

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

Operator: License # 5447

Name: OXY USA Inc.

Address P. O. Box 300

City/State/Zip Tulsa, ok 74102-0300

Purchaser: (Dry Hole)

Operator Contact Person: Raymond Hui

Phone (918) 561-3548

Contractor: Name: Beredco Drilling Co.

License: 5147

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 PBSD

Commingled Docket No. _____

Dual Completion Docket No. _____

Other (SWD or Inj?) Docket No. _____

5-21-96 5-29-96 5-30-96
Spud Date Date Reached TD Completion Date

API NO. 15-189-22073-0000

County Stevens

ORIGINAL

NE - SW - SW Sec. 3 Twp. 32S Rge. 39 ^E _W

1244 FSL Feet from (S) (circle one) Line of Section

4050 FEL Feet from (E) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
XX, (SE) XX or XX (circle one)

Lease Name MLP Gillespie A Well # 4

Field Name E. Kinsler

Producing Formation (Dry Hole)

Elevation: Ground 3225' KB _____

Total Depth 6000' PBSD _____

Amount of Surface Pipe Set and Cemented at 1713' 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 ACT 1 D₃A
(Data must be collected from the Reserve Pit) 5-5970PW

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used 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 Raymond Hui

Title Staff Analyst Date 8-8-96

Subscribed and sworn to before me this 8th day of August, 19 96.

Notary Public Loren Anne Wells

Date Commission Expires 9-22-97

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)

RECEIVED
 KANSAS CORPORATION COMMISSION

AUG 22 1996

Form ACO-1 (7-91)

Operator Name OXY USA Inc. Lease Name MLP Gillespie A Well # 4

Sec. 3 Twp. 32S Rge. 39 East West
 County Morton

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log Formation (Top), Depth and Datums	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Winfield	2435 +746
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Marm	4660 -1525
		Morrow Shale	5451 -2215
		Keyes	5891 -2655
List All E.Logs Run:	HIGH RESOLUTION INDUCTION DUAL-SPACED NEUTRON MICRO		

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 #	1713	CL A	570	3% CaCl ₂
Production	XXXX	XXXX	XX		TOC at 1641'		

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
	Not perforated: Dry Hole		

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. D&A			Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)		
Estimated Production Per 24 Hours	Oil N/A Bbls.	Gas N/A Mcf	Water N/A Bbls.	Gas-Oil Ratio	Gravity

Disposition of Gas: **METHOD OF COMPLETION** Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
 (If vented, submit ACO-18.) Other (Specify) _____



HALLIBURTON ENERGY SERVICES

HAL-1906-N

CHARGE TO: Ox4 USA
 ADDRESS:
 CITY, STATE, ZIP CODE:

DUNCAN COPY

TICKET

No.

920181 - 9

PAGE 1 OF 2

SERVICE LOCATIONS 1 <u>025540 Liberal</u>	WELL/PROJECT NO. <u>4</u>	LEASE <u>GILLESPIE</u>	COUNTY/PARISH <u>STEVENS</u>	STATE <u>KS</u>	CITY/OFFSHORE LOCATION	DATE <u>5-29-96</u>	OWNER <u>SAME</u>
2 <u>025535 Hugoton</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>BREDCO</u>	RIG NAME/NO. <u>2</u>	SHIPPED VIA <u>HES</u>	DELIVERED TO <u>LOCATION</u>	ORDER NO.
3.	WELL TYPE <u>01</u>	WELL CATEGORY <u>06</u>	JOB PURPOSE <u>115</u>	WELL PERMIT NO.	WELL LOCATION		
4.	REFERRAL LOCATION	INVOICE INSTRUCTIONS					

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.	U/M	QTY.	U/M	UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
000-117					MILEAGE	1	U	116	M	2.85	330.60
000-119					CREW MILEAGE	1	U	116	M	1.50	174.00
009-019					PUMP CHARGE	60	HR	5470	FT		2,010.00
001-018					ADDITIONAL HOURS	1	HR	3	EA	235.00	1410.00
											705.00

CONSERVATION DIVISION
WICHITA, KS

AUG 22 1996

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ORIGINAL

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

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

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>3,219.60</u>
TYPE LOCK	DEPTH	OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?					
BEAN SIZE	SPACERS	WE UNDERSTOOD AND MET YOUR NEEDS?					FROM CONTINUATION PAGE(S) <u>4862.75</u>
TYPE OF EQUALIZING SUB.	CASING PRESSURE	OUR SERVICE WAS PERFORMED WITHOUT DELAY?					
TUBING SIZE	TUBING PRESSURE	WELL DEPTH	WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				SUB-TOTAL APPLICABLE TAXES WILL BE ADDED ON INVOICE <u>642.59</u>
DATE SIGNED	TIME SIGNED	<input type="checkbox"/> A.M. <input type="checkbox"/> P.M.	ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO				
I <input type="checkbox"/> do <input type="checkbox"/> do not require IPC (Instrument Protection). <input type="checkbox"/> Not offered		TREE CONNECTION	TYPE VALVE	<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</u>	<u>ROBERT ELWOOD</u>	<u>D. 4360</u>	

TERMS AND CONDITIONS

For good and valuable consideration received, Customer (as identified on the face of this document) and Halliburton Energy Services, a division of Halliburton Company (hereinafter "Halliburton") agree as follows:

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.

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, plus all collection and court costs.

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. 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 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 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, ITS PARENT, SUBSIDIARY, AND AFFILIATED COMPANIES AND ITS/THEIR OFFICERS, DIRECTORS, EMPLOYEES, 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 AND THE CUSTOMER WILL SUPPORT SUCH OBLIGATIONS ASSUMED HEREIN WITH LIABILITY INSURANCE TO THE MAXIMUM EXTENT ALLOWED BY APPLICABLE LAW.

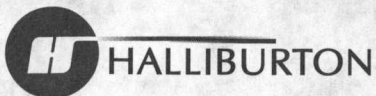
D. **EQUIPMENT LIABILITY** - Customer shall at its risk and expense attempt to recover any Halliburton equipment lost or lodged in the well. If the equipment is recovered and repairable, Customer shall pay the repair costs, unless caused by Halliburton's sole negligence. If the equipment is not recovered 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. Customer shall be responsible for damage to or loss of Halliburton 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 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 agreement and that same are free from defects in workmanship and materials for one year from 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. Halliburton personnel will use their best efforts in gathering such information and their best judgment in interpreting it, but Customer agrees that Halliburton 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 by Halliburton's negligence or fault. 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 agreement shall be determined by the laws of the jurisdiction where the services are performed or the equipment or materials are delivered.

G. **WAIVER** - Customer agrees to waive the provisions of the Texas Deceptive Trade Practices-Consumer Protection Act or any similar federal or state statute to the extent permitted by law.

H. **MODIFICATIONS** - Customer agrees that Halliburton shall not be bound by any modifications to this agreement, 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, 5151 San Felipe, Houston, Texas 77056.



HALLIBURTON ENERGY SERVICES

TICKET CONTINUATION CUSTOMER COPY

TICKET No. 920181

FORM 1911 R-10

CUSTOMER: **Oxy USA** WELL: **Gillespie** DATE: **5-29-96** PAGE **2** OF **2**

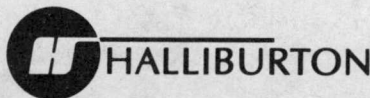
PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF		QTY.	U/M	QTY.	U/M		
					390 cu.ft. 60/40 Premium Poz						
504043	516.00272				Premium Ont					11.08	2592.72
506105	156.00286				Poz	11544	lb			.074	854.26
506121	516.00259				Gel 2%	7	sk				NC
507277	516.00259				Add Gel 4%	14	sk			18.60	260.40
500207					SERVICE CHARGE						
						CUBIC FEET		418		1.35	564.30
508806					MILEAGE CHARGE						
						TON MILES		622.177		.95	591.07
						TOTAL WEIGHT		35,553			
						LOADED MILES		35			

AUG 22 1996
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 KANSAS CORPORATION COMMISSION
 CONSERVATION DIVISION
 WICHITA, KS

ORIGINAL

No. B 341813

CONTINUATION TOTAL	4,862.75
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JOB LOG HAL-2013-C

DATE 5-29-96 PAGE NO. 1

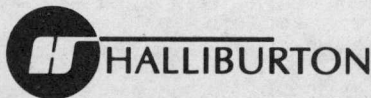
CUSTOMER Oxy U.S.A. WELL NO. 4 LEASE GELLESPIE JOB TYPE P.T.A. TICKET NO. 920121

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	10:00							CALLED OUT READY 12:30
	12:30							ON LOC. REG. L.O.D.C.
	14:45							CIRCULATE TO CONNECTION HOLE WITH RIG AT 1 ST PLUG 100 SKS @ 5470'
	15:35							HOOK TO HALLIBURTON
	15:39	3.2	10			500		START H ₂ O AHEAD
	15:42	4.1	29.2			500		START CMT @ 13.2 #/gal
	15:49	3.5	3.5			250		START H ₂ O BEHIND
	15:50	6.0	66.7			250		START MUD Displacement
	16:01					VAC.		SHOT DOWN
	16:02							LAY DOWN DRILL PIPE T.O.C. 4,985'
								2 ND PLUG 100 SKS @ 2910'
	17:25							HOOK TO HALLIBURTON
	17:30	2.5	10			50		START H ₂ O AHEAD
	17:34	4.8	29.2			250		START CMT @ 13.2 #/gal
	17:40	3.5	3.5			50		START H ₂ O BEHIND
	17:44	5.0	30.3			50		START MUD Displacement
	17:47					VAC.		SHOT DOWN
	17:49							LAY DOWN DRILL PIPE T.O.C. 2425'
								3 RD PLUG 100 SKS @ 1730'
	18:25							HOOK TO HALLIBURTON
	18:26	2.5	10			50		START H ₂ O AHEAD
	18:30	4.2	29.2			250		START CMT @ 13.2 #/gal
	18:37	3.5	3.5			50		START H ₂ O BEHIND
	18:38	4.5	13.5			50		START MUD Displacement
	18:41					VAC.		SHOT DOWN
	18:43							LAY DOWN DRILL PIPE T.O.C. 1245'
								4 TH PLUG
	19:24							HOOK TO HALLIBURTON
	19:25	4.2	30			50		START H ₂ O AHEAD
	19:32	4.6	14.6			200		START CMT @ 13.2 #/gal
	19:35	2	4			50		START Displacement (H ₂ O)
	19:37					VAC.		SHOT DOWN
	19:39							LAY DOWN DRILL PIPE T.O.C. 307'

ORIGINAL

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AUG 22 1996



JOB LOG HAL-2013-C

DATE	PAGE NO.
5-29-96	2

CUSTOMER Oxy U.S.A	WELL NO. 4	LEASE GILLESPIE	JOB TYPE P.T.A.	TICKET NO. 920181
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CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	

	19:55							OUT OF HOLE
	20:05							Rig WORK (LAY DOWN RAT AND MOUSE PULL B.O.P)
	21:55							HOOK TO HALLIBURTON
	22:00		4					PLUG SURFACE
	22:05		4					Plug RAT
	22:10		3					Plug Mouse
	22:15							Job Complete

ORIGINAL

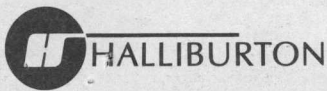
THANK YOU FOR CALLING
HALLIBURTON
ROBERT & CREW

RECEIVED
KANSAS CORPORATION COMMISSION

AUG 22 1996

CONSERVATION DIVISION
WICHITA, KS

CUSTOMER



JOB SUMMARY

HALLIBURTON DIVISION
HALLIBURTON LOCATION

Mid Cont.
LIBERAL Ks

BILLED ON TICKET NO. 920181

WELL DATA

FIELD _____ SEC. 3 TWP. 32 S RNG. 39 W COUNTY ST. JOHNS 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 _____

JOB DATA

CALLER OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE <u>5-29-96</u>	DATE <u>5-29-96</u>	DATE <u>5-29-96</u>	DATE <u>5-29-96</u>
TIME <u>10:00</u>	TIME <u>12:30</u>	TIME <u>15:35</u>	TIME <u>22:15</u>

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
<u>R. Elwood</u>	<u>420041 P.U.</u>	<u>LIBERAL Ks</u>
<u>D. MAGNER</u>	<u>52938 G. 1489</u>	<u>"</u>
<u>J. ANGER</u>	<u>50260 G. 3813</u>	<u>Hogotank</u>

ORIGINAL

TOOLS AND ACCESSORIES

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

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 _____

DEPARTMENT 5001 Cont

DESCRIPTION OF JOB PT.A.

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

CUSTOMER REPRESENTATIVE **X**

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
	<u>390</u>	<u>60440 P02</u>		<u>B</u>	<u>6% GEL</u>	<u>1.64</u>	<u>13.2</u>

AUG 22 1996

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 _____ REASON _____

SUMMARY

CONSERVATION DIVISION
WICHITA, KS

PRESLUSH: BBL.-GAL. _____ TYPE _____

LOAD & BKDN: BBL.-GAL. SEE Job 109 PAD: BBL.-GAL. _____

TREATMENT: BBL.-GAL. _____ DISPL: BBL.-GAL. _____

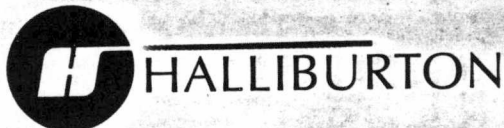
CEMENT SLURRY: BBL.-GAL. _____

TOTAL VOLUME: BBL.-GAL. _____

REMARKS

CUSTOMER
LEASE
WELL NO.
JOB TYPE
DATE

SERVICE CENTER



REMIT TO:
P.O. BOX 951046
DALLAS, TX 75395-1046

INVOICE

INVOICE NO.	DATE
920104	05/22/1997

WELL LEASE NO./PROJECT	WELL/PROJECT LOCATION	STATE	OWNER		
01113PIE 4	STEVENS	KS	SAME		
SERVICE LOCATION	CONTRACTOR	JOB PURPOSE	TICKET DATE		
LIBERAL	BEREDCO	CEMENT SURFACE CASING	05/22/1997		
ACCT. NO.	CUSTOMER AGENT	VENDOR NO.	CUSTOMER P.O. NUMBER	SHIPPED VIA	FILE NO.
659167	CAL MYLIE	E-26		COMPANY TRUCK	6837

OXY USA INC.
P.O. BOX 2520
LIBERAL, KS 67905-2520

ORIGINAL

DIRECT CORRESPONDENCE TO:

P O BOX 1598
LIBERAL KS 67901

RECEIVED
KANSAS CORP COM

REFERENCE NO.	DESCRIPTION	QUANTITY	UM	UNIT PRICE	AMOUNT
000-117	PRICING AREA - MID CONTINENT MILEAGE CEMENTING ROUND TRIP	116	MI	2.85	330.60
	DISCOUNT-(BID)	40.5	%		133.89-
000-119	MILEAGE FOR CREW	116	MI	1.50	174.00
	DISCOUNT-(BID)	40.5	%		70.47-
030-018	CEMENTING PUMP 59, PLASTIC TOP	8 5/8 IN	EA	180.00	135.00
	DISCOUNT-(BID)	40.5	%		52.65-
001-016	CEMENTING CASING	1716	FT	1,320.00	1,320.00
	DISCOUNT-(BID)	40.5	%		534.60-
16A 830.2171	CASING SHOE - 8 5/8" BRD THD.	1	EA	233.00	233.00
	DISCOUNT-(BID)	32.0	%		74.56-
24A 815.17502	INSERT FLOAT VALVE - 8 5/8" BRD	1	EA	171.00	171.00
	DISCOUNT-(BID)	32.0	%		54.72-
27 815.19414	FILL UP UNIT 7" - 8 5/8"	1	EA	64.00	64.00
	DISCOUNT-(BID)	32.0	%		20.48-
46 806.72750	CLAMP-LIMIT 8 5/8 FRICT-W/DOGS	1	EA	21.00	21.00
	DISCOUNT-(BID)	32.0	%		6.72-

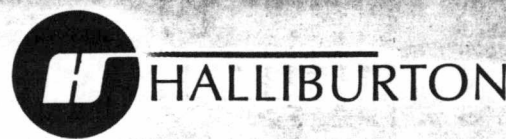
***** CONTINUED ON NEXT PAGE *****

APPENDIX JOB OPT

FORM HAL-1900-F

TERMS: 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 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





INVOICE

INVOICE NO.	DATE
920104	05/22/1997

WELL LEASE NO./PROJECT		WELL/PROJECT LOCATION		STATE	OWNER
OILLESPITE 4		STEVENS		KS	SAME
SERVICE LOCATION	CONTRACTOR	JOB PURPOSE			TICKET DATE
LIBERAL	BERFECO	CEMENT SURFACE CASING			05/22/1997
ACCT. NO.	CUSTOMER AGENT	VENDOR NO.	CUSTOMER P.O. NUMBER	SHIPPED VIA	FILE NO.
A59167	DAL. MYLIE	E-26		COMPANY TRUCK	0837

DIRECT CORRESPONDENCE TO:

OXY USA INC.
P.O. BOX 2528
LIBERAL, KS 67905-2528

ORIGINAL

P O BOX 1598
LIBERAL KS 67901

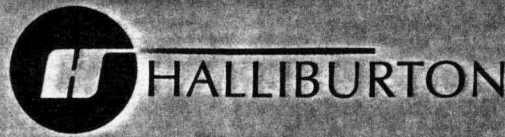
REFERENCE NO.	DESCRIPTION	QUANTITY	UM	UNIT PRICE	AMOUNT
31	CENTRALIZER - 8-5/8 X 12-1/4	4 EA		61.00	244.00
806 61048	DISCOUNT (BTB)	32.0 %			78.00-
320	BASKET-LMT-8 5/8 ODO X 21"-SLP	1 EA		124.00	124.00
806 71460	DISCOUNT (BTB)	32.0 %			39.49-
350	HALLIBURTON WELD-A	1 EA		16.75	16.75
090 10802	DISCOUNT (BTB)	32.0 %			5.36-
504-282	HIDDEN-2 PREMIUM PLUS CEMENT	470 SK		15.74	7,387.20
	DISCOUNT-(BTB)	40.5 %			3,190.26-
504-050	CEMENT - PREMIUM PLUS	570 100 SK		12.62	1,262.00
	DISCOUNT-(BTB)	40.5 %			511.11-
509-406	ANHYDROUS CALCIUM CHLORIDE	15 SK		34.75	521.25
	DISCOUNT-(BTB)	40.5 %			223.25-
507-210	FLOBLE	260 LB		1.65	429.00
	DISCOUNT-(BTB)	40.5 %			173.74-
500-207	BULK SERVICE CHARGE	641 CFT		1.35	865.35
	DISCOUNT-(BTB)	40.5 %			350.46-
500-206	MILEAGE ONTO MAT ORL OR RETURN	758.69 TMI		.95	701.70
	DISCOUNT (BTB)	40.5 %			284.18-

INVOICE SUBTOTAL

***** CONTINUED ON NEXT PAGE *****

RECEIVED
 KANSAS CORP COMM
 1997 APR 15 A 10:42

SERVICE CENTER



REMIT TO: P.O. BOX 951046 DALLAS, TX 75395-1046

INVOICE

INVOICE NO.	DATE
920104	05/22/1997

WELL LEASE NO./PROJECT		WELL/PROJECT LOCATION		STATE	OWNER
GILLESPIE 4		STEVENS		KS	SAME
SERVICE LOCATION	CONTRACTOR	JOB PURPOSE		TICKET DATE	
LIBERAL	BEREDCO	CEMENT SURFACE CASING		05/22/1997	
ACCT. NO.	CUSTOMER AGENT	VENDOR NO.	CUSTOMER P.O. NUMBER	SHIPPED VIA	FILE NO.
659167	CAL WYLIE	E-26		COMPANY TRUCK	0887

DIRECT CORRESPONDENCE TO:

OXY USA INC.
P.O. BOX 2520
LIBERAL, KS 67905-2520

ORIGINAL P.O. BOX 1598
LIBERAL, KS 67901

REFERENCE NO.	DESCRIPTION	QUANTITY	UM	UNIT PRICE	AMOUNT
	DISCOUNT--(BID)				5,801.21-
	INVOICE BID AMOUNT				8,710.64
	*--KANSAS STATE SALES TAX				373.62
	*--LIBERAL CITY SALES TAX				76.24
	*--SEWARD COUNTY SALES TAX				114.35
INVOICE TOTAL - PLEASE PAY THIS AMOUNT					\$9,274.83

KANSAS STATE COMMISSION

AFFIX JOB TKT

TERMS: 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 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

WELL DATA

FIELD _____ SEC 3 TWP 32 RING 39 COUNTY Stevens 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 _____

Table with columns: NEW USED, WEIGHT, SIZE, FROM, TO, MAXIMUM PSI ALLOWABLE. Rows include CASING, LINER, TUBING, OPEN HOLE, PERFORATIONS.

JOB DATA

CALLLED OUT _____ ON LOCATION _____ JOB STARTED _____ JOB COMPLETED _____ DATE 5-22-96 DATE 5-22-96 DATE 5-22-96 DATE 5-22 TIME 0530 TIME 0830 TIME 1340 TIME 1450

PERSONNEL AND SERVICE UNITS

ORIGINAL

Table with columns: NAME, UNIT NO. & TYPE, LOCATION

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 _____

DEPARTMENT CML DESCRIPTION OF JOB CML 8 3/8 S.P. JOB DONE THRU: TUBING [] CASING [x] ANNULUS [] TBG./ANN. [] CUSTOMER REPRESENTATIVE X HALLIBURTON OPERATOR Jye Davie COPIES REQUESTED _____

CEMENT DATA

Table with columns: STAGE, NUMBER OF SACKS, CEMENT, BRAND, BULK SACKED, ADDITIVES, YIELD CU.FT./SK., MIXED LBS./GAL.

PRESSURES IN PSI

SUMMARY

VOLUMES

CIRCULATING _____ DISPLACEMENT _____ PRESLUSH: BBL.-GAL. _____ TYPE _____ BREAKDOWN _____ MAXIMUM _____ LOAD & BKDN: BBL.-GAL. _____ PAD: BBL.-GAL. _____ AVERAGE _____ FRACTURE GRADIENT _____ TREATMENT: BBL.-GAL. _____ DISPL: BBL.-GAL. 106.5 SHUT-IN: INSTANT _____ 5-MIN _____ 15-MIN. _____ CEMENT SLURRY: BBL.-GAL. 269.5 LC 23.5 T.C. HYDRAULIC HORSEPOWER _____ TOTAL VOLUME: BBL.-GAL. _____ ORDERED _____ AVAILABLE _____ USED _____ AVERAGE RATES IN BPM _____ TREATING _____ DISPL. _____ OVERALL _____ CEMENT LEFT IN PIPE _____ FEET 41 REASON Shop joints

CUSTOMER NAME, LEASE NO., WELL NO., JOB TYPE, DATE

JOB LOG HAL-2013-C

CUSTOMER OXY USD	WELL NO. 4	LEASE Gillespie	JOB TYPE 8 5/8 J.T.	TICKET NO. 720104
---------------------	---------------	--------------------	------------------------	----------------------

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0530							called out for job.
	0830							on loc rig drilling.
	1020							start SBP.
	1127							out of hole W.P.P.
	1200							start 8 5/8 csq. & F.E.
	1322							CSQ ON BATH HOOK UP 8 5/8 P.C & Circ. Iron to rig.
	1327							Brk circ. w/ rig pump.
	1330							circ to pit
	1335							Thru circ. Hook Iron to P.T.
	1340	6.5	269.5 269.5	✓		150		start pumping 4700x mixk 3% ll 1/2 1st F10 at 11.1 #1901.
	1420	7.5	23.5	✓		280		start pumping 1000x pt 2% ll 1/4 F10 0114
	1423	0	293	✓		0		THRU. mixing shut down drop plug.
	1424	6.5	106.5	✓		150		start displacement
	1424	6.5	106.5	✓		150		0 bbls displaced. cmt to surface
	1442	2.5	106.5	✓		450		100 bbls displaced. 510 rate
	1446	2.5	106.5	✓		450 900		Liquid Plug.
	1450	0	106.5	✓		900 450 600		Release float - Head did not hold. Job over psi up shut in head.
	1450							Job over
								106 bbls cmt to pit
								1845x cmt to pit
								Thanks for calling.
								Tyce Danny & crew

ORIGINAL



CALL FOR SERVICE AND SALES HAL-0070-F

COMPANY OXY USA, INC		DATE	
CONTRACTOR BEREDCO RIG 2		TOWN OR FIELD Sect 3/32S/39W	
LEASE GILLESPIE A		WELL NO. 4	COUNTY STEVENS CO. KS
DIRECTIONS DERMOTT SCHOOL, 2E, 2 3/4S, EINTO			

WEST OFF OF 25 FOR 12.8 MILES TURN SOUTH @ MORTON COUNTY LINE

PUMPING SERVICE	<input checked="" type="checkbox"/> SURFACE <input type="checkbox"/> INTERMEDIATE <input type="checkbox"/> LONG STRING <input type="checkbox"/> LINER <input type="checkbox"/> PLUG BACK <input type="checkbox"/> PLUG TO ABANDON <input type="checkbox"/> SQUEEZE <input type="checkbox"/> ACID <input type="checkbox"/> OTHER						
	CASING SIZE 8 5/8	THREAD 8RD	TUBING SIZE	PLUG CONTAINER YES	SWAGE YES	CSG SWIVEL	TOP PLUG 5 1/2 Plastic
	NUMBER AND TYPE TRUCKS WANTED REM & Bulk Cement						BOTTOM PLUG
	REMARKS 1750' 8 5/8 128% EXCESS 1244' FSL, 1230' FWL GL ELEV. 3225						HOLE SIZE 12 1/4
MUD WEIGHT							

MATERIALS	CEMENT	# OF SACKS 470	TYPE MC PREM. PLUS	ADDITIVES 3% CaCl₂, 1/2 #/sk FLOCELE 11.1 3.22 20.17
		# OF SACKS 100	TYPE PREM. PLUS	ADDITIVES 2% CaCl₂, 1/4 #/sk FLOCELE H&B 1.32 63
		# OF SACKS	TYPE	ADDITIVES
		# OF SACKS	TYPE	ADDITIVES
		# OF SACKS	TYPE	ADDITIVES
		# OF SACKS	TYPE	ADDITIVES
SPACER OR FLUSH	QUANTITY	TYPE	REMARKS	
OTHER	QUANTITY	TYPE	REMARKS	
REMARKS NOTE CMT. RETURNS ON JOBL OG RECORD DENSITY, RATE, PS 1 on Strip Chart QRY COPIES TO Willson				

TESTING & TOOLS SERVICE	TYPE JOB		TOOL		
	CASING SIZE	CASING WEIGHT	CASING GRADE	PACKER DEPTH	MUD WEIGHT
	SIZE AND TYPE DRILL PIPE OR TUBING			TUBING TESTER	JARS
	WIRELINE SETTING TOOL	STINGER	MECHANICAL SETTING TOOL		
	SWIVEL	SQUEEZE MANIFOLD	OTHER		
	REMARKS				

SALES ITEMS	CASING SIZE 8 5/8	CASING WEIGHT 24#	THREAD	
	GLIDE SHOE 1 Texas Pattern	FLOAT SHOE	FLOAT COLLAR	
	CENTRALIZERS - NUMBER (4) 806-61048	SIZE 8 5/8 x 12 1/4	TYPE	INSERT FLOAT VALVE (X) W/Fill
	WELL CLEANERS - NUMBER	TYPE	DRY TOOL	
	LIMIT CLAMPS 1	WELD-A 1 890.10802	OTHER	
	REMARKS 1) 316-629-4227			

ORDERED BY Cal Wylie H/ 316-697-2476	TIME OF CALL Pumps 116
CALL TAKEN BY Willson CMT 40.5% FE 32	TIME READY Now
OPERATOR OR DRIVER CALLED	TIME



JOB SUMMARY

HALLIBURTON DIVISION
HALLIBURTON LOCATION

MED CONT.
LIBERAL Ks

BILLED ON TICKET NO. 920/81

WELL DATA

FIELD _____ SEC. 3 TWP. 32S RNG. 39W COUNTY STEVEN'S 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						
LINER						
SLIDING DR. U		16.6	4 1/2	K.B	5470	
OPEN HOLE			7 7/8	G.L	6000	SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

ORIGINAL

JOB DATA

CALLLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE <u>5-29-96</u>	DATE <u>5-29-96</u>	DATE <u>5-29-96</u>	DATE <u>5-29-96</u>
TIME <u>10:00</u>	TIME <u>12:30</u>	TIME <u>15:35</u>	TIME <u>22:15</u>

TOOLS AND ACCESSORIES

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

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
<u>R. Elwood</u>	<u>420041</u>	<u>LIBERAL Ks</u>
<u>D. 4360</u>	<u>P.U.</u>	
<u>D. MAGAHER</u>	<u>52938</u>	<u>"</u>
<u>G. 1499</u>	<u>75051 (P)</u>	
<u>J. ADAR</u>	<u>50866</u>	<u>Hugo tank</u>
<u>G. 3813</u>	<u>7649 (B)</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 _____

DEPARTMENT SOOL CONT.
 DESCRIPTION OF JOB P.T.A.
 JOB DONE THRU: 2:00 CASING ANNULUS TBG./ANN.
 CUSTOMER REPRESENTATIVE X
 HALLIBURTON OPERATOR ROBERT ELWOOD COPIES REQUESTED _____

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIONS	YIELD CU.FT./SK.	MIXED LBS./GAL.
	<u>390</u>	<u>6940 Poz</u>		<u>B</u>	<u>6 1/2 GEL</u>	<u>1.64</u>	<u>12.2</u>

RECEIVED
KANSAS CORPORATION COMMISSION

AUG 22 1996

PRESSURES IN PSI

SUMMARY

CONSERVATION DIVISION
WICHITA, KS
VOLUMES

CIRCULATING _____ DISPLACEMENT _____ PRESLUSH: BBL.-GAL. _____ TYPE _____
 BREAKDOWN _____ MAXIMUM _____ LOAD & BKDN: BBL.-GAL. _____ PAD: BBL.-GAL. _____
 AVERAGE _____ FRACTURE GRADIENT _____ TREATMENT: BBL.-GAL. _____ DISPL: BBL.-GAL. _____
 SHUT-IN: INSTANT _____ 5-MIN _____ 15-MIN. _____ CEMENT SLURRY: BBL.-GAL. _____
 HYDRAULIC HORSEPOWER _____ TOTAL VOLUME: BBL.-GAL. _____
 ORDERED _____ AVAILABLE _____ USED _____ REMARKS _____
 AVERAGE RATES IN BPM _____
 TREATING _____ DISPL. _____ OVERALL _____
 CEMENT LEFT IN PIPE _____
 FEET _____ REASON _____

CUSTOMER
LEASE
WELL NO.
JOB TYPE
DATE

ORD U.S.A.

GILLIES P&E

W

P.T.A.

P.T.A.

5-29-96

JOB LOG HAL-2013-C

CUSTOMER Oxy U.S.A.	WELL NO. 4	LEASE GELLESPIE	JOB TYPE P.T.A.	TICKET NO. 920181
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CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	10:00							CALLED OUT READY 12:30
	12:30							ON LOC. REG. L.D.D.C.
	14:45							CIRCULATE TO CONNECTION HOLE WITH RIG 1 ST Plug 100 SKS @ 5470'
	15:35							HOOK TO HALLIBURTON
	15:39	3.2	10			500		START H ₂ O AHEAD
	15:42	4.1	29.2			500		START CMT @ 13.2 #/gal
	15:49	3.5	3.5			250		START H ₂ O BEHIND
	15:50	6.0	66.7			250		START MUD DISPLACEMENT
	16:01					VAC.		SHUT DOWN
	16:02							LAY DOWN DRILL PIPE T.O.C. 4,985' 2 ND Plug 100 SKS @ 2910'
	17:25							HOOK TO HALLIBURTON
	17:30	2.5	10			50		START H ₂ O AHEAD
	17:34	4.8	29.2			250		START CMT @ 13.2 #/gal
	17:40	3.5	3.5			50		START H ₂ O BEHIND
	17:40	5.0	30.3			50		START MUD DISPLACEMENT
	17:47					VAC.		SHUT DOWN
	17:49							LAY DOWN DRILL PIPE T.O.C. 2425' 3 RD Plug 100 SKS @ 1730'
	18:25							HOOK TO HALLIBURTON
	18:26	2.5	10			50		START H ₂ O AHEAD
	18:30	4.2	29.2			250		START CMT @ 13.2 #/gal
	18:37	3.5	3.5			50		START H ₂ O BEHIND
	18:38	4.5	13.5			50		START MUD DISPLACEMENT
	18:41					VAC.		SHUT DOWN
	18:43							LAY DOWN DRILL PIPE T.O.C. 1245' 4 TH Plug
	19:24							HOOK TO HALLIBURTON
	19:25	4.2	30			50		START H ₂ O AHEAD
	19:32	4.6	14.6			200		START CMT @ 13.2 #/gal
	19:35	2	4			50		START DISPLACEMENT (H ₂ O)
	19:37					VAC.		SHUT DOWN
	19:39							LAY DOWN DRILL PIPE T.O.C. 307'

ORIGINAL

RECEIVED
KANSAS CORPORATION COMM

AUG 22 1996

JOB LOG HAL-2013-C

CUSTOMER <i>Oxy U.S.A</i>	WELL NO. <i>4</i>	LEASE <i>GILLESPIE</i>	JOB TYPE <i>P.T.A.</i>	TICKET NO. <i>920181</i>
------------------------------	----------------------	---------------------------	---------------------------	-----------------------------

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	<i>19:55</i>							<i>OUT OF HOLE</i>
	<i>20:05</i>							<i>Rig WORK (LAY DOWN RAT AND MOUSE POLL B.O.P)</i>
	<i>21:55</i>							<i>HOOK TO HALLIBURTON</i>
	<i>22:00</i>		<i>4</i>					<i>PLUG SURFACE</i>
	<i>22:05</i>		<i>4</i>					<i>PLUG RAT</i>
	<i>22:10</i>		<i>3</i>					<i>PLUG MOUSE</i>
	<i>22:15</i>							<i>Job Complete</i>
								ORIGINAL
								<i>THANK YOU FOR CALLING HALLIBURTON ROBERT & CREW</i>
								RECEIVED KANSAS CORPORATION COMMISSION
								AUG 22 1996
								CONSERVATION DIVISION WICHITA, KS



HALLIBURTON

TICKET CONTINUATION

ORIGINAL

TICKET No. 920181

HALLIBURTON ENERGY SERVICES

FORM 1911 R-10

CUSTOMER Oxy USA WELL Gillespie DATE 5-29-96 PAGE 2 OF 2

Table with columns: PRICE REFERENCE, SECONDARY REFERENCE/PART NUMBER, ACCOUNTING (LOC, ACGT, DF), DESCRIPTION, QTY., U/M, UNIT PRICE, AMOUNT. Includes rows for 504043, 506105, 506121, 507277, 500207, and 500306.

ORIGINAL

RECEIVED KANSAS CORPORATION COMMISSION AUG 22 1996 CONSERVATION DIVISION WICHITA, KS

No. B 341813

CONTINUATION TOTAL 4,862.75



CHARGE TO:
Oxy U.S.A.

ADDRESS

CITY, STATE, ZIP CODE

ORIGINAL

TICKET

No.

920181 - 9

PAGE 1 OF 2

HAL-1906-N

SERVICE LOCATIONS 1. <u>025540 Liberal</u>	WELL/PROJECT NO. <u>4</u>	LEASE <u>GILLESPIE</u>	COUNTY/PARISH <u>STEVENS</u>	STATE <u>Ks</u>	CITY/OFFSHORE LOCATION	DATE <u>5-29-96</u>	OWNER <u>SAME</u>
2. <u>025535 Hopton</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>BRECCO</u>	RIG NAME/NO. <u>2</u>	SHIPPED VIA <u>Hes</u>	DELIVERED TO <u>LOCATION</u>	ORDER NO.
3.	WELL TYPE <u>01</u>	WELL CATEGORY <u>06</u>	JOB PURPOSE <u>115</u>	WELL PERMIT NO.	WELL LOCATION		
4.	REFERRAL LOCATION	INVOICE INSTRUCTIONS					

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
000-117					MILEAGE	1	U	116	M	2.85	330.60
000-119					CREW MILEAGE	1	U	116	M	1.50	174.00
009-019					Pump CHARGE	6	HR	5420	FT		2,010.00
001-018					ADDITIONAL HOURS	1	HR	3	EA	235.00	705.00

ORIGINAL

RECEIVED
KANSAS CORPORATION COMMISSION
AUG 22 1996
CONSERVATION DIVISION
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.

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

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?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND			

PAGE TOTAL	3219	60
FROM CONTINUATION PAGE(S)	4862	75
	8082	35
SUB-TOTAL APPLICABLE TAXES WILL BE ADDED ON INVOICE	6142	61

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) <u>Cal Wylie</u>	CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE) <u>X</u>	HALLIBURTON OPERATOR/ENGINEER <u>ROBERT ELWOOD</u>	EMP # <u>D. 4360</u>	HALLIBURTON APPROVAL <u>Orville Nicholas 24%</u>
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