

ORIGINAL

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

API NO. 15- 189-21,630-0000
County STEVENS
C - NE - NW - NW Sec. 13 Twp. 31S Rge. 35 X W
330 Feet from X(N) (circle one) Line of Section
990 Feet from X(W) (circle one) Line of Section

Operator: License # 4549

Name: ANADARKO PETROLEUM CORPORATION

Address P.O. BOX 351

CONFIDENTIAL

City/State/Zip LIBERAL, KANSAS 67905-0351

Purchaser: TEXACO TRADING & TRANSPORTATION

Operator Contact Person: J.L. ASHTON

Phone (316) 624-6253

Contractor: Name: GABBERT-JONES, INC.

License: 5842

Wellsite Geologist: NA

Designate Type of Completion
 New Well Re-Entry Workover

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

If Workover:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

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

5/17/94 5/27/94 7/6/94
Spud Date Date Reached TD Completion Date

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

Lease Name HANKE "A" Well # 5

Field Name LAHEY

Producing Formation CHESTER

Elevation: Ground 2966.5' KB 2979.5

Total Depth 5748' PBTD 5691'

Amount of Surface Pipe Set and Cemented at 1766 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set 3047 Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan ALT 1 8.2K 12-14-94
(Data must be collected from the Reserve Pit)

Chloride content 76,933 ppm Fluid volume 5000 bbls

Dewatering method used NATURAL EVAPORATION

Location of fluid disposal if hauled offsite: _____

RELEASED

Operator Name hul

Lease Name OCT 26 1995 License No. _____

Quarter 1 Sec. 13 Twp. 31S Rng. 35 E/W

County STEVENS **CONFIDENTIAL**

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information on side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

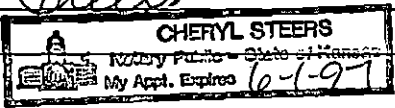
Signature Leslie I. Barnes

Title SENIOR TECHNICAL ASSISTANT Date 8/2/94

Subscribed and sworn to before me this 2nd day of August, 1994.

Notary Public C Cheryl Steers

Date Commission Expires _____



K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other
(Specify)

RECEIVED
KANSAS CORPORATION COMMISSION (67-91)
8-16-94
AUG 16 1994

CONSERVATION DIVISION
WICHITA, KS

Property of Ks Comm Comm

SIDE TWO

Operator Name ANADARKO PETROLEUM CORPORATION Lease Name HANKE "A" Well # 5
 Sec. 13 Twp. 31S Rge. 35 East West
 County STEVENS

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 checked="" type="checkbox"/> Log	Formation (Top), Depth and Datums	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	ODELL	2651	
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	WINFIELD	2665	
List All E.Logs Run:		COUNCIL GROVE	2883	
DUAL INDUCTION		WABAUNSEE	3259	
BOREHOLE COMPENSATED ACOUSTIC		TORONTO	3982	
MINI		LANSING	4178	
COMPENSATED NEUTRON		KANSAS CITY "A"	4648	
		CHEROKEE	5028	
		MORROW	5361	
		CHESTER	5570	
		STE. GENEVIEVE	5651	
		ST. LOUIS	5708	

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	1766	50/50 POZMIX/ CLASS "H"	625/200	4% TOT GEL, 2% CC 3% CC
PRODUCTION	7 7/8	5 1/2	15.5	5748	65/35 POZMIX/ 50/50 POZMIX	50/285	1/4# SK FLOCELE, 5# SK GILSONITE, 10% SALT
		FO TOOL @		3047	65/35 POZMIX	100	1/4# SK FLOCELE

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	Depth
4	5616-50, 5588-5607	ACIDIZE W/5300 GALS 7-1/2% FEHCL ACID	5588-5650
		FRAC DWN CSG W/35,000 GAL, X-LINKED GELLD 2% KCL WTR	
		134,000# 16/30 SD	5588-5650

TUBING RECORD	Size 2 3/8	Set At 5558	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---------------	------------	-------------	-----------	---

Date of First, Resumed Production, SWD or Inj. 6/27/94 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil 61 Bbls.	Gas 0 Mcf	Water 242 Bbls.	Gas-Oil Ratio --	Gravity --
-----------------------------------	--------------	-----------	-----------------	------------------	------------

Disposition of Gas: NONE METHOD OF COMPLETION
 Vented Sold Used on Lease (If vented, submit ACO-18.) Open Hole Perf. Dually Comp. Commingled 5588-5650 OA
 Other (Specify)

GABBERT-JONES, INC.
WICHITA, KANSAS

ORIGINAL

- DRILLERS' WELL LOG -

WELL NAME: Hanke "A" #5
SEC 13-31 S-35W
Stevens County, Kansas

CONFIDENTIAL

COMMENCED: 5-17-94
COMPLETED: 5-28-94
OPERATOR: Anadarko Petroleum Corp.

DEPTH		FORMATION	REMARKS
From	To		
0	550	Sand-Clay	Ran 43jts of 24# 8 5/8" csg set @ 1766' - cemented w/625 sks 50/50 posmix 4% gel 2% CC + 200sks class H common 3%CC PD @ 8:45PM 5-18-94
550	1235	Redbed	
1235	1430	Glorietta Sand	
1430	1733	Redbed-Anhy	
1733	1776	Redbed	
1776	2040	Sand-Redbed	
2040	5750	Lime-Shale	

5750-TD

ALL

AUG 1 5

CONFIDENTIAL

RELEASED

OCT 2 6 1995

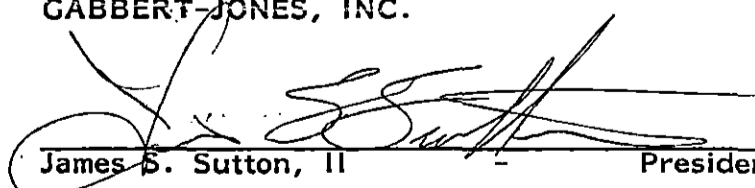
FROM CONFIDENTIAL

Ran 131 jts of 15 1/2# 5 1/2" csg set @ 5745' F.O. Tool@ 3047' - cemented w/50 sks 50/50 posmix 1/4# Flocele tailed w/285 sks 50/50 posmix 1/4# Flocele 5# Gilsonite 10% Salt PD @ 12:15PM 5-28-94 RR @ 1:15PM 5-28-94

STATE OF KANSAS]
COUNTY OF SEDWICK]

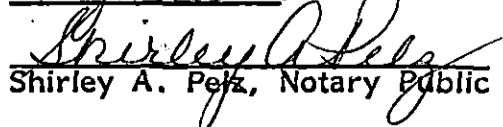
I, the undersigned, being duly sworn on oath, state that the above Drillers' Well log is true and correct to the best of my knowledge and belief and according to the records of this office.

GABBERT-JONES, INC.


James B. Sutton, II President

Subscribed & sworn to before me this 2nd day of

June, 1994


Shirley A. Pelz, Notary Public



My commission expires October 18, 1997



DATE 5-18-94 PAGE NO

JOB LOG FORM 2013 R-4

CUSTOMER		WELL NO.	LEASE	JOB TYPE	TICKET NO.	
AMARCO		A-5	HARKE	8 1/2	590429	
CHART NO.	TIME	RATE (BPM)	VOLUME (BBL)(GAL)	PUMPS	PRESSURE (PSI) (TUBING) (CASING)	DESCRIPTION OF OPERATION AND MATERIALS
						13,015,354
						STRENGTH 1CS ORIGINAL
	18:20					PREP ON LOG
	18:30					ON LOG CONFIDENTIAL
						SADDY MEAT
						HOWCO RUN FEQUIP
	18:45					HOWCO HOOD UP TO GIB
	18:59					HOWCO HOOD UP 1" GMP
1	19:00	6			500	START GMP
2		6	201		500	FINISH GMP
3						RELEASE PLUG
4		6			500	START DISP
5	19:55	6	109		550	FINISH DISP
6		6	110		1000	QUIL IN SENT
	20:00					FLOAT HOLD YFS
						GMP GIB YFS (17656)
						RELEASED
						AUG 26 1995
						CONFIDENTIAL
						AUG 15
						CONFIDENTIAL

FIELD OFFICE



HALLIBURTON SUMMARY

HALLIBURTON LOCATION **LAMAR CO**

BILLED ON TICKET NO. **590429**

WELL DATA
WELL NO. **21** RING **25** COUNTY **STEVENSON** 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 _____

	NEW USED	WEIGHT	SIZE	FROM	TO	MAXIMUM PSI ALLOWABLE
CASING		N 241	8 1/2	150	1763	
LINING						
TUBING						
OPEN HOLE			12 1/4	150	1768	SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

ORIGINAL

TOOLS AND ACCESSORIES

JOB DATA

CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE 5-18-94	DATE 5-18-94	DATE 5-18-94	DATE 5-18-94
TIME 11:00	TIME 11:30	TIME	TIME

TYPE AND SIZE	QTY	MAKE
FLOAT COLLAR	1	
GUIDE SHOES	1	
CENTRALIZERS	1	
BOTTOM PLUG	1	
TOP PLUG	1	
HEAD	1	
PACKER	1	
OTHER	1	

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
C. Kinnison	3581	6/15/94
E. Jeff	22454	
C. Smith	52527	7/16/94
R. Baker	44019	11/16/94
ADP		
G-111		

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

NR AGENT TYPE _____ GAL

FLUID LOSS ADD. TYPE _____ GAL-LB

GELLING AGENT TYPE _____ GAL-LB

ERIC RED AGENT TYPE _____ GAL-LB

BREAKER TYPE _____ GAL-LB

BLOCKING AGENT TYPE _____ GAL-LB

PERFPAC BALLS TYPE _____ QTY

OTHER _____

OTHER _____

DEPARTMENT **Cost**

DESCRIPTION OF JOB **8 1/2**

CONFIDENTIAL

CEMENT DATA

STAGE	NUMBER OF BAGS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
1	46	50/50	220C	46	220C C NCC	1.43	136
2	205	Return	220C	205		1.16	152

AUG 15

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 _____

TACATING _____ DISPL. _____ OVERALL _____

CEMENT LEFT IN PIPE _____

FEET **46** REASON **Floor**

SUMMARY

PRESLUSH: BBL-GAL _____ TYPE _____

LOAD & BKDN: BBL-GAL _____ PAD: BBL-GAL _____

TREATMENT: BBL-GAL _____ DISPL: BBL-GAL **140**

CEMENT SLURRY: BBL-GAL **201**

TOTAL VOLUME: BBL-GAL _____

CONFIDENTIAL

REMARKS

CUSTOMER ANADARKO
LEASE HANKS
WELL NO. 21
JOB TYPE 8 1/2
DATE 5-18-94



HALLIBURTON ENERGY SERVICES

FORM 1908 R-13

CHARGE TO: **ANALANKE**
 ADDRESS:
 CITY, STATE, ZIP CODE:

TICKET

No. 590439 - 3

PAGE 1 OF

SERVICE LOCATIONS: **2 Houston 15**
 WELL/PROJECT NO.: **A-5** LEASE: **Hanks** COUNTY/PARISH: **STEVEN** STATE: **K** CITY/OFFSHORE LOCATION: DATE: **5-16-97** OWNER: **SAME**
 TICKET TYPE: SERVICE SALES NITROGEN JOB? YES NO CONTRACTOR: RIG NAME/NO. SHIPPED VIA: **CT** DELIVERED TO: **LOC** ORDER NO.:
 WELL TYPE: **01** WELL CATEGORY: **02** JOB PURPOSE: **010** WELL PERMIT NO.: WELL LOCATION: **13,21,35**
 REFERRAL LOCATION: INVOICE INSTRUCTIONS:

INVOICE REFERENCE	SECONDARY REFERENCE PART NUMBER	ACCOUNTING LOO	ACCPTS	DESCRIPTION	QTY	UOM	QTY	UOM	UNIT PRICE	AMOUNT
000-117				MILEAGE	60				2.75	165.00
001-016				PUMP CLASSE	1760	ft				1320.00
030-017	402-1524			5" TOP PLUG	1	EA	88			200.00
12A	825-212			25 GUIDE SLOG	1					216.00
24A	815-1950			25 INSERT FLOAT	1					151.00
27	815-19415			25 FILL UP	1					55.00
40	806-4104F			55 LEAD BILIZED	4				65.00	260.00
320	806-7006			25 BASKET	1					122.00
350	890-1060			25 WSKL-A	1		3			14.50

RELEASED
AUG 26 1995

CONFIDENTIAL
FROM CONFIDENTIAL

AUG 15
CONFIDENTIAL

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 Terry Lewis**
 DATE SIGNED: TIME SIGNED: AM PM
 do do not require IPC (Instrument Protection). Not offered

SUB SURFACE SAFETY VALVE WAS:
 PULLED & RETURN PULLED DOWN
 TYPE LOCK DEPTH
 BEAN SIZE SPACERS
 TYPE OF EQUALIZING SUB CASING PRESSURE
 TUBING SIZE TUBING PRESSURE WELL DEPTH
 TREE CONNECTION TYPE VALVE

SURVEY: AGREE UNDECIDED DISAGREE
 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	2523	50
FROM CONTINUATION PAGE(S)	9394	36
40.5%	11,917	86
SUB-TOTAL APPLICABLE TAXES - WILL BE ADDED ON INVOICE		

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): **Terry Lewis** CUSTOMER OR CUSTOMER'S AGENT SIGNATURE: **X Terry Lewis** HALLIBURTON OPERATOR/ENGINEER: **C. Ashby** EMP #: **44064** HALLIBURTON APPROVAL: **Raimie Van Buren**

AUG 12 '94 03:16PM HALLIBURTON ENERGY SERVICES LAMAR, CO

7193362037 PAGE.004 AUG 12 '94 16:33



HALLIBURTON

TICKET CONTINUATION

CUSTOMER COPY

TICKET No. 590429

HALLIBURTON ENERGY SERVICES

FORM 1911 R-10

CUSTOMER APC

WELL 135 Marika

DATE 5-18-94

PAGE 1 OF 1

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE	AMOUNT
		LOC	ACCT	DF		U/M	U/M		
504-043	516.00272				Premium Cement	200	sk	9.82	1964
504-131					625 cu.ft. 50/50Pormix Cement	625	sk	7.70	4812
504-043	516.00272				P				
506-105	516.00286								
506-121	516.00259								
506-121	516.00259				Add Gal 2 1/2/650sk	11	sk	18.60	204
509-406	090.50912				Calcium Chloride 2 1/2/625sk 3 1/2/200sk	16	sk	36.75	588
CONFIDENTIAL ORIGINAL					NVO AUG 15 CONFIDENTIAL				
CONFIDENTIAL					RELEASED OCT 26 1995 FROM CONFIDENTIAL				
SERVICE CHARGE					CUBIC FEET		1.35		1186.65
500-207					MILEAGE CHARGE	TOTAL WEIGHT	LOADED MILES	TON MILES	95
500-306						74,691	18	672.22	638.61

No. B 255204

CONTINUATION TOTAL

9594

AUG 12 '94 16:33

7193362037 PAGE.005

AUG 12 '94 03:17PM HALLIBURTON SERVICES LAMAR CO.

JOB LOG FORM 2013 R-4

 CUSTOMER **Anadarko** WELL NO. **5** LEASE **Hanke "A"** JOB TYPE **Long String** TICKET NO. **677685**

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0100							called out Ready at 0500
	0400							on Location laying down
								Drill pipe & collars
	0730							START Running 5 1/2 casing
	1005							Hook up To Circulate
	1015							Break Circulation
	1100							Hook up To Truck, safety meet
	1105	5	20				500	Pump 1st spacer
	1109	5	30				500	Pump mud flush
	1115	5	20				500	Pump 2nd spacer
	1119	6	16				250-	Pump Lead Cement 10"
	1121	6	71				250-500	Pump Tail Cement 14"
	1138							Shut Down ^{Drop Plug} wash Pump & Lines
	1143		126				500-800	Displacement
	1154		10				800-1000	Slow Rate
	1205	1205						Bump Plug, Float

CONFIDENTIAL
ORIGINAL

n.w.

AUG 15

CONFIDENTIAL

Thank You For Calling
 Halliburton Energy Service
 R. Crist, K Boone
 F Casias, J Adair

RELEASED

OCT 26 1995

FROM CONFIDENTIAL



HALLIBURTON

JOB SUMMARY

HALLIBURTON DIVISION

Mid Continent Liberal KS

BILLED ON TICKET NO. 62

WELL DATA

FIELD: SEC. 13 TWP. 31 RING. 35W 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:

CONFIDENTIAL

ORIGINAL

JOB DATA

Table with 4 columns: CALLED OUT, ON LOCATION, JOB STARTED, JOB COMPLETED. Includes dates and times for 5-28-94.

PERSONNEL AND SERVICE UNITS

Table with 3 columns: NAME, UNIT NO. & TYPE, LOCATION. Lists personnel like R Crist, D-2653, K Boone, Y 7841, V Adair, G 3813, F. Casias, G 2805.

TOOLS AND ACCESSORIES

Table with 3 columns: TYPE AND SIZE, QTY., MAKE. Lists items like FLOAT COLLAR, GUIDE SHOE, CENTRALIZERS, BOTTOM PLUG, TOP PLUG, HEAD, PACKER, OTHER.

MATERIALS

Form for MATERIALS with fields for TREAT. FLUID, DISPL. FLUID, PROP. TYPE, ACID TYPE, SURFACTANT TYPE, NE AGENT TYPE, FLUID LOSS ADD. TYPE, GELLING AGENT TYPE, FRIC. RED. AGENT TYPE, BREAKER TYPE, BLOCKING AGENT TYPE, PERFPAC BALLS TYPE, OTHER.

FROM CONFIDENTIAL

AUG 1 5

CONFIDENTIAL

DEPARTMENT: Cement
DESCRIPTION OF JOB: Cement Production Casing
JOB DONE THRU: TUBING [] CASING [X] ANNULUS [] TBG/ANN. []

CUSTOMER REPRESENTATIVE: X Job Shea
HALLIBURTON OPERATOR: Ronald C. Covert
COPIES REQUESTED:

CEMENT DATA

Table with 7 columns: STAGE, NUMBER OF SACKS, CEMENT, BRAND, BULK SACKED, ADDITIVES, YIELD CU.FT./SK., MIXED LBS./GAL.

PRESSURES IN PSI

SUMMARY

Form for PRESSURES IN PSI and SUMMARY with fields for CIRCULATING, BREAKDOWN, AVERAGE, SHUT-IN, HYDRAULIC HORSEPOWER, ORDERED, TREATING, FEET, REASON.

Form for SUMMARY with fields for PRES. SLUSH, LOAD & BKDN, TREATMENT, CEMENT SLURRY, TOTAL VOLUME.

REMARKS

Vertical text on the right edge: W.C. NUMBER, W.C. DATE, WELL NO., JOB TYPE, DATE



HALLIBURTON

HALLIBURTON ENERGY SERVICES

FORM 1906 R-13

CHARGE TO: *Angadok Rd. Petroleum*

ADDRESS:

CITY, STATE, ZIP CODE:

COPY

TICKET

No. 677685 - 8

PAGE 1 OF 2

SERVICE LOCATIONS 1. <i>Liberal</i>	WELL/PROJECT NO. <i>5</i>	LEASE <i>Hanke "A"</i>	COUNTY/PARISH <i>ST. LOUIS</i>	STATE <i>MO</i>	CITY/OFFSHORE LOCATION	DATE <i>5-28-95</i>	OWNER
2. <i>Hunter</i>	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	NITROGEN JOB? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	CONTRACTOR <i>Gabert & Jones</i>	RIG NAME/NO. <i>#888</i>	SHIPPED VIA	ORDER NO.	
3.	WELL TYPE <i>01</i>	WELL CATEGORY <i>01</i>	JOB PURPOSE <i>035</i>		WELL PERMIT NO.	WELL LOCATION	
4.	REFERRAL LOCATION	INVOICE INSTRUCTIONS					

RELEASED OCT 26 1995 FROM CONFIDENTIAL

PRICE REFERENCE	SECONDARY REFERENCE / PART NUMBER	ACCOUNTING LOC ACCT DF	DESCRIPTION	QTY.	U/M	QTY.	U/M	UNIT PRICE	AMOUNT
<i>000-017</i>			MILEAGE	<i>50</i>	<i>MI</i>	<i>1</i>		<i>2.75</i>	<i>137.50</i>
<i>001-016</i>			Pump Charge	<i>5745</i>	<i>KT</i>				<i>2000.00</i>
<i>12 A</i>	<i>875-205</i>		Guide Shoe	<i>5 1/2</i>	<i>"</i>	<i>1</i>	<i>EA</i>		<i>121.00</i>
<i>24 A</i>	<i>815-1925</i>		INSERT	<i>5 1/2</i>	<i>"</i>	<i>1</i>	<i>EA</i>		<i>110.00</i>
<i>27</i>	<i>815-1931</i>		Fill up			<i>1</i>	<i>EA</i>		<i>55.00</i>
<i>40</i>	<i>806-60022</i>		Centralizers			<i>26</i>	<i>EA</i>	<i>44.00</i>	<i>1144.00</i>
<i>320</i>	<i>806-70030</i>		Cement Basket			<i>1</i>	<i>EA</i>		<i>110.00</i>
<i>340</i>	<i>890-10802</i>		Weld A			<i>1</i>	<i>EA</i>		<i>14.50</i>
<i>038-977</i>			5 wiper plug	<i>5 1/2</i>	<i>in</i>	<i>1</i>	<i>EA</i>		<i>60.00</i>
<i>018-318</i>			Mud flush	<i>1260</i>	<i>gal</i>		<i>65</i>		<i>819.00</i>
<i>218-738</i>			Clay fix II	<i>4</i>	<i>gal</i>			<i>24.00</i>	<i>96.00</i>

ORIGINAL

CONFIDENTIAL

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 John Sloan

DATE SIGNED: _____ TIME SIGNED: _____

A.M. P.M.

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	<i>4667.00</i>
FROM CONTINUATION PAGE(S)	<i>4489.72</i>
SUB-TOTAL APPLICABLE TAXES WILL BE ADDED ON INVOICE	<i>9156.72</i>

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) *John Sloan* CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE) *X John Sloan*

HALLIBURTON OPERATOR/ENGINEER *Ronald C. Crist* EMP # *07653*

HALLIBURTON APPROVAL _____

CUSTOMER AVAILABLE
LEASE H.A. OKL
WELL NO. A-5
JOB TYPE RECYCLE
DATE 6-9-94

WELL DATA
FIELD _____ SEC. 13 TWP. 31 RING. 35W COUNTY SENECA 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 100 3047 SET AT 3047
BOTTOM HOLE TEMP. _____ PRESSURE _____
MISC. DATA _____ TOTAL DEPTH _____

	NEW USED	WEIGHT	SIZE	FROM	TO	MAXIMUM PSI ALLOWABLE
CASING	4	15.5	5.5	4L		
LINER						
TUBING	4	47	2 3/8	10	547	
OPEN HOLE						SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

ORIGINAL

JOB DATA

TOOLS AND ACCESSORIES

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

CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE <u>8-54</u>	DATE <u>8-54</u>	DATE <u>8-94</u>	DATE <u>8-94</u>
TIME <u>12:30</u>	TIME <u>0:45</u>	TIME <u>0:20</u>	TIME <u>1:04</u>

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
<u>W. Ford</u>	<u>04437</u>	<u>37458 P.U. Liberty, KS</u>
<u>T. Adams</u>	<u>7131</u>	<u>RCM</u>
<u>R. GARRISON</u>	<u>75535</u>	<u>Bulk Hugoton, KS</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. OCT 26 1995
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 LEAD
DESCRIPTION OF JOB RECYCLE

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

CUSTOMER REPRESENTATIVE X John Shoen

HALLIBURTON OPERATOR Wes Ford COPIES REQUESTED _____

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
<u>1</u>	<u>100</u>	<u>15-35 P2</u>		<u>B</u>	<u>1411 Flocrete</u>	<u>184</u>	<u>12.7</u>

AUG 15

CONFIDENTIAL

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. _____ DISP. BBL 11.3
SHUT-IN: INSTANT _____ 5-MIN _____ 15-MIN. _____ CEMENT SLURRY BBL 32.7
HYDRAULIC HORSEPOWER _____ TOTAL VOLUME BBL 44
ORDERED _____ AVAILABLE _____ USED _____
BEATING 4 AVERAGE RATES IN BPM _____ OVERALL 4
DISPL. 4 CEMENT LEFT IN PIPE _____
REASON _____

REMARKS

SEE J-243g



HALLIBURTON

HALLIBURTON ENERGY SERVICES

CHARGE TO:
 ADDRESS: *Amesbury*
 CITY, STATE, ZIP CODE:

COPY

TICKET No. **677656 - 1** *LB*

PAGE 1 OF 1

FORM 1906 R-13

SERVICE LOCATIONS <i>1. be 211, X 025340</i>	WELL/PROJECT NO. <i>A-5</i>	LEASE <i>HAWKE</i>	COUNTY/PARISH <i>CADDOUS</i>	STATE <i>KS</i>	CITY/OFFSHORE LOCATION	DATE <i>6-8-94</i>	OWNER <i>SAME</i>
<i>2. be 211, X 025355</i>	TICKET TYPE <input type="checkbox"/> SERVICE <input type="checkbox"/> SALES	NITROGEN JOB? <input type="checkbox"/> YES <input type="checkbox"/> NO	CONTRACTOR <i>Best Well Soc.</i>	RIG NAME/NO.	SHIPPED VIA <i>CT.</i>	DELIVERED TO <i>Location</i>	ORDER NO.
3.	WELL TYPE <i>01</i>	WELL CATEGORY <i>02</i>	JOB PURPOSE <i>205 RELEMENT</i>	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							
<i>002-117</i>	ORIGINAL				<i>MILEAGE 7131</i>	<i>1</i>	<i>EA</i>	<i>60</i>	<i>m</i>	<i>2.75</i>	<i>165.00</i>
<i>009-019</i>					<i>Pump Charge</i>	<i>6</i>	<i>HR</i>	<i>3047</i>	<i>4</i>		<i>1590.00</i>
<i>013-315</i>					<i>Mud/Flush</i>	<i>1260</i>	<i>gal</i>			<i>15</i>	<i>819.00</i>
CONFIDENTIAL											

RELEASED OCT 26 1995
 FROM CONFIDENTIAL
 AUG 15 1995
 CONFIDENTIAL

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
[Signature]
 DATE SIGNED: *[Date]* TIME SIGNED: A.M. P.M.

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?	<input checked="" type="checkbox"/>		
WE UNDERSTOOD AND MET YOUR NEEDS?	<input checked="" type="checkbox"/>		
OUR SERVICE WAS PERFORMED WITHOUT DELAY?	<input checked="" type="checkbox"/>		
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?	<input checked="" type="checkbox"/>		
ARE YOU SATISFIED WITH OUR SERVICE?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND			

PAGE TOTAL	<i>2574</i>	<i>02</i>
FROM CONTINUATION PAGE(S)	<i>1205</i>	<i>08</i>
SUB-TOTAL	<i>3779</i>	<i>08</i>
APPLICABLE TAXES WILL BE ADDED ON INVOICE		

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) <i>[Name]</i>	CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE) <i>[Signature]</i>	HALLIBURTON OPERATOR/ENGINEER <i>[Signature]</i>	EMP # <i>D4437</i>	HALLIBURTON APPROVAL
--	--	---	-----------------------	----------------------

