

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 # 4549

Name: ANADARKO PETROLEUM CORPORATION

Address P. O. BOX 351

City/State/Zip LIBERAL, KANSAS 67905-0351

Purchaser: ANADARKO ENERGY SERVICES

Operator Contact Person: SHAWN D. YOUNG

Phone (316) 624-6253

Contractor: Name: NA

License: NA

Wellsite Geologist: NA

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: ANADARKO PETROLEUM CORPORATION

Well Name: MATKIN A-3

Comp. Date 10-14-98 Old Total Depth 6748

Deepening Re-perf. Conv. to Inj/SWD
 Plug Back 4010 PBDT
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. D-27,663

5-15-99 -- 7-8-99
Spud Date of Rework start. Date Reached TD Completion Date

API NO. 15- 175-21749-0001

County SEWARD

- C - SE - SW Sec. 34 Twp. 34 Rge. 34 X W

660 Feet from S (circle one) Line of Section

1980 Feet from X/W (circle one) Line of Section

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

Lease Name MATKIN "A" Well # 3

Field Name WIDEAWAKE

Producing Formation TOPEKA

Elevation: Ground 2900 KB --

Total Depth 6748 PBDT 4010

Amount of Surface Pipe Set and Cemented at 1710 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 Rework, 7-20-99 UC.
(Data must be collected from the Reserve Pit) NOT APPLICABLE

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. _____

RECEIVED
STATE CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
Wichita, Kansas
JUL 14 1999

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 Shawn D. Young
SHAWN D. YOUNG

Title DIVISION PRODUCTION ENGINEER Date 7/12/99

Subscribed and sworn to before me this 12th day of July 19 99.

Notary Public Shirley Childers

Date Commission Expires _____



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)

ORIGINAL

SIDE TWO

Operator Name ANADARKO PETROLEUM CORPORATION Lease Name MATKIN "A" Well # 3

Sec. 34 Twp. 34 Rge. 34 East West County SEWARD

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:

Log Formation (Top), Depth and Datums Sample
Name Top Datum

SEE ATTACHED ORIGINAL ACO-1

** Original Completion 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"	23.0	1710	P+ MIDCON 2/ PREM PLUS	310/ 100	3%CC, 1/4#SK FLC/ 2%CC, 1/4#SK FLC.
** PRODUCTION	7-7/8"	5-1/2"	15.5	6748	50/50 POZ	145	.75% HALAD 322, 10% SALT, 1/4#SK FLC.

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input checked="" type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	3554-4044	50/50 POZ.	150	

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	3904-3944, 3762-3802	ACID W/ 5000 GAL 15% HCL	3762-3944

TUBING RECORD	Size NONE	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumed Production, SWD or Inj. NONE: SI WAITING ON INJ. ORDER. Producing Method Flowing Pumping Gas Lift Other (Explain)

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

3762-3944 OA

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

Operator: License # 4549

Name: ANADARKO PETROLEUM CORPORATION

Address P. O. BOX 351

City/State/Zip LIBERAL, KANSAS 67905-0351

Purchaser: NONE-SIGW

Operator Contact Person: DAVID W. KAPPLE

Phone (316) 624-6253

Contractor: Name: NORSEMAN DRILLING

License: 3779

Wellsite Geologist: _____

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD SIOW 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. _____

8-24-98 9-4-98 10-14-98
Spud Date Date Reached TD Completion Date

API NO. 15- 175-21749

County SEWARD

C - SE - SW Sec. 34 Twp. 34 Rge. 34 X E W

660 Feet from X S (circle one) Line of Section

1980 Feet from X N (circle one) Line of Section

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

Lease Name MATKIN "A" Well # 3

Field Name WIDEAWAKE

Producing Formation TORONTO

Elevation: Ground 2900.0 KB _____

Total Depth 6748 PBTD 4395

Amount of Surface Pipe Set and Cemented at 1710 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
(Data must be collected from the Reserve Pit)

Chloride content 900 ppm Fluid volume 700 bbls

Dewatering method used DRY, BACKFILL & RESTORE LOCATION

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

_____ Quarter Sec. _____ Twp. _____ S Rng. _____ E/W

County _____ Docket No. _____

STATE CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WICHITA, KANSAS
RECEIVED
JUL 14 1998

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 L. Max Harvey
Title DRILLING TECHNICAL ASSISTANT Date 12-8-98
Subscribed and sworn to before me this 8th day of December 19 98.
Notary Public Linda D. Hering
Date Commission Expires _____

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)

ORIGINAL

SIDE TWO

Operator Name ANADARKO PETROLEUM CORPORATION Lease Name MATKIN "A" Well # 3
 Sec. 34 Twp. 34 Rge. 34 East County SEWARD
 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: CBL-CCL-GR (4), DIL, CNL-LDT-ML, 3 ARM SONIC.

<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datums <input type="checkbox"/> Sample		
Name	Top	Datum
CHASE	2617	
COUNCIL GROVE	2996	
HEEBNER	4283	
TORONTO	4314	
LANSING	4436	
MARMATON	5152	
CHEROKEE	5474	
MORROW	5832	
CHESTER	6138	
STE. GENEVIEVE	6436	
ST. LOUIS	6518	
SPERGEN	6706	

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
SURFACE	12-1/4"	8-5/8"	23.0	1710	P+ MIDCON 2/ PREM PLUS	310/100	3%CC, %SK FLC/ 2%CC, %SK FLC.
PRODUCTION	7-7/8"	5-1/2"	15.5	6748	50/50 POZ	145	.75% HALAD 322, 10% SALT, %SK FLC.

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input checked="" type="checkbox"/> Protect Casing	SQUEEZE PERFS 6402-6408	CLASS II	150	0.6% HALAD 9.
<input type="checkbox"/> Plug Back TD	PROTECT CSG. 4060-4409			
<input checked="" type="checkbox"/> Plug Off Zone		CLASS II	75	6%GEL, 0.7% HALAD 322.

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	
	Size	Set At	Liner Run	Depth
2	6558-6564, 6572-6577, 6591-6602, CIBP @ 6553.		NONE	
2	6436-6443, 6459-6469, 6471-6480, 6485-6494, 6508-6514, CIBP @ 6431.		NONE	
2	6402-6408, SQUEEZED.		NONE	
2	6376-6387, CIBP @ 6250.		ACID: 1100 GAL 15% HCL.	6376-6387
2	4360-4370.		ACID: 2000 GAL 15% HCL.	4360-4370
TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumed Production, SWD or Inj. NONE-SIGW		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 TSTH Mcf	Water Bbls. 504	Gas-Oil Ratio Gravity

Disposition of Gas: TO BE Vented Sold Used on Lease (If vented, submit ACO-18.)
 METHOD OF COMPLETION Open Hole Perf. Dually Comp. Comingled Other (Specify) _____
 Production Interval: 4360-4370

CASING MECHANICAL INTEGRITY TEST

Application #D27670

DOCKET ORIGINAL

Disposal Enhanced Recovery:

SE SW, Sec 34, T 34 S, R 34 XE/W

Repressuring
Flood
Tertiary

660 Feet from South Section Line
3300 Feet from East Section Line

Date injection started _____
API #15 - 175 - 21749

Lease Matkin "A" Well # 3 SWD
County Seward

Operator: Anadarko Petroleum Corp.
Name &
Address P. O. Box 351
Liberal, KS 67905-0351

Operator License # 4549
Contact Person Chad McAllaster
Phone (316) 629-4307

Max. Auth. Injection Press. 0 psi; Max. Inj. Rate 1200 bbl/d;
If Dual Completion - Injection above production -- Injection below production --

Size	Conductor	Surface	Production	Liner	Size	Tubing
Set at		8-5/8"	5-1/2"		2-3/8"	
Cement Top		1710'	6748'		Set at	3524'
" Bottom		Surface	3528'		Type	IPC
		1710'	4050'			

DV/Perf. Relief Hole 3555' TD (and plug back) TD 6748' (PBSD 4010') ft. depth
Packer type Arrow Set Size 5-1/2" X 2-3/8" Set at 3525

Zone of injection Topeka ft. to ft. 3762'-3944' OA Perf. or open hole Perforation

Type Mit: Pressure Radioactive Tracer Survey Temperature Survey

F Time: Start _____ Min. _____ Min. _____ Min.
I
E Pressures: _____ Set up 1 System Pres. during test _____
L _____ Set up 2 Annular Pres. during test _____
D _____ Set up 3 Fluid loss during test _____ bbls.

T Tested: Casing or Casing - Tubing Annulus

The bottom of the tested zone is shut in with _____

Test Date _____ Using _____ Company's Equipment

The operator hereby certifies that the zone between _____ feet and _____ feet was the zone tested

Signature _____ Title _____

The results were Satisfactory , Marginal _____, Not Satisfactory _____

State Agent Gary Winter Title PT Witness: Yes No _____

REMARKS: _____

Origin. Conservation Div.; KDHE/T; Dist. Office;
 Computer Update

STATE COMMISSION

JUL 14 1999

KCC Form U-7 6/84



JOB SUMMARY

ORDER NO. 70006

TICKET #	TICKET DATE
67977	5-17-99

REGION North America	NWA/COUNTRY Mid Continent	BDA / STATE KS	COUNTY Seward
MBU ID / EMP # MCLT0101 106322	EMPLOYEE NAME D. McLane	PSL DEPARTMENT ZT	ORIGINAL
LOCATION Liberal	COMPANY Anadarko	CUSTOMER REP / PHONE	
TICKET AMOUNT	WELL TYPE 11	API / UWI #	
WELL LOCATION W Liberal	DEPARTMENT ZE	JOB PURPOSE CODE 075	
LEASE / WELL # Matka A-3	SEC / TWP / RING 34 34 34		

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. McLane 106322	10	R. Ferguson 106164	20				
S. Tate 105953	10	J. Anderson 105415					
B. Spahr 106212	10	M. Heston 106226					
J. Bunda 105970							

HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES
420995	10	420789	10				
54038-77941	10	421756	10				
54029-6610	20						
421022-2165	10						

Form Name _____ Type: _____
 Form Thickness _____ From _____ To _____
 Packer Type E25U Set At H033
 Bottom Hole Temp. _____ Pressure _____
 Misc. Data _____ Total Depth _____

DATE	CALLLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
5-17-99	0400	0700	0840	1400

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY	MAKE
Float Collar		
Float Shoe		
Guide Shoe		
Centralizers		
Bottom Plug		
Top Plug		
Head		
Packer 5/8 E251	1	Hes
Other Star Guide 5/8	1	Hes

WELL DATA

	NEW/USED	WEIGHT	SIZE	FROM	TO	MAX ALLOW
Casing	U	15.5	5 1/2	64		
Liner						
Liner						
Tbg/D.P.	U	6.5	2 7/8	64	4033	
Tbg/D.P.						
Open Hole						SHOTS/FT.
Perforations					3555	
Perforations					4043	
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. _____	ln _____
NE Agent _____	Gal. _____	ln _____
Fluid Loss _____	Gal/Lb _____	ln _____
Gelling Agent _____	Gal/Lb _____	ln _____
Fric. Red. _____	Gal/Lb _____	ln _____
Breaker _____	Gal/Lb _____	ln _____
Blocking Agent _____	Gal/Lb _____	ln _____
Perfpac Balls _____	Qty. _____	
Other _____		
Other _____		
Other _____		
Other _____		

HOURS ON LOCATION		OPERATING HOURS		DESCRIPTION OF JOB
DATE	HOURS	DATE	HOURS	
				CONSERVATION DIVISION Wichita, Kansas RECEIVED JUL 14 1999 SECTION
TOTAL		TOTAL		

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

CEMENT DATA

STAGE	SACKS	CEMENT	BULK/SKS	ADDITIVES	YIELD	LBS/GAL
	100	60/60 P-2 (4)	B	2% Labal Gel 10% Salt 4% Cal seal 8% H ₂ O - 32.2	1.30	14.4

Circulating _____	Displacement _____	Preflush: Gal - BBI 8-10-8	Type H ₂ O - M.F. - H ₂ O
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 23	
		Total Volume Gal - BBI _____	

Frac Ring #1 _____	Frac Ring #2 _____	Frac Ring #3 _____	Frac Ring #4 _____
--------------------	--------------------	--------------------	--------------------

THE INFORMATION STATED HEREIN IS CORRECT

CUSTOMER'S REPRESENTATIVE SIGNATURE



JOB LOG

ORDER NO. 70006

TICKET #

57977

TICKET DATE

5-17-99

REGION North America	NWA/COUNTRY MO of Oklahoma	BDA / STATE KS	COUNTY S. Sedel
MBU ID / EMP # 106322	EMPLOYEE NAME D. Williams	PSL DEPARTMENT 25	ORIGINAL
LOCATION 2.1 km	COMPANY Halliburton	CUSTOMER REP / PHONE	
TICKET AMOUNT	WELL TYPE 11	API / UWI #	
WELL LOCATION 2.1 km	DEPARTMENT 25	JOB PURPOSE CODE 075	
LEASE / WELL # 106322	SEC / TWP / RNG 34S 34W		

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. Williams 106322	R. Johnson 106134		
S. T. K. 105753	J. Armstrong 105815		
G. S. K. 105212	D. Williams 106276		
J. S. K. 105870			

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL)(GAL)	PUMPS		PRESS. (psi)		JOB DESCRIPTION / REMARKS
				T	C	Top	Csg	
	0700							on location will 50.5kg sweetening set up pump truck
	0730							Loggers running in hole 1. set Bridge plug
	0815							Loggers running in hole to 4045
	0837							logger out of hole
	0840							Hook up pump truck
	0842					1/2500		Pressure test lines
	0844	4-2	83			1/500		Try to Circulate well
	0857					500/1200		hole backed with 52 Bbls
	0915							shut down
	1019							Loggers in hole inf 5355
	1040							set E2SV at 4035
	1145							Start E2SV with 52 Bbls
	1154	1	8	✓		700		String in to E2SV
	1203	2	10	✓		460		Take in section 1012
	1210	2	8	✓		475		mix cement
	1214							mix cement
	1215	2		✓		475		Run cement
	1225	2	23	✓		0		Finish cement
	1225							Wash pump line to PIT
	1228	2						Start Disp
	1244	2	22 1/2	✓		1000		Finish Disp LAST CIR with 16 Bbl in
	1245							String out of E2SV
	1246							Lay Down 17 ft
	1300		73			70		Hook up & Recess out Top NO CMT
	1348		1/4	✓		160		1250 OK
	1350							Balance 031
	1400							Lay Down Top
	1400							Job over

RECEIVED STATE CORPORATION COMMISSION

JUL 1 1999

CONSERVATION DIVISION Wichita, Kansas



HALLIBURTON

JOB LOG 4239-5

TICKET #	TICKET DATE
BDA / STATE	COUNTY
PSL DEPARTMENT	
CUSTOMER REP / PHONE	
API / UWI #	
JOB PURPOSE CODE	

ORIGINAL

REGION North America	NW/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	
	0430							Call out
	0730							on Location
	0900							Safety Meeting
	0910	3	13					Load Annules
	0915							Ann Loaded Leak off Head
	0917						500	Load Ann
	0925	3/4	3			650	500	Pump Acid
	0929	1	Total			650	500	Pump Water Displacement
	0941	1.5	12			600	500	Acid on Parts
	0949	1.5	(20)					Shut Down order CMT 50SKS 50/50 Poz
	1130							CMT on Loc
	1141						500	Load Ann
	1144	1 3/4	4			550	500	Inc Rate
	1149	1 3/4	11.5				500	Pump CMT 50/50 Poz
	1155							Shut Down w/ Pump Lines
	1158	1.5	8.5			200	500	Start Disp
	1200	1/4	8.5			200	500	Caught CMT
	1205	1/4	10out			600	500	Disp
	1207	1/4	11out			750	500	"
	1215	1/4	13 out			1000	500	Shut Down
	1216	1/4	34			1000	500	Pump
	1223	1/4	14out			1000	500	Pump
	1237	1/4	14.5 out			1000	500	Pump
	1244		14.5 out			1000	500	Pump
	1245	1/4	3.5 out			1000	500	Shut Down
	1301		15 out					
	1325					1000	500	Pump
	1337						500	Release PSI
	1340					1000	500	Press up
	1345	2	25					Reverse out Full 10STS
	1421					500		Press up
	1425							Shut in

RECEIVED STATE CORPORATION COMMISSION

MAR 14 1990

CONSERVATION DIVISION Wichita, Kansas

Thank you
Ron & Woody