(EXPOSURE HOURS)	HRS	EMP NAME/EMP#(EXPOSURE HOURS)	HRS	EMP NAME/EMP#(EXPOSURE HOURS)	HRS
<b>BROADFOOT 24604</b>							
<b>CRIST 27653</b>							
<b>WHITE</b>							

HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES
<b>7242</b>	<b>114</b>						
<b>747-75496</b>	<b>114</b>						
<b>737-75505</b>	<b>44</b>						

Well Name: \_\_\_\_\_ Type: \_\_\_\_\_

Well Thickness: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Well Type: \_\_\_\_\_ Set At \_\_\_\_\_

Well Hole Temp: \_\_\_\_\_ Pressure \_\_\_\_\_

Data: \_\_\_\_\_ Total Depth \_\_\_\_\_

DATE	CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
	<b>2030</b>	<b>2400</b>	<b>0425</b>	<b>0520</b>

WELL DATA						
	NEW/USED	WEIGHT	SIZE	FROM	TO	MAX ALLOW
Casing	<b>N</b>	<b>14</b>	<b>5 1/2</b>	<b>KB</b>	<b>2619</b>	
Inner CS6	<b>U</b>	<b>24</b>	<b>8 5/8</b>	<b>GL</b>	<b>573</b>	
Liner						
Tbg/D.P.						
Open Hole			<b>7 1/8</b>	<b>573</b>	<b>2620</b>	SHOTS/FT.
Perforations						
Perforations						
Perforations						

TOOLS AND ACCESSORIES		
TYPE AND SIZE	QTY	MAKE
at Collar <b>INSERT</b>	<b>1</b>	<b>H</b>
at Shoe <b>FillUp</b>	<b>1</b>	
de Shoe <b>REGULAR</b>	<b>1</b>	<b>O</b>
tralizers <b>1</b>	<b>10</b>	
om Plug		<b>W</b>
Plug <b>5W</b>	<b>1</b>	
<b>CMT BASKET</b>	<b>1</b>	<b>C</b>
er		
or		<b>O</b>

HOURS ON LOCATION		OPERATING HOURS		DESCRIPTION OF JOB
DATE	HOURS	DATE	HOURS	
				<b>ORIGINAL</b>
<b>TOTAL</b>		<b>TOTAL</b>		

MATERIALS		
Fluid	Density	Lb/Gal
Fluid	Density	Lb/Gal
Type	Size	Lb.
Type	Size	Lb.
Type	Gal.	%
Type	Gal.	%
Ant	Gal.	In
Int	Gal.	In
oss	Gal/Lb	In
Agent	Gal/Lb	In
d.	Gal/Lb	In
	Gal/Lb	In
Agent	Gal/Lb	
Balls	Qty.	

ORDERED	HYDRAULIC HORSEPOWER	Used
	Avail.	
TREATED	AVERAGE RATES IN BPM	Overall
	Disp.	
FEET <b>13.45</b>	CEMENT LEFT IN PIPE	
	Reason <b>SHOE JT.</b>	

ACKS	CEMENT	BULK/SKS	ADDITIVES	YIELD	LBS/GAL
<b>265</b>	<b>MUDCON PLUS</b>	<b>B</b>	<b>2% C.C. - 1/4" 1/2" 7/16" CELE</b>	<b>3.22</b>	<b>11.1</b>
<b>125</b>	<b>11</b>	<b>11</b>	<b>11</b>	<b>1.87</b>	<b>13.2</b>

Displacement: \_\_\_\_\_ Preflush: Gal **(BB) 10** Type **MUD FLUSH**

Maximum: \_\_\_\_\_ Load & Bkdn: Gal - **BB** Pad: **BB** Gal

Frac Gradient: \_\_\_\_\_ Treatment: Gal - **BB** Disp: **(BB)** Gal **63.6**

Instant: \_\_\_\_\_ 5 Min \_\_\_\_\_ 15 Min \_\_\_\_\_ Cement Slurr: Gal **(BB) 152-41**

Total Volume: Gal - **BB**

Frac Ring #2 \_\_\_\_\_ Frac Ring #3 \_\_\_\_\_ Frac Ring #4 \_\_\_\_\_

FORMATION STATED HEREIN IS CORRECT

CUSTOMER'S REPRESENTATIVE SIGNATURE \_\_\_\_\_