

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~~ ** Anadarko Trading Co.

Operator Contact Person: J. L. ASHTON

Phone (316) 624-6253

Contractor: Name: BIG "A" DRILLING

License: 31572

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: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

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

12-12-94 12-16-94 2-20-95
Spud Date Date Reached TD Completion Date

API NO. 15- 175-21437-00-00

County SEWARD

SW - SW - NW - NE Sec. 22 Twp. 34S Rge. 34 W

1250 Feet from N (circle one) Line of Section

~~2482540~~ Feet from E (circle one) Line of Section

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

Lease Name LEIGHNOR "A" Well # 1H

Field Name HUGOTON

Producing Formation CHASE

Elevation: Ground 2923.9 KB --

Total Depth 3065 PBTB 2930

Amount of Surface Pipe Set and Cemented at 680 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 ALT 1 89/ 3-29-96
(Data must be collected from the Reserve Pit)

Chloride content 10000 ppm Fluid volume 400 bbls

Dewatering method used NATURAL 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, 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. Marc Harvey

Title DRILLING TECHNICAL ASSISTANT Date 4-6-95

Subscribed and sworn to before me this 6th day of April, 19 95.

Notary Public C Cheryl Steers

Date Commission Expires _____

CHERYL STEERS
Notary Public - State of Kansas
My Appt. Expires 6-1-97

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)

Form ACO-1 (7-91) RECEIVED
STATE CORPORATION COMMISSION
APR 7 10 1995
CONSERVATION DIVISION
WICHITA, KANSAS

Per Mark Harvey
6-1-95

Operator Name ANADARKO PETROLEUM CORPORATION Lease Name LEIGHNOR "A" Well # 1H

Sec. 22 Twp. 34S 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: CCL-CBL-GR, DIL, SGR, CML-LDT.

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datums	<input type="checkbox"/> Sample
Name	Top	Datum
B/STONE CORRAL	1656	
HERRINGTON	2634	
KRIDER	2658	
WINFIELD	2750	
TOWANDA	2807	
COUNCIL GROVE	3006	

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	680	PREM PLUS LT./ PREM PLUS	200/150	2%CC/ 2%CC,
PRODUCTION	7 7/8	5 1/2	15.5	3048	CLASS C / CLASS C	230/ 40	20%DCD, 2%CC, 1/4#/SX FLC/ 10%DCD, 2%CC, 1/4#/SX FLC

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	2634-2650, 2664-2674
2	2674-2694	NONE	

TUBING RECORD	Size 2 3/8	Set At 2761	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. 5-24-95 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas 70 Mcf	Water 6 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. Commingled Other (Specify) _____ Production Interval 2634-2694 (OA)

~~WAITING ON PIPING~~

* per Mark Harvey 6-1-95

BIG A DRILLING

P.O. Box 1856

Liberal, KS. 67905-1856

316-624-1904

ORIGINAL

DRILLERS' WELL LOG

WELL NAME: Leighnor 11H
 Section 23/34S/34W
 Seward County, Kansas

COMMENCED: December 12, 1994

COMPLETED: December 17, 1994

OPERATOR: Anadarko Petroleum Corporation

API # 15-175-21437

Depth		Formation	Remarks
From	To		
0	1144	Sand & Redbed	Ran 17 jts. new 24# 8 5/8 csg. Set @ 679'
1145	1305	Glorietta Sand	Cement w/260 SX 75/25 Pozmix, 2% CaCL2
1306	2359	Redbed & Shale	+ 1/4 #/SK. Cellophane, tail w/150 SX
2360	3060	Lime & Shale	Common, 2% CaCL2 + 1/4 #/SK Cellophane Plug down @ 8:30 P.M. 12/12/94

Ran 74 jts. used 5 1/2 15.50# CSG set @ 3048, cement w/230 SX premium plus, 20% Diacel D, 2% CaCL2 + 1/4 # /SX-Flocele, tail w/40 SX. Premium plus, 10% Diacel D, 2% CaCL2 + 1/4 #/SX. Flocele. Plug down @ 9:15 A.M. 12/17/94. Rig released @ 10:15 A.M. 12/17/94

STATE OF KANSAS

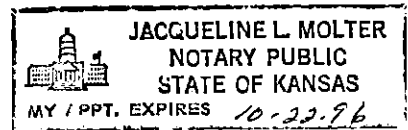
COUNTY OF SEWARD

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

BIG A DRILLING, LC

William Heskett
 William Heskett, Toolpusher

Subscribed & sworn to before me this
29th Day of December 1994



My Appointment Expires:
10-22-96

Jacqueline L. Molter
 Jacqueline L. Molter, Notary Public
 P. O. Box 1597
 Liberal, KS 67905-1597

WELL DATA

FIELD _____ SEC. *22* TWP. *34s* RING. *34w* 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 _____

	NEW USED	WEIGHT	SIZE	FROM	TO	MAXIMUM PSI ALLOWABLE
CASING	<i>N</i>	<i>2.4</i>	<i>8 5/8</i>	<i>KB</i>	<i>693</i>	
LINER						
TUBING						
OPEN HOLE			<i>12 1/4</i>	<i>EL</i>	<i>677</i>	SHOTS/FT.
PERFORATIONS			ORIGINAL			
PERFORATIONS						
PERFORATIONS						

JOB DATA

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
FLOAT COLLAR <i>1 seat / ER</i>	<i>1</i>	<i>Hawco</i>
FLOAT SHOE		
GUIDE SHOE <i>TEX.</i>	<i>1</i>	
CENTRALIZERS <i>REG</i>	<i>3</i>	
BOTTOM PLUG		
TOP PLUG <i>5 1/2</i>	<i>1</i>	
HEAD <i>10 1/2</i>	<i>1</i>	
PACKER <i>Basket</i>	<i>1</i>	
OTHER <i>Well #</i>	<i>1</i>	

CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE <i>12-12-94</i>	DATE <i>12-12-94</i>	DATE <i>12-12-94</i>	DATE <i>12-12-94</i>
TIME <i>1630</i>	TIME <i>1630</i>	TIME <i>1945</i>	TIME <i>2016</i>

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

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
<i>T. Payer</i>	<i>40048 / R.V.</i>	<i>Liberal KS</i>
<i>T. Davis</i>	<i>7690 / R.V.</i>	<i>"</i>
<i>Porter</i>	<i>6612 / R.V.</i>	<i>Hugoton</i>
<i>09613</i>		

DEPARTMENT *5001*
 DESCRIPTION OF JOB *IT + Surface Pipe*

JOB DONE THRU: TUBING CASING ANNULUS TBG/ANN.

CUSTOMER REPRESENTATIVE *X* 

HALLIBURTON OPERATOR *Tom Payer* COPIES REQUESTED _____

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
	<i>200</i>	<i>Pacina Plus HVE</i>		<i>B</i>	<i>2% CC</i>	<i>2.26</i>	<i>12.3</i>
	<i>150</i>	<i>Pacina Plus</i>		<i>B</i>	<i>2% CC</i>	<i>1.32</i>	<i>14.8</i>

PRESSURES IN PSI

CIRCULATING _____ DISPLACEMENT _____
 BREAKDOWN _____ MAXIMUM _____
 AVERAGE _____ FRACTURE GRADIENT _____
 SHUT-IN: INSTANT _____ 5-MIN. _____ 15-MIN. _____
 HYDRAULIC HORSEPOWER _____
 ORDERED _____ AVAILABLE _____ USED _____
 TREATING _____ DISPL. _____ OVERALL _____
 CEMENT LEFT IN PIPE _____
 REASON *Shoe JT*

SUMMARY

VOLUMES

PRESLUSH: BBL.-GAL. _____ TYPE _____
 LOAD & BKDN: BBL.-GAL. _____ PAD: BBL.-GAL. _____
 TREATMENT: BBL.-GAL. _____ DISPL: BBL.-GAL. *41*
 CEMENT SLURRY: BBL.-GAL. *23 + 35*
 TOTAL VOLUME: BBL.-GAL. _____

REMARKS

SEE Job Log

STATE COMMISSION
 APR 7 1995

CUSTOMER *Amador's Pet*
 LEASE *LePhaver "A"*
 WELL NO. *1-H*
 JOB TYPE *8 5/8 S.P. (600)*
 DATE *12-12-94*

MADE IN WISCONSIN
 (800) 770-7700



JOB LOG HAL-2013-C

DATE 12-12-94 PAGE NO.

CUSTOMER *Avondale Pet* WELL NO. *1-H* LEASE *Lisa/ma* JOB TYPE *(10) 8/8 S.P.* TICKET NO. *502513*

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1330							Called out - Reg 1730
	1430							On loc. - Rig circ
	1715							Bulk take on loc.
	1750							Run asg - Safety meeting
	1910							Hk to circ
	1940							Hk to cont
	1945	0-6	73					0/150 Pump lead cont. @ 200sts
		6	35					150 Pump tail @ 150sts.
	2004	6-0						15% Shut down - Drop plug
	2005	0-6	41.5					1/200 Pump displ. - wash tub. + line
	2010	6-2						200 Reduce rate - 3' bbls in
	2015	2-0						100/200 Plug landed @ 41.5 bbls.
	2016							100% RELEASE PRESS. - Float held
								Circ. thru. job.
								Thanks
								Tom + CREW
								Release from loc.
								Cont. FORCE IN CELLAR

ORIGINAL



CHARGE TO: Arundelka Petrol - Corp
 ADDRESS: _____
 CITY, STATE, ZIP CODE: _____

COPY _____
 TICKET No. 705513 - 6
 PAGE 1 OF 2

FORM 1906 R-13

SERVICE LOCATIONS 1. <u>025510</u>	WELL/PROJECT NO. <u>1-11</u>	LEASE <u>Leichman A</u>	COUNTY/PARISH <u>Calcasieu</u>	STATE <u>LA</u>	CITY/OFFSHORE LOCATION	DATE <u>12-12-91</u>	OWNER
2. <u>025525</u>	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	NITROGEN JOB? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	CONTRACTOR <u>RIC A</u>	RIG NAME/NO.	SHIPPED VIA <u>HFS</u>	DELIVERED TO <u>Hillco</u>	ORDER NO.
3.	WELL TYPE	WELL CATEGORY	JOB PURPOSE	WELL PERMIT NO.	WELL LOCATION <u>Leich (22-34-34)</u>		
4.	REFERRAL LOCATION	INVOICE INSTRUCTIONS					

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LOC	ACCT	DF		QTY.	U/M	QTY.	U/M	
000-117					MILEAGE	102	mi	2	75	55.00
001-016					Pump Chg	6	hrs	148	15	890.00
010-018					Trap Plug	58	hrs	1		130.00
11001	830 2171				TEXAS Pattern	8 3/4	100	1		111.00
11111	110 1950				Insert it					171.00
11111	110 1915				Fill up					55.00
11111	110 1918				Contractors			2	100	175.00
11111	110 1920				Basket			1	100	172.00
11111	110 1922				W/ H 07	1	100	1		14.50

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: X [Signature]

DATE SIGNED: _____ TIME SIGNED: _____

A.M. 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: 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: 1795.50
~~1598.50~~
 FROM CONTINUATION PAGE(S): 4709.70
 SUB-TOTAL APPLICABLE TAXES WILL BE ADDED ON INVOICE: 6903.20
~~12508.20~~

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): _____
 CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE): X [Signature]
 HALLIBURTON OPERATOR/ENGINEER: [Signature] EMP # 75122
 HALLIBURTON APPROVAL: _____



HALLIBURTON ENERGY SERVICES

TICKET CONTINUATION

DUNCAN COPY

DC 48

TICKET No. 705512

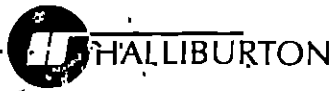
CUSTOMER APC WELL Leighnor "a" DATE 12-12-94 PAGE 2 OF 2

FORM 1911 R-10

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION					UNIT PRICE		AMOUNT			
		LOC	ACCT	DF		QTY.	U/M	QTY.	U/M						
504-050	516.00265				Premium Plus Cement	150	sk			11	19	1678	50		
504-120					Halliburton Light Cement	200	sk			10	02	2004	00		
504-050	516.00265					130	sk								
506-105	516.00286					5180	LB								
506-121	516.00259					10	sk								
509-406	890.50812				Calcium Chloride	6	sk			36	75	220	50		
ORIGINAL															
500-207					SERVICE CHARGE					CUBIC FEET	362	1	35	488	70
500-306					MILEAGE CHARGE	TOTAL WEIGHT	33,048	LOADED MILES	33	TON MILES	545.292		95	518	03

No. B 263287

CONTINUATION TOTAL 4909



JOB SUMMARY

HALLIBURTON DIVISION
HALLIBURTON LOCATION

Mid CONTINENT
LIBERAL, KS

BILLED ON TICKET NO. 705498

WELL DATA

FIELD HUGOTON SEC 22 TWP 34S RNG. 34W 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 3050

	NEW USED	WEIGHT	SIZE	FROM	TO	MAXIMUM PSI ALLOWABLE
CASING	U	15.5	5 1/2	KB	3054	
LINER						
TUBING						
OPEN HOLE						SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

ORIGINAL

JOB DATA

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
FLOAT COLLAR		
FLOAT SHOE		
GUIDE SHOE <u>REG</u>	<u>5/2</u>	<u>1</u>
CENTRALIZERS	<u>5/2</u>	<u>14</u>
BOTTOM PLUG		
TOP PLUG <u>S-W</u>	<u>5/2</u>	<u>1</u>
HEAD <u>P/O</u>	<u>5/2</u>	<u>1</u>
PACKER		
OTHER <u>AIF</u>	<u>5/2</u>	<u>1</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. _____ 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 _____

CALLED OUT DATE	ON LOCATION DATE	JOB STARTED DATE	JOB COMPLETED DATE
<u>12-16-94</u>	<u>12-16-94</u>	<u>12-17-94</u>	<u>12-17-94</u>
TIME <u>2045</u>	TIME <u>2300</u>	TIME	TIME

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
<u>J. Woodrow 62573</u>	<u>40048</u>	<u>LIBERAL KS</u>
<u>T. DAVIS F4550</u>	<u>52276 ADG RCM 176900</u>	<u>" "</u>
<u>G. McINTYRE G3755</u>	<u>3625/ BULK 15302</u>	<u>HUGOTON KS</u>
<u>S. PORTER G9613</u>	<u>4444/ BULK 178818</u>	<u>" "</u>

DEPARTMENT CEMENT
DESCRIPTION OF JOB CEMENT 5th production GSG

JOB DONE THRU: TUBING CASING ANNULUS TBG./ANN.

CUSTOMER REPRESENTATIVE X Job. Sherrin
HALLIBURTON OPERATOR John Woodrow COPIES REQUESTED _____

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
	<u>230</u>	<u>Premium plus</u>	<u>Holoco</u>	<u>B</u>	<u>20% Diacel 'D' 2% C.C. 1/4 Flocc</u>	<u>2.69</u>	<u>12.0</u>
	<u>40</u>	<u>Premium plus</u>	<u>" "</u>	<u>B</u>	<u>10% Diacel 'D' 2% C.C. 1/4 Flocc</u>	<u>2.09</u>	<u>13.0</u>

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 41 REASON SHOE JT

SUMMARY

VOLUMES 28KCB
PRESLUSH: BBL.-GAL. 10-30-10 TYPE Mid FLUSH
LOAD & BKDN: BBL.-GAL. _____ PAD: BBL.-GAL. _____
TREATMENT: BBL.-GAL. _____ DISPL BBL. GAL. 71.7
CEMENT SLURRY: BBL.-GAL. 110 LG
TOTAL VOLUME: BBL.-GAL. 14.8TC

REMARKS

M.S.D.S SHEETS GAVE TO
MR. JOHN SMILLINGS

CUSTOMER ANADARKO PETROLEUM
LEASE LEIGL WOP
WELL NO. 1-H
JOB TYPE 5th LONG STRIKE
DATE 12-16-94



JOB LOG HAL-2013-C

CUSTOMER ANADARKO PET	WELL NO. 1-H	LEASE LEIGHNOR	JOB TYPE 5 1/2" LONG STRING	TICKET NO. 705498
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CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	2400							JOB READY
	2045							CALLED OUT FOR JOB
	2300							PUMP TRUCK ON LOCATION
	2300							RIG TRIPPING IN HOLE WITH DRILL PIPE
	2330							SET UP PUMP TRUCK
	0030							BULK TRUCKS ON LOCATION
	0145							START LAYING DOWN DRILL PIPE
	0530							I.D.P. LAYED DOWN
	0700							START RUNNING 5 1/2" CSC + FCT EQUIP
	0800							CASING ON BOTTOM
								HOOK UP 5 1/2" PK + CIRCULATING IRON
	0820	4.0					450'	START CIRCULATING WITH RIG PUMP
	0825							THROUGH CIRCULATING - HOOK UP TO PUMP TRUCK.
	0830	5.0	10				480'	PUMP 10 BBL 2% KCL WATER
	0832	5.0	30				480'	PUMP 30 BBL MUD FLUSH
	0835	5.0	10				450'	PUMP 10 BBL 2% KCL WATER
	0838	7.0	110				500'	START MIXING LEAD CEMENT
	0855		14.5				250'	START MIXING TAIL CEMENT
	0900		128.5					THROUGH MIXING CEMENT - SHUT DOWN
	0900							WASH UP - RELEASE PLUG
	0902							START DISPLACING
	0913		71.5				1500'	PLUG DOWN - MAX LIFT PRESSURE 825 ^{LB}
								RELEASE FRONT - FRONT HELD
								THANK YOU!
								WOODY, TIGER, HERB

ORIGINAL



FORM 1906 R-13

CHARGE TO: ANADARKO PETROLEUM INC.
 ADDRESS: P O BOX 351
 CITY, STATE, ZIP CODE: LIBERAL, KS 67905-0351

COPY

TICKET WF

No. 705498 - 2

PAGE 1 OF 2

SERVICE LOCATIONS	WELL/PROJECT NO.	LEASE	COUNTY/PARISH	STATE	CITY/OFFSHORE LOCATION	DATE	OWNER
1. 0235 40 LIBERAL	1-H	LEIGHBOR "A"	SEWARD	KS	LIBERAL	12 17 79	SAME
2. 0235-35 HUGOTON	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	NITROGEN JOB? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	CONTRACTOR BIG A DRIG	RIG NAME/NO.	SHIPPED VIA CP	DELIVERED TO WELL SITE	ORDER NO.
3.	WELL TYPE	WELL CATEGORY	JOB PURPOSE	WELL PERMIT NO.	WELL LOCATION		
4.	02 GAS	01 DEVELOPMENT	035 5/2 LONG STRING		LAND		
REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
000-117		1			MILEAGE	6	mi	2		2.75	33.00
001-016		1			PUMP CHARGE	3051	FT			1500.00	1500.00
020-016		1			S-W TOP PLUG	1	IN	5/8	IN	60.00	60.00
117-215		1			MUD FLUSH	1260	GAL			65	819.00
19-163		1			CLA-FIX IT	2	GAL			24.00	48.00
127	826-205	1			RIG GUIDI SHOP	1	IN	5/8	IN	121.00	121.00
29A	815-19251	1			INSERT FLOAT	1	IN	5/8	IN	110.00	110.00
27	815-19311	1			FILL UP ASSY	1	IN	1/2	IN	55.00	55.00
40	406-60022	1			CENTRALIZER	14	IN	5/8	IN	44.00	616.00

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: **X** [Signature]

DATE SIGNED: 12-18-79 TIME SIGNED: 4:21

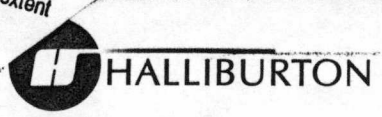
do do not require IPC (Instrument Protection). Not offered

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	3362 100
TYPE LOCK	DEPTH	OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?		<input checked="" type="checkbox"/>				
BEAN SIZE	SPACERS	WE UNDERSTOOD AND MET YOUR NEEDS?		<input checked="" type="checkbox"/>			SUB-TOTAL	7734 02
TYPE OF EQUALIZING SUB.	CASING PRESSURE	OUR SERVICE WAS PERFORMED WITHOUT DELAY?		<input checked="" type="checkbox"/>				
TUBING SIZE	TUBING PRESSURE	WELL DEPTH	WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?		<input checked="" type="checkbox"/>			
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
J. H. Sullivan	X [Signature]	J. H. Sullivan	62573	

made in writing
as 77056.



HALLIBURTON ENERGY SERVICES

TICKET CONTINUATION

DUNCAN COPY

75 M.G.

TICKET No.

CUSTOMER Anadarko Petroleum Copr.	WELL Kaw leighnor 1-H	DATE 12-16-94	PAGE OF
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FORM 1911 R-10

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE		AMOUNT	
		LOC	ACCT	DF		QTY.	U/M	QTY.	U/M				
504-050	516.00265				Premium Plus Cement	270	sk			11	19	3021	30
500-210	890.50071				Flocele 1/4#W/ 270	68	lb			1	65	112	20
500-959	70.15524				Diacel D 20%W/ 230, 10%W/ 40	4700	lb				42	1974	00
509-406	890.50812				Calcium chloride 2%W/ 270	5b	sk			36	75	183	75
ORIGINAL													
500-207					SERVICE CHARGE	CUBIC FEET		562		1 35		758 70	
500-306					MILEAGE CHARGE	TOTAL WEIGHT	30548	LOADED MILES	36	TON MILES	549.864	95	522 37

No. B 263313

CONTINUATION TOTAL	6572 02
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