

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

API NO. 15- 175-21,391 ⁰⁰⁻⁰⁰
County SEWARD
 - C - NE - NE Sec. 10 Twp. 34S Rge. 34 X W ^E

Operator: License # 4549

ORIGINAL

660 Feet from X/N (circle one) Line of Section

Name: ANADARKO PETROLEUM CORPORATION

660 Feet from E/X (circle one) Line of Section

Address P. O. BOX 351

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

City/State/Zip LIBERAL, KANSAS 67905-0351

Lease Name MCGILL "A" Well # 2-10

Purchaser: TO BE DETERMINED

Field Name ADAMSON

Operator Contact Person: J. L. ASHTON

Producing Formation CHESTER

Phone (316) 624-6253

Elevation: Ground 2907.5 KB 2919

Contractor: Name: NORSEMEN DRILLING, INC.

Total Depth 6584 PBTD 6537

License: 3779

Amount of Surface Pipe Set and Cemented at 1655 Feet

Wellsite Geologist: NA

Multiple Stage Cementing Collar Used? Yes X No

Designate Type of Completion
X New Well Re-Entry Workover

If yes, show depth set Feet

 Oil SWD SLOW Temp. Abd.
 Gas ENHR X SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Alternate II completion, cement circulated from

If Workover:

feet depth to w/ sx cmt.

Operator:

Drilling Fluid Management Plan ALT 1 2-1-95
(Data must be collected from the Reserve Pft)

Well Name:

Chloride content 87,500 ppm Fluid volume 5000 bbls

Comp. Date Old Total Depth

Dewatering method used NATURAL EVAPORATION

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

Location of fluid disposal if hauled offsite:

Operator Name

4/19/94 4/29/94 6/6/94
Spud Date Date Reached TD Completion Date

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 Leslie I. Barnes
Title SR. TECHNICAL ASSISTANT Date 8/10/94
Subscribed and sworn to before me this 11th day of August, 1994.
Notary Public Kathryn A. Rowley
Date Commission Expires 8-1-96

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received

Distribution
 XCC SWD/Rep NGPA
 KGS Plug Other (Specify)

KATHRYN A. ROWLEY
Notary Public - State of Kansas
My Appl. Expires 8-1-96

Form ACO-1 (7-91)
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KANSAS CORPORATION COMMISSION
8-12-1994
AUG 12 1994

CONSERVATION DIVISION
WICHITA, KS

SIDE TWO

Operator Name ANADARKO PETROLEUM CORPORATION Lease Name MCGILL "A" Well # 2-10

Sec. 10 Twp. 34S Rge. 34W 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.)

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

List All E.Logs Run: **COMPENSATED NEUTRON SPECTRALOG**
SBT GAMMA RAY
BOREHOLE COMPENSATED DUAL INDUCTION
ACOUSTIC CALIPER
ENHANCED DECONVOLUTION MINI

DUAL INDUCTION 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	1655	50/50 POZ/COM	600/200	4% GEL, 2%CC, 1/4# FLOCELE / 2%CC
PRODUCTION	7 7/8	5 1/2	15.5	6584	65/35 POZ/THXST	50/250	1/4# SX FLOCELE / 1/4#SX FLOC, 5%KCL

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	6326-6380	ACIDIZE IN 2' INTERVALS W/100 GALS 15% FEHCL ACID/FT- TOTAL ACID=5400 GALS 6326-80 FRAC W/51,800 GALS BORATE CROSSLINKED 2% KCL WTR AND 200,000# 20/40 SD 6326-80

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2 3/8	6295		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumed Production, SWD or Inj. SI WO PRODUCTION EQUIPMENT, WO PIPELINE
 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	--	4000	--	--	--

Disposition of Gas: **METHOD OF COMPLETION** Vented Sold Used on Lease (If vented, submit ACO-18.)
Production Interval Open Hole Perf. Dually Comp. Commingled 6326 - 6380
 Other (Specify) _____

ATTACHMENT

MCGILL "A" NO. 2-10
SECTION 10-34S-34W
SEWARD COUNTY, KANSAS

ORIGINAL

FORMATION

TOP

BASE STONE CORRAL	1695
CHASE	2673
COUNCIL GROVE	3023
LANSING	4454
MARMATON	5160
CHEROKEE	5356
MORROW	5760
L. MORROW	5990
CHESTER	6035
L. CHESTER	6294
B. CHESTER	6320
ST. GENEVIEVE	6406
ST. LOUIS	6421

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CONSTITUTION DIVISION
KANSAS CORPORATION COMMISSION

ORIGINAL

NORSEMAN DRILLING, INC.
WICHITA, KANSAS
DRILLERS' WELL LOG

WELL NAME: MCGILL A-2
SECTION 10-34S-34W
SEWARD COUNTY, KANSAS
COMMENCED: APRIL 19, 1994
COMPLETED: APRIL 30, 1994
OPERATOR: ANADARKO PETROLEUM CORPORATION

Depth		Formation	Remarks
From	To		
0	1134	Sand & Redbed	Ran 38 jts of 24#
1135	1297	Glorietta Sand	8 5/8" csg set @
1298	2549	Redbed & Shale	1655'; w/600 SX of
2550	6570	Lime-Shale	50/50 pozmix; 4%-D20,; 2% SI; 1/4# SX D-29; Tailed with 200 SX Class H; 2% SI; 1/4# SX D-29; Plug down at 4:15 p.m. on 04/20/94.

Ran 156 jts 5 1/2" 15.5#, Set @ 6584'; Cement w/50 SX
65/35 pozmix; 1/4# SX Floceal; Tailed w/250 SX
Thixset; Prem. H; 1/4# SX Floceal; Plug down at 7:00
p.m., on 04/30/94

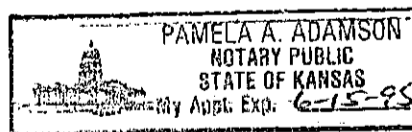
STATE OF KANSAS)I, the undersigned, being duly sworn on
)oath, state that the above Drillers' Well
)Log is true and correct to the best of my
COUNTY OF SEDGWICK)knowledge and belief and according to the
)records of this office.

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NORSEMAN DRILLING, INC.
James P. Reilly
JAMES P. REILLY, PRESIDENT

Subscribed & sworn to before me this

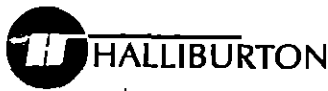
May 3, 1994



My Appointment Expires:

June 15, 1995

Pamela A. Adamson
Pamela A. Adamson, Notary Public
340 Seville
Wichita, KS 67209



JOB LOG FORM 2013 R-4

DATE 4-30-94
TICKET NO. 677408

CUSTOMER: Anadarko Pet. WELL NO.: A-2 LEASE: ME Gill JOB TYPE: 5 1/2 L.S.

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0700							Called out - Rechecked 1000
	1000							ON Loc. - L.D.D.P.
	1245							Rig-up & Safety Meeting
	1711							Run Csg.
	1752							Hook-up to circ.
	1754	2-6	20				450	Pump 2% KCl - Reciprocate
		6	30					Pump MF
		6	20					Pump 2% KCl
	1806	6-3	20				450	Pump SCAVENGER cont. @ 10 1/2%
	1812	3-6	67				300	Pump tail cont. - last circ. @ 30 1/2%
	1824	6-0						Shut down - Drop plug - Wash-up tank
	1829	0-6	154					Pump Displ. - regain circ. @ 70 1/2%
	1852	5-2					500/400	REDUCE RATE
	1856	2					400/150	Plug landed - Stop Reciprocate
							150/100	Press on plug
								Release press. - float held
								Thanks
								Tom & crew

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WICHITA, KS



HALLIBURTON JOB SUMMARY

HALLIBURTON DIVISION Mud Services
 HALLIBURTON LOCATION Liberal, KS

BILLED ON TICKET NO. 621

WELL DATA

FIELD _____ SEC _____ TWP _____ RNG _____ COUNTY Seward 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 6485

	NEW USED	WEIGHT	SIZE	FROM NAME	TO	MAXIMUM ALLOWABLE
CASING	<u>N</u>	<u>15.5</u>	<u>5/2</u>	<u>KB</u>	<u>6499</u>	
LINER						
TUBING						
OPEN HOLE						SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

JOB DATA

TOOLS AND ACCESSORIES		
TYPE AND SIZE	QTY.	MAKE
FLOAT COLLAR		
FLOAT SHOE		
GUIDE SHOE		
CENTRALIZERS		
BOTTOM PLUG		
TOP PLUG		
HEAD		
PACKER		
OTHER		

CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE	DATE	DATE	DATE
TIME	TIME	TIME	TIME
<u>4:30 94</u>	<u>4:30 94</u>	<u>4:30 94</u>	<u>4:30 94</u>
<u>0700</u>	<u>1000</u>	<u>1752</u>	<u>1856</u>

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 _____
 FLUID LOSS ADD. TYPE _____ GAL-LB _____
 GELLING AGENT TYPE _____ GAL-LB _____
 FRIC RED. AGENT TYPE _____ GAL-LB _____
 BREAKER TYPE _____ GAL-LB _____
 BLOCKING AGENT TYPE _____ GAL-LB _____
 PERFPAC BALLS TYPE _____ GAL-LB _____
 OTHER _____
 OTHER _____

PERSONNEL AND SERVICE UNITS		
NAME	UNIT NO. & TYPE	LOCATION
<u>J. Woodrow 6273</u>	<u>40016</u>	<u>LIBERAL KS</u>
<u>T. POYER 48120</u>	<u>"</u>	<u>"</u>
<u>T. DAVIS F4550</u>	<u>51076 100 PCN 116700</u>	<u>"</u>
<u>R. GARRISON 62729</u>	<u>50866/BUC 175565</u>	<u>WAGGON KS</u>
<u>A. HOWE F7343</u>	<u>52807/BUC 175807</u>	<u>"</u>

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DEPARTMENT Cement
 DESCRIPTION OF JOB Cement sp. Production Casing
 JOB DONE THRU: TUBING CASING ANNULUS TBG/ANN.
 CUSTOMER REPRESENTATIVE X J.R. Sloan
 HALLIBURTON OPERATOR J. Woodrow COPIES REQUESTED _____

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
	<u>50</u>	<u>6 1/2% oil pre-mix</u>	<u>Mace</u>		<u>68 BBL OF C, 1/2 BBL of</u>	<u>2.23</u>	<u>10.0</u>
	<u>250</u>	<u>pre-mix TRISERT</u>		<u>B</u>	<u>SP. SOL. IN MACE</u>	<u>1.51</u>	<u>14.8</u>

PRESSURES IN PSI

SUMMARY

VOLUMES

CIRCULATING _____ DISPLACEMENT _____
 BREAKDOWN _____ MAXIMUM _____
 AVERAGE _____ FRACTURE GRADIENT _____
 SHUT-IN: INSTANT _____ 5-MIN _____ 15-MIN _____
 HYDRAULIC HORSEPOWER _____
 ORDERED _____ AVAILABLE _____ USED _____
 TREATING _____ DISPL _____ OVERALL _____
 FEET 34 REASON PERMIT FLOW

PREFLUSH (BBL) 20 KCL WATER TYPE _____
 LOAD & BKDN: BBL 33 KCL WATER PAD: BBL-GAL _____
 TREATMENT: BBL-GAL _____ DISPL (BBL) 154
 CEMENT SLURRY: BBL-GAL 30 LC 67 TC
 TOTAL VOLUME: BBL-GAL 810

REMARKS

A-10 PERMITS
 LEASE M-C Gill
 WELL NO. A-2
 JOB TYPE C-15 LEASE STRAIGHT DATE 4-30-94



HALLIBURTON

HALLIBURTON ENERGY SERVICES

FORM 1906 R-13

CHARGE TO: ANADARKO Petroleum
 ADDRESS: _____
 CITY, STATE, ZIP CODE: _____

COPY

TICKET WF

No. 677408 - 6

PAGE 1 OF 2

SERVICE LOCATIONS 1. <u>25540</u>	WELL/PROJECT NO. <u>A-2</u>	LEASE <u>McGill</u>	COUNTY/PARISH <u>Seward</u>	STATE <u>KS</u>	CITY/OFFSHORE LOCATION	DATE <u>4-30-94</u>	OWNER
2. <u>255180</u>	TICKET TYPE <input checked="" type="checkbox"/> SERVICE	NITROGEN JOB? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	CONTRACTOR <u>NORSEMAN</u>	RIG NAME/NO. <u>51</u>	SHIPPED VIA <u>CT</u>	DELIVERED TO <u>WELLCITE</u>	ORDER NO.
3.	WELL TYPE <u>01</u>	WELL CATEGORY <u>01</u>	JOB PURPOSE <u>035</u>	WELL PERMIT NO.	WELL LOCATION		
4.	REFERRAL LOCATION	INVOICE INSTRUCTIONS					

PRICE REFERENCE	SECONDARY REFERENCE PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT		UNIT PRICE	AMOUNT
		LOC	ACCT	DF			U/M		U/M		
000-117					MILEAGE	2	EA	33	mi	2.75	181.50
001-016					Pump Chg.	6499	ft	6	hrs		2070.00
314-163					Clay Fix II	EA	gal	4	gal	24.00	96.00
018-315					Mud Flush	EA	gal	1260	00	65	819.00
030-016					Top plug	1	EA	5 1/2	in		60.00
12A	825.205				Guide shoe	1	EA	5 1/2	in		121.00
24A	815.19251				insert that vlr.	"	"	"	"		110.00
27	815.19311				Fillup Assy.	"	"	"	"		55.00

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 WICHITA, KS

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. CUSTOMER OR CUSTOMER'S AGENT SIGNATURE <u>X [Signature]</u>	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 <u>3512.50</u> <u>3608.50</u> FROM CONTINUATION PAGE(S) <u>5686.53</u> <u>9199.103</u> <u>9295.103</u> SUB-TOTAL APPLICABLE TAXES WILL BE ADDED ON INVOICE
	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?			
DATE SIGNED	TIME SIGNED	<input type="checkbox"/> A.M. <input type="checkbox"/> P.M.	TUBING SIZE	TUBING PRESSURE	WELL DEPTH	WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?	
<input type="checkbox"/> do <input type="checkbox"/> do not require IPC (Instrument Protection). <input type="checkbox"/> Not offered			TREE CONNECTION	TYPE VALVE		ARE YOU SATISFIED WITH OUR SERVICE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
<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)	CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE)	HALLIBURTON OPERATOR/ENGINEER	EMP #	HALLIBURTON APPROVAL
	<u>X [Signature]</u>	<u>J. Wood Row</u>	<u>12573</u>	

state statute to the extent of

HALLIBURTON

TICKET CONTINUATION

ORIGINAL

TICKET No.

HALLIBURTON ENERGY SERVICES

CUSTOMER
APC

WELL
McGill A-2

DATE
4-30-94

PAGE	OF
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ation is made in
1911 R-9
ton, Texas

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION					UNIT PRICE	AMOUNT	
		LOC	ACCT	DF		QTY.	U/M	QTY.	U/M			
504-043	516.00272				Premium Cement	250	sk			9 44	2,360	00
504-118					Halliburton Light Cement	50	sk			8 40	420	00
504-043	516.00272				Premium Cement							
506-105	516.00286				Pozmix "A" (17)							
506-121	516.00259				Halliburton Gel B (6%)							
507-210	890.50071				Flocele B/ 1/2# W/ 300	75	lb			1 40	105	00
508-101	70.15347				Thixset "A" B/ 1% W/ 250	235	lb			5 35	1,257	25
508-103	516.00541				Thixset "B" B/ 1/2% W/ 250	59	lb			9 45	557	55
508-002	70. 15302				Potassium Chloride B/ 5% W/ 250	450	lb			27	121	50
500-207					SERVICE CHARGE			CUBIC FEET	305	1 35	411	75
500-306					MILEAGE CHARGE	TOTAL WEIGHT 28,930	LOADED MILES 33	TON MILES	477.349	95	453	48

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WICHITA, KS

CONTINUATION TOTAL

CEMENTING SERVICE REPORT

Schlumberger

WF

Dowell

DOWELL SCHLUMBERGER INCORPORATED

TREATMENT NUMBER 03-12-6110 DATE 4-20-94
 STAGE DS DISTRICT WYSSSES, Ks.

DS-496-A PRINTED IN U.S.A.

WELL NAME AND NO. McGill "A" 2-10 LOCATION (LEGAL) Sec. 10-34s-34w
 FIELD-POOL FORMATION
 COUNTY/PARISH SMART STATE Kc. API. NO.
 NAME Quadart Petroleum Corp.
 ADDRESS

RIG NAME Norseman Drilling #1
 WELL DATA: BIT SIZE 2 1/4 CSG/Liner Size 8 3/8
 TOTAL DEPTH 1655 WEIGHT 24
 ROT CABLE FOOTAGE 1670
 MUD TYPE GRADE 355
 BHST THREAD 8PT
 MUD DENSITY LESS FOOTAGE SHOE JOINT(S) 4.5
 MUD VISC. Disp. Capacity 10.5
 NOTE: Include Footage From Ground Level To Head In Disp. Capacity

SPECIAL INSTRUCTIONS ORIGINAL

Float TYPE DEPTH 1625
 Shoe TYPE DEPTH 1670
 SQUEEZE JOB
 TBG SIZE WEIGHT GRADE THREAD
 D.P. NEW USED
 DEPTH
 TAIL PIPE: SIZE DEPTH
 TUBING VOLUME Bbls
 CASING VOL. BELOW TOOL Bbls
 TOTAL Bbls
 ANNUAL VOLUME Bbls

IS CASING/TUBING SECURED? YES NO
 LIFT PRESSURE 686 PSI CASING WEIGHT + SURFACE AREA (3.14 x R²)
 PRESSURE LIMIT PSI BUMP PLUG TO 1020 PSI
 ROTATE RPM RECIPROCATE FT No. of Centralizers

JOB SCHEDULED FOR TIME 8:30 AM DATE 4-20-94 ARRIVE ON LOCATION TIME 11:30 DATE 4-20-94 LEFT LOCATION TIME 7:30 DATE 4-20-94

TIME	PRESSURE		VOLUME PUMPED BBL		INJECT RATE	FLUID TYPE	FLUID DENSITY	SERVICE LOG DETAIL
	TBG OR D.P.	CASING	INCREMENT	CUM				
1518	0	12			7	H ₂ O		PRE-JOB SAFETY MEETING
1520	150	155			7	cmf. 13.6		START 420 ahead
1532	230	84			7	cmf. 13.6		START 1PAD cmf.
1545	160	42			7	cmf. 15.6		PSI check
1548	270	21			7	cmf. 15.6		START TAIL cmf.
1551	0							PSI check
1552	0	103.5			7	H ₂ O		shut down, drop top plug
1556	100	20			7	H ₂ O		START displacement
1559	130	44			1			PSI check
1600	200	50			7			" "
1603	360	70			7			" "
1605	520	80			6.8			" "
1606	520	90			6.8			" "
1607	540	94			2			lower rate
1609	460	100			2			PSI check

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REMARKS 1020 103.5 2 bump top plug bleed off check float holding

SYSTEM CODE	NO. OF SACKS	YIELD CU. FT/SK	COMPOSITION OF CEMENTING SYSTEMS		SLURRY MIXED		
			BBLs	DENSITY	BBLs	DENSITY	
1.	600	143	50cmf + 4 1/2 gal + 2% callz + 1/4 D29	153	13.6		
2.							
3.	200	118	class H + 2% callz	4.2	15.6		
4.							
5.							
6.							

BREAKDOWN FLUID TYPE VOLUME DENSITY PRESSURE MAX. MIN.
 HESITATION SQ. RUNNING SQ. CIRCULATION LOST YES NO Cement Circulated To Surf. YES NO Bbls
 BREAKDOWN PSI FINAL PSI DISPLACEMENT VOL. 10.5 Bbls TYPE OF WELL OIL STORAGE BRINE WATER
 GAS INJECTION WILDCAT
 Washed Thru Perfs YES NO TO FT. MEASURED DISPLACEMENT WIRELINE
 PERFORATIONS TO TO CUSTOMER REPRESENTATIVE DS SUPERVISOR

DOWELL SCHLUMBERGER INCORPORATED

P.O. BOX 4378 HOUSTON, TEXAS 77210

CUSTOMER

OILFIELD SERVICES

DSI SERVICE ORDER
RECEIPT AND INVOICE NO.
03-12-6110

DSI SERVICE LOCATION NAME AND NUMBER
Ulysses, Ks. 03-12

CUSTOMER NUMBER
CUSTOMER P.O. NUMBER

TYPE SERVICE CODE: **271**
BUSINESS CODES

CUSTOMER'S NAME: **ANADARKO Petroleum Corp.**
ADDRESS
CITY, STATE AND ZIP CODE

WORKOVER NEW WELL OTHER W N
API OR IC NUMBER

IMPORTANT
SEE OTHER SIDE FOR TERMS & CONDITIONS
ARRIVE LOCATION MO. DAY YR. TIME
4 20 94 1130

DSI will furnish and Customer shall purchase materials and services required in the performance of the following SERVICE INSTRUCTIONS in accordance with the general terms and conditions as printed on the reverse side of this service order and/or attached to this service order. This service order is subject to alternative dispute resolution.

SERVICE ORDER I authorize work to begin per service instructions in accordance with terms and conditions printed on the reverse side of this form and/or attached to this form and represent that I have authority to accept and sign this order.

SIGNATURE OF CUSTOMER OR AUTHORIZED REPRESENTATIVE
Jim Barlow

ORIGINAL

JOB COMPLETION MO. DAY YR. TIME
4 20 94 1630

SERVICE RECEIPT I certify that the materials and services listed were received and all services performed in a workmanlike manner.

SIGNATURE OF CUSTOMER OR AUTHORIZED REPRESENTATIVE
Jim Barlow

STATE CODE COUNTY / PARISH CODE CITY
Ks 15 Seward 175

WELL NAME AND NUMBER / JOB SITE LOCATION AND POOL / PLANT ADDRESS SHIPPED VIA
McGill "A" 2-10 Sec. 10-345-34w Dowell

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
059200-002	mileage	mi.	20	2.80	56.00
059697-000	PACB-chg	EA	1	150.00	150.00
102871-020	PUMP-chg	EA	1	1180.00	1180.00
049102-000	hauling	trailer	364	.94	342.16
049100-000	service chg	cu ft	861	1.28	1102.08
040015-000	0909 class H	sq	500	7.99	3995.00
045008-000	D35 li topoz	sq	300	4.22	1266.00
045014-050	D20 gal	lb	2016	.16	322.56
067005-100	CAAC2	lb	1384	.39	539.76
044003-025	D29 cellophane FLAKAC	lb	150	1.70	255.00
056702-085	Top plug	EA	1	105.00	105.00

ORDER

RECEIVED
KANSAS CORPORATION COMMISSION

RECEIPT

AUG 12 1994

6053.82 CONSERVATION DIVISION
WICHITA, KS

Thank For using Dowell

Field esti. #9313.56

SUB TOTAL
LICENSE/REIMBURSEMENT FEE
REMARKS: STATE % TAX ON \$
COUNTY % TAX ON \$
CITY % TAX ON \$
SIGNATURE OF DSI REPRESENTATIVE TOTAL \$
James Equinell