FORM MUST BE TYPED   SIDE ONE

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

Operator: License # __9953__

API NO. 15- __129-21593-0000__

County __Morton__

__- C -NW , SW__ Sec. __10__ Twp. __32S__ Rge. __40__ X (E/W)

Name: __Harris Oil and Gas Company__

Address __1125 Seventeenth Street__

__Suite 2290__

City/State/Zip __Denver, CO 80202__

Purchaser: __Amoco__

Operator Contact Person: __Doug Hoisington__

Phone (__303__) __293-8838__

Contractor: Name: __Allen Drilling Company__

License: __5418__

Wellsite Geologist: __Peter Debenham__

Designate Type of Completion
__X__ New Well _____ Re-Entry _____ Workover

_____ Oil   _____ SWD   _____ SIOW   _____ Temp. Abd.
__X__ Gas   _____ ENHR   _____ SIGW
_____ Dry   _____ Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-Entry: old well info as follows:
                                          N/A
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. _____

__9/27/99__   __10/1/99__   __11/19/99__
Spud Date   Date Reached TD   Completion Date

Release

NOV 1 0 2003

From
Confidential

1980 ___ Feet from (S)/N (circle one) Line of Section

660 ___ 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 __Charles Breeding__ Well # __3-1210__

Field Name __Kinsler__

Producing Formation __Wabaunsee__

Elevation: Ground __3316'__   KB __3326'__

Total Depth __3500'__   PBTD __3414'__

Amount of Surface Pipe Set and Cemented at __616__ Feet

Multiple Stage Cementing Collar Used? _____ Yes __X__ No

If yes, show depth set __N/A__ _____ Feet

If Alternate II completion, cement circulated from __N/A__

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan ALT-1 _JH_ 7-11-00
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume __500__ bbls

Dewatering method used __Air Evaporation__

Location of fluid disposal if hauled offsite:
                                          N/A
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 _____

Title __Operations Manager__   Date __11/23/99__

Subscribed and sworn to before me this 23rd day of November,
19 99 .

Notary Public _____

Date Commission Expires __March 31, 2001__

K.C.C. OFFICE USE ONLY
F __yes__ 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)

Operator Name __Harris Oil and Gas Company__   Lease Name __Charles Breeding__   Well # __3-1210__

Sec. __10__ Twp. __32S__ Rge. __40__   ☐ East   ☒ West   County __Morton__   CONFIDENTIAL ORIGINA

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:
HRI
ML
SDL – SDN
CBL

☒ Log   Formation (Top), Depth and Datums   ☐ Sample

Name	Top	Datum
Wabaunsee	2896'	+430'
Topeka	3131'	+195'
Topeka B Ø	3194'	+132'

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"	24	616'	Midcon/C1C	115/100	3% CaCl, 1/2# Flocele
							2% CaCl, 1/4# Flocele
Production	7 7/8"	4 1/2"	10.5	3495'	Midcon/Poz	55/145	2% CaCl, 1/4# Flocele

5% EA-2, 10% Salt
.4% Halad 322

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
X Perforate ___ Protect Casing ___ Plug Back TD ___ Plug Off Zone	3194'– 3206'	Class H	50	1% CaCl

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
4	3194'–3206'	2000 gal 17% DSFE

Release
NOV 10 2003
From
Confidential

TUBING RECORD	Size 2 3/8"	Set At 3145'	Packer At N/A	Liner Run ☐ Yes ☒ No

Date of First, Resumed Production, SWD or Inj. __11/19/99__

Producing Method ☐ Flowing ☒ Pumping ☐ Gas Lift ☐ Other (Explain)

Estimated Production Per 24 Hours	Oil -0- Bbls.	Gas 106 Mcf	Water 58 Bbls.	Gas-Oil Ratio N/A	Gravity N/A

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   __Wabaunsee__

JOB SUMMARY 4332-1

23342/   *10- -99*

REGION	NWA/COUNTRY	BDA/STATE	COUNTY
North America	*Mid Continent*	*KS*	*Morton*

MBU ID / EMP #	EMPLOYEE NAME	PSL DEPARTMENT
McII0112/105943	*Ron Crist*	*Z J*

LOCATION	COMPANY	CUSTOMER REP / PHONE
Liberal Ks	*Harris Oil + Gas*	

TICKET AMOUNT	WELL TYPE	API / UWI #
2909.85	*O2*	

WELL LOCATION	DEPARTMENT	JOB PURPOSE CODE
	Z J	*075*

LEASE / WELL #	SEC / TWP / RNG
Charles Breeding 3-120	*10-325-40W*

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
R Crist 105943							
J Woodrow 105878							

HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES
420621							
54219-78299							

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

	CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE	*10-23-99*	*10-23-99*	*10-23-99*	*10-23-99*
TIME	*0430*	*0800*	*0900*	*1030*

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY	MAKE
Float Collar		
Float Shoe		
Guide Shoe		
Centralizers		
Bottom Plug		
Top Plug		
Head		
Packer		
Other		

WELL DATA

	NEW/USED	WEIGHT	SIZE	FROM	TO	MAX ALLOW
Casing	*4*	*10.5*	*4 1/2*	*KB*	*5000 R*	
Liner						
Liner						
Tbg/D.P.	*4*	*2 3/8*				
Tbg/D.P.	*4*	*4.7*	*2 7/8*	*KB*	*19795*	
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 |
| Perfpac Balls _____ Qty. |
| Other _____ |
| Other _____ |
| Other _____ |
| Other _____ |

HOURS ON LOCATION

DATE	HOURS
TOTAL	

OPERATING HOURS

DATE	HOURS
TOTAL	

DESCRIPTION OF JOB

Release

NOV 1 0 2003

	HYDRAULIC HORSEPOWER	
ORDERED	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
	25	*H*	*B*	*1% CC*	*1.18*	*15.6*
	25	*H*	*B*		*1.06*	*16.4*

Circulating _____	Displacement _____	Preflush: Gal - BBI _____	Type _____
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 _____	
		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 4239-S

REGION	NWA/COUNTRY	BDA / STATE	COUNTY
North America			

MBU ID / EMP #	EMPLOYEE NAME	PSL DEPARTMENT

LOCATION	COMPANY	CUSTOMER REP / PHONE

TICKET AMOUNT	WELL TYPE	API / UWI #

WELL LOCATION	DEPARTMENT	JOB PURPOSE CODE

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 T	PUMPS C	PRESS. (psi) Tbg	PRESS. (psi) Csg	JOB DESCRIPTION / REMARKS
	0430							call out
	0800							on Loc
	0803							Load Annulus
	0914							Ptest 2000
0919 0918		3	29				500	Load Annulus
0920 0925								Mix Cir water
0925		3.5	17					Injection Rate
	0930	2	9.5				80	Mix Cut Pump
	0934							Shut Down wash up
	0938	3	8					Start Displacement
	0942							Shut Down
	0948		2.25					Let go on Vac
	0950							Stopped
	0953					0.150		Pump on Tbg Locked up
	0955							Release Pressure
	0957	2	30				690	Reverse out
	1007							Shut Down Pull Y JTS
	1018						500	Press up
								Job Ended

HALLIBURTON®

JOB SUMMARY 4239-1

TICKET #	TICKET DATE
174134	9-28-99

REGION North America	NWA/COUNTRY MidCont USA	BDA/STATE Ks
		COUNTY Morton

MBU ID / EMP # MCL10110 106328	EMPLOYEE NAME Nick Korbe	PSL DEPARTMENT 21
LOCATION Liberal	COMPANY Harris Oil & Gas	CUSTOMER REP / PHONE Harold Frauli
TICKET AMOUNT $4775.97	WELL TYPE Oil	API / UWI #
WELL LOCATION IIN,IW of Rolla	DEPARTMENT Cement	JOB PURPOSE CODE 010
LEASE / WELL # Charles Breeding 3-1210	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
N. Korbe 106328	8½	CONFIDENTIAL					
S. Tate 105953	8½						
S. Owens 106125	9						

HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES
421270	130						
54038/77941	130						
53336/72031	60						

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

	DATE	TIME
CALLED OUT	9-27-99	2000
ON LOCATION	9-27-99	2330
JOB STARTED	9-28-99	0530
JOB COMPLETED	9-28-99	0615

TOOLS AND ACCESSORIES

TYPE AND SIZE 8⅝		QTY	MAKE
Float Collar	Insert	1	H
Float Shoe	filltube	1	O
Guide Shoe	Reg	1	
Centralizers	S-G	3	U
Bottom Plug			
Top Plug	15W	1	C
Head			O
Packer			
Other			

WELL DATA

	NEW/USED	WEIGHT	SIZE	FROM	TO	MAX ALLOW
Casing	N	23	8⅝	0	616	2000
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 _____
Perfpac Balls _____ Qty. _____
Other _____
Other _____
Other _____
Other _____

HOURS ON LOCATION

DATE	HOURS
8-27-99	½ hr
9-28-99	8 hrs
TOTAL	8½ hrs

OPERATING HOURS

DATE	HOURS
9-28-99	1 hrs
TOTAL	1 hrs

DESCRIPTION OF JOB
010

HYDRAULIC HORSEPOWER
ORDERED — Avail. _____ Used _____

AVERAGE RATES IN BPM
TREATED — Disp. _____ Overall _____

FEET 38'

CEMENT LEFT IN PIPE
Reason shjt.

CEMENT DATA

STAGE	SACKS	CEMENT	BULK/SKS	ADDITIVES		YIELD	LBS/GAL
L	115	MidCon P.P.	B	3% CC, ½# flocele, 1% FWCA	Release	2.92	11.4
T	100	Prem+	B	2% CC, ¼# flocele		1.34	14.8

RECEIVED
STATE CORPORATION COMMISSION

NOV 1 0 2003

Circulating _____
Breakdown _____
Average _____
Shut In: Instant _____

Displacement _____ NOV 29 1999
Maximum _____
Frac Gradient _____ CONSERVATION DIVISION
5 Min _____ 15 Min _____
Wichita, Kansas

Preflush: Gal - BBl _____
Load & Bkdn: Gal - BBl _____
Treatment Gal - BBl _____
Cement Slurr Gal - BBl 83
Total Volume Gal - BBl _____

Type _____
Pad: BBl - Gal _____
Disp: BBl - Gal 37

Frac Ring #1	Frac Ring #2	Frac Ring #3	Frac Ring #4

THE INFORMATION STATED HEREIN IS CORRECT

CUSTOMER'S REPRESENTATIVE SIGNATURE

HALLIBURTON

JOB LOG 4239-5

| TICKET # | 174134 | TICKET DATE | 9-28-99 |

REGION	North America
NWA/COUNTRY	MidCont USA
BDA / STATE	Ks
COUNTY	Morton

MBU ID / EMP #	MCL10010 106328
EMPLOYEE NAME	Nick Korbe
PSL DEPARTMENT	Z 1

LOCATION	Liberal
COMPANY	Harris Oil & Gas
CUSTOMER REP / PHONE	Harold Frauli

TICKET AMOUNT	$4725.97
WELL TYPE	01
API / UWI #	

WELL LOCATION	11N, 1W of Rolla
DEPARTMENT	Cement
JOB PURPOSE CODE	010

| LEASE / WELL # | Charles Breeding 3-1210 |
| SEC / TWP / RNG | |

HES EMP NAME/EMP#/(EXPOSURE HOURS)	HRS
N. Korbe 106328	8½
S. Tate 105953	8½
S. Owens 106125	9

CONFIDENTIAL

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL)(GAL)	PUMPS T	PUMPS C	PRESS. Tbg	PRESS. Csg	JOB DESCRIPTION / REMARKS
	2000							called out
	2330							on loc
								Held safety mtg
								Set up Trks
	0315							st FE
	0445							Break circ
	0532						2000	Test lines
	0539	5.5	0				75	st cement (15 sks @ 11.4 #
	0550	5.5	60/0				100	st Tcement 100 sks @ 14.8 #
	0556		24					end cement
	0557							rel plug
	0558	5	0				100	st disp
	0604	5	15				150	catch cement
	0606	2	27				140	slow rate
	0610	2	37				150/950	Bump plug
	0611							rel pres
								Float held
								Circ 14 bbl cement to Pit
								27 sks

Job complete
Thank you
Nick + crew

HALLIBURTON

Work Order Contract

Halliburton Energy Services, Inc.
Houston Texas 77056

CONFIDENTIAL 174134

Order Number

70012 SAP

TO: HALLIBURTON ENERGY SERVICES, INC. - YOU ARE HEREBY REQUESTED TO FURNISH EQUIPMENT AND SERVICE PERSONNEL TO *DELIVER AND OPERATE THE SAME AS AN INDEPENDENT CONTRACTOR TO CUSTOMER LISTED BELOW AND DELIVER AND SELL PRODUCTS, SUPPLIES AND MATERIALS FOR THE PURPOSE OF SERVICING:*

Well No. 3-1210	Farm or Lease Charles Breeding 3-1210	County Morton	State KS	Well Permit #
Customer Harris Oil & Gas		Well Owner Same	Job Purpose O10	

THIS WORK ORDER MUST BE SIGNED BEFORE WORK IS COMMENCED

A. **CUSTOMER REPRESENTATION** – Customer warrants that the well is in proper condition to receive the services, equipment, products, and materials to be supplied by Halliburton Energy Services, Inc. (hereinafter "Halliburton").

B. **PRICE AND PAYMENT** – The services, equipment, products, and/or materials to be supplied hereunder are priced in accordance with Halliburton's current price list. All prices are exclusive of taxes. If Customer does not have an approved open account with Halliburton, all sums due are payable in cash at the time of performance of services or delivery of equipment, products or materials. If Customer has an approved open account, invoices are payable on the twentieth day after the date of invoice. Customer agrees to pay interest on any unpaid balance from the date payable until paid at the highest lawful contract rate applicable, but never to exceed 18% per annum. In the event Halliburton employs an attorney for collection of any account, Customer agrees to pay attorney fees of 20% of the unpaid account, or Halliburton's actual attorneys fees, whichever is greater, plus all collection and court costs. Customer agrees that the amount of attorney fees set out herein are reasonable and necessary.

C. **RELEASE AND INDEMNITY** – Customer agrees to RELEASE Halliburton Group from any and all liability for any and all damages whatsoever to property of any kind owned by, in the possession of, or leased by Customer and those persons and entities Customer has the ability to bind by contract or which are co-interest owners or joint ventures with Customer. Customer also agrees to DEFEND, INDEMNIFY, AND HOLD Halliburton Group HARMLESS from and against any and all liability, claims, costs, expenses, attorney fees and damages whatsoever for personal injury, illness, death, property damage and loss resulting from:

loss of well control; services to control a wild well whether underground or above the surface; reservoir or underground damage, including loss of oil, gas, other mineral substances or water; surface damage arising from underground damage; damage to or loss of the well bore; subsurface trespass or any action in the nature thereof; fire; explosion; subsurface pressure; radioactivity; and pollution and contamination and its cleanup and control.

CUSTOMER'S RELEASE, DEFENSE, INDEMNITY AND HOLD HARMLESS obligations will apply even if the liability and claims are caused by the sole, concurrent, active or passive negligence, fault, or strict liability of one or more members of the Halliburton Group, the unseaworthiness of any vessel or any defect in the data, products, supplies, materials or equipment furnished by any member or members of the Halliburton Group whether in the design, manufacture, maintenance or marketing thereof or from a failure to warn of such defect. "Halliburton Group" is defined as Halliburton Energy Services, Inc., its parent, subsidiary, and affiliated companies, insurers and subcontractors and all its/their officers, directors, employees, consultants and agents. Customer's RELEASE, DEFENSE, INDEMNITY AND HOLD HARMLESS obligations apply whether the personal injury, illness, death, property damage or loss is suffered by one or more members of the Halliburton Group, Customer, or any other person or entity. Customer agrees to support such obligations assumed herein with liability insurance with limits of not less than $500,000. Customer agrees to name Halliburton Group as named additional insureds on all of its general liability policy(s). Customer agrees that its liability under this Contract is not limited by the amounts of its insurance coverage, except where and as may be required by applicable law for the provisions of this Contract to be enforceable.

D. **EQUIPMENT LIABILITY** – Customer shall at its risk and expense attempt to recover any Halliburton Group equipment lost or lodged in the well. If the equipment is recovered and repairable, Customer shall pay the repair costs, unless caused by Halliburton's sole negligence. If the equipment is not recovered or is irreparable, Customer shall pay the replacement cost, unless caused by Halliburton's sole negligence. If a radioactive source becomes lost or lodged in the well, Customer shall meet all requirements of Section 39.15(a) of the Nuclear Regulatory Commission regulations and any other applicable laws or regulations concerning retrieval or abandonment and shall permit Halliburton to monitor the recovery or abandonment efforts all at no risk or liability to Halliburton Group. Customer shall be responsible for damage to or loss of Halliburton group equipment, products, and materials while in transit aboard Customer-supplied transportation, even if such is arranged by Halliburton at Customer's request, and during loading and unloading from such transport. Customer will also pay for the repair or replacement of Halliburton group equipment damaged by corrosion or abrasion due to well effluents.

E. **LIMITED WARRANTY** – Halliburton warrants only title to the equipment, products, and materials supplied under this Contract and that same are free from defects in workmanship and materials for thirty (30) days from the date of delivery. THERE ARE NO WARRANTIES, EXPRESS OR IMPLIED, OF MERCHANTABILITY, FITNESS OR OTHERWISE BEYOND THOSE STATED IN THE IMMEDIATELY PRECEDING SENTENCE. Halliburton's sole liability and Customer's exclusive remedy in any cause of action (whether in contract, tort, breach of warranty or otherwise) arising out of the sale, lease or use of any equipment, products, or materials is expressly limited to the replacement of such on their return to Halliburton or, at Halliburton's option, to the allowance to Customer of credit for the cost of such items. In no event shall Halliburton be liable for special, incidental, indirect, consequential, or punitive damages. Because of the uncertainty of variable well conditions and the necessity of relying on facts and supporting services furnished by others, HALLIBURTON IS UNABLE TO GUARANTEE THE EFFECTIVENESS OF THE EQUIPMENT, MATERIALS, OR SERVICE, NOR THE ACCURACY OF ANY CHART INTERPRETATION, RESEARCH ANALYSIS, JOB RECOMMENDATION OR OTHER DATA FURNISHED BY HALLIBURTON GROUP. Halliburton personnel will use their best efforts in gathering such information and their best judgment in interpreting it, but Customer agrees that Halliburton Group shall not be liable for and CUSTOMER SHALL INDEMNIFY HALLIBURTON GROUP AGAINST ANY DAMAGES ARISING FROM THE USE OF SUCH INFORMATION, even if such is contributed to or caused by the active or passive negligence, fault or strict liability of any member or members of Halliburton Group. Halliburton also does not warrant the accuracy of data transmitted by electronic process, and Halliburton will not be responsible for accidental or intentional interception of such data by third parties.

F. **GOVERNING LAW** – The validity, interpretation and construction of this Contract shall be determined by the laws of the jurisdiction where the services are performed or the equipment or materials are delivered.

G. **DISPUTE RESOLUTION** Customer and Halliburton agree that any dispute that may arise out of the performance of this Contract shall be resolved by binding arbitration by a panel of three arbitrators under the rules of the American Arbitration Association. The arbitration will take place in Houston, TX.

H. **SEVERABILITY** - If any provision or part thereof of this Contract shall be hold to be invalid, void, or of no effect for any reason, such holding shall not be deemed to affect the validity of the remaining provisions of this Contract which can be given effect, without the invalid provision or part thereof, and to this end, the provisions of this Contract are declared to be severable. Customer and Halliburton agree that any provision of this Contract that is unenforceable or void under applicable law will be modified to achieve the intent of the parties hereunder to the greatest extent allowed by applicable law.

I. **MODIFICATIONS** – Customer agrees that Halliburton shall not be bound by any modifications to this Contract, except where such modification is made in writing by a duly authorized executive officer of Halliburton. Requests for modifications should be directed to the Vice President – Legal, 4100 Clinton Drive, Houston, TX. 77020.

I HAVE READ AND UNDERSTAND THIS WORK ORDER CONTRACT WHICH CONTAINS RELEASE AND INDEMNITY LANGUAGE WHICH CUSTOMER ACKNOWLEDGES IS CONSPICUOUS AND AFFORDS FAIR AND ADEQUATE NOTICE AND I REPRESENT THAT I AM AUTHORIZED TO SIGN THE SAME AS CUSTOMER'S AGENT.

SIGNED: X _____ DATE: 9-28-99 TIME: 0005 (A.M.)/P.M.
CUSTOMER Authorized Signatory

Customer Acceptance of Materials and Services

THE CUSTOMER HEREBY ACKNOWLEDGES RECEIPT OF THE MATERIALS AND SERVICES DESCRIBED ON THE ATTACHED ORDER NUMBER 174134

X _____
CUSTOMER Authorized Signatory

White-Office	Canary-Field Office	Pink-Customer	Green-Retain

HALLIBURTON

JOB SUMMARY ORDER NO. 70006

TICKET #	177019
TICKET DATE	10-3-99

REGION: North America	NWA/COUNTRY: Central USA	BDA/STATE: Liberal KS	COUNTY: morton

MBU ID / EMP # L 8401 106212 EMPLOYEE NAME: Bill Jauber PSL DEPARTMENT: 2I

LOCATION: Liberal COMPANY: Harris Oil + Gas CUSTOMER REP / PHONE: Harold FrauLi 629-0064

TICKET AMOUNT: $5008.00 WELL TYPE: O2 API / UWI #

WELL LOCATION: E. RichField DEPARTMENT: 2I JOB PURPOSE CODE: 4½ LS 035

LEASE / WELL: Charles Breeding 3-210 SEC / TWP / RNG: 10 32S 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
B. Sauber 106212							
S. Woodrow							
R. Anderson							

HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES
421270	122						
54218-78299	122						
54116 6612	40						

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

	CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE	10-2-99	10-2-99	10-3-99	10-3-99
TIME	2100	2400	0230	0645

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY	MAKE
Float Collar		
Float Shoe		
Guide Shoe	1	
Centralizers	7	
Bottom Plug		
Top Plug	3W	1
Head		
Packer		
Other Insert/Fill	1	

WELL DATA

	NEW/USED	WEIGHT	SIZE	FROM	TO	MAX ALLOW
Casing	4	10.5	4.5	KB	3499	
Liner						
Liner						
Tbg/D.P.						
Tbg/D.P.						
Open Hole		7⅞	KB	3501	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 _____
Perfpac Balls _____ Qty. _____
Other _____
Other _____
Other _____
Other _____

HOURS ON LOCATION

DATE	HOURS
TOTAL	

OPERATING HOURS

DATE	HOURS
TOTAL	

DESCRIPTION OF JOB

HYDRAULIC HORSEPOWER
ORDERED _____ Avail. _____ Used _____

AVERAGE RATES IN BPM
TREATED _____ Disp. _____ Overall _____

CEMENT LEFT IN PIPE
FEET: 183 Reason: Shoe JT

CEMENT DATA

STAGE	SACKS	CEMENT	BULK/SKS	ADDITIVES	YIELD	LBS/GAL
1	15	miocan	B	2%cc ¼# Flocele	3.21	11.1
2	55	miocan	B	2%cc ¼# Flocele	3.21	11.1
3	145	5%50Poz H	B	2%Cl 5%colseal 10%salt .4%Halao 322	1.25	14.8

Circulating _____
Breakdown _____
Average _____
Shut In: Instant _____

Displacement _____
Maximum _____
Frac Gradient _____
5 Min _____ 15 Min _____

Preflush: Gal - BBl _____ Type _____
Load & Bkdn. Gal - BBl _____ Pad: BBl - Gal _____
Treatment Gal - BBl _____ Disp. BBl - Gal _____
Cement Slurr Gal - BBl _____
Total Volume Gal - BBl _____

THE INFORMATION STATED HEREIN IS CORRECT

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

CUSTOMER'S REPRESENTATIVE SIGNATURE: _(signature)_

4239-1

HALLIBURTON

JOB LOG

ORDER NO. 70006

| TICKET # | T 71c19 | TICKET DATE | 10-3-99 |

REGION	North America	NWA/COUNTRY		BDA / STATE	KS	COUNTY	
MBU ID / EMP #		EMPLOYEE NAME	Bill Sauter	PSL DEPARTMENT	
LOCATION		COMPANY		CUSTOMER REP / PHONE	
TICKET AMOUNT		WELL TYPE		API / UWI #	
WELL LOCATION		DEPARTMENT		JOB PURPOSE CODE	
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
						CONFIDENTIAL	

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL)(GAL)	PUMPS T	PUMPS C	PRESS. (psi) Tbg	PRESS. (psi) Csg	JOB DESCRIPTION / REMARKS
10-2-99	2100							Call out
	2400							on loc. Rig Lay Down DP
10-3-99	0230							Start CSG 43Ft shoe cent. every 3rd Jt
	0500							Hook To circulate
	0550							Safety meeting
	0600	2	8					Plug Rat & Mouse Hole
	0611	6	31.5			84		Pump lead cmt
	0617	6	32			84		Pump Tail cmt
	0629							Shut Down Wash lines Drop Plug
	0631					0-250		Start Displacement
						250-370		Slow Rate
	0645					580 500-1500		Plug Down Float Held

Thank you

RECEIVED
STATE CORPORATION COMMISSION

NOV 29 199_

CONSERVATION DIVISION
Wichita, Kansas

Release
NOV 1 0 2003