

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

API NO. 15- 119-20967-0000 ORIGINAL

County Meade

NE - NE - SE -      Sec. 24 Twp. 32 Rge. 30 <sup>E</sup> <sub>10</sub>

2310 Feet from (S)N (circle one) Line of Section

330 Feet from (E)W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

552 <sup>(NE)</sup> SE, NW or SW (circle one)

Lease Name Ramsey Well # 2

Field Name Angell

Producing Formation Chester

Elevation: Ground 2723 KB 2731

Total Depth 5760' PBTD 5756'

Amount of Surface Pipe Set and Cemented at 1630 Feet

Multiple Stage Cementing Collar Used?      Yes X No

If yes, show depth set      Feet

If Alternate II completion, cement circulated from 1630'

feet depth to surface w/ 480 sx cmt.

Drilling Fluid Management Plan APP. 4-1-98 U.C.  
(Data must be collected from the Reserve Pit)

Chloride content 8100 ppm Fluid volume 430 bbls

Dewatering method used evaporate and backfill

Location of fluid disposal if hauled offsite:     

Operator Name 7-31-97

Lease Name      License No.     

     Quarter Sec.      Twp.      S Rng.     

County      Docket No.     

Operator: License # 6528

Name: R.J. Patrick Operating Co.

Address P O Box 1157

City/State/Zip Liberal, KS 67905

Purchaser: Duke Energy Field Services

Operator Contact Person: R. J. Patrick

Phone (316) 624-8483

Contractor: Name: Abercrombie Drlg. RTD

License: 30684

Wellsite Geologist: Bob Posey

Designate Type of Completion  
 New Well  Re-Entry  Workover

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

If Workover/Reentry: Old Well Info as follows:

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.     

07/02/97 07/15/97 07/27/97  
Spud Date Date Reached TD Completion Date

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 R.J. Patrick

Title R.J. Patrick/Owner Date 07/29/97

Subscribed and sworn to before me this 29 day of July 19 97.

Notary Public Jayn Berry

Date Commission Expires 04/04/2000

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)

STATE NOTARY PUBLIC  
KANSAS  
JAYN BERRY  
NOTARY PUBLIC  
STATE OF KANSAS  
My Appt. Expires: 4-4-2000

Operator Name R. J. Patrick Operating Co. Lease Name Ramsey Well # 2  
 Sec. 24 Twp. 32 Rge. 30  East  West  
 County Meade

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 <table border="1"> <thead> <tr> <th>Name</th> <th>Top</th> <th>Datum</th> </tr> </thead> <tbody> <tr> <td>Morrow</td> <td>5592</td> <td>-2861</td> </tr> <tr> <td>Chester</td> <td>5624</td> <td>-2893</td> </tr> </tbody> </table>	Name	Top	Datum	Morrow	5592	-2861	Chester	5624	-2893
Name	Top		Datum								
Morrow	5592		-2861								
Chester	5624		-2893								
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No										
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No										
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No*										

List All E.Logs Run:  
 -----

\*Ran cased hole logs(enclosed)

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#	1630	Pozmix	480	2%CC
Production	7 7/8	4 1/2 new	10.5	5760	Pozmix	130	18% salt

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	Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)	Depth
2	5666 to 76, 5632 to 36		
2	5642 to 46, 5724 to 28	2500 gal. FE	

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input type="checkbox"/> No
None	-	-	None	None	
Date of First, Resumed Production, SUD or Inj.		Producing Method			
07/27/97		<input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls.	Gas 310	Mcf 0	Water Bbls.	Gas-Oil Ratio Gravity

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: 5666 to 5728



**HALLIBURTON ENERGY SERVICES**  
HAL-1906-P

CHARGE TO: R. J. PATRICK OPERATING  
 ADDRESS: \_\_\_\_\_  
 CITY STATE ZIP CODE: \_\_\_\_\_

15-119-20967  
 CUSTOMER COPY TICKET

No. 184217-0

RECEIVED  
 KANSAS CORP COMM

PAGE 1 OF 1

SERVICE LOCATIONS 1. <u>025540 LIBERTY</u>	WELL/PROJECT NO. <u>2</u>	LEASE <u>RAMSEY</u>	COUNTY/PARISH <u>MEADE</u>	STATE <u>KS</u>	CITY/OFFSHORE LOCATION	DATE <u>7-3-97</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	RIG NAME/NO.	SHIPPED VIA <u>1455</u>	DELIVERED TO <u>LOCUSTON</u>	ORDER NO.
3.	WELL TYPE <u>01</u>	WELL CATEGORY <u>01</u>	JOB PURPOSE <u>010</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	✓	40	M	3.20	128.00
000-119					CREW MILEAGE	1	✓	40	M	1.95	78.00
001-016					PUMP CHARGE	6	HR	162	FT		1523.00
030-018					8 3/8 Top Plug	8 3/8	IN	1	EA		143.00
001-018					ADDITIONAL HOURS	1	HR	2	EA	291.00	291.00
001-018					ADDITIONAL HOURS	1	HR	1	EA	291.00	N/C
					8 3/8 Surface Pipe						

ORIGINAL

<b>LEGAL TERMS:</b> Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, <b>PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY</b> provisions.  MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS  <u>x W. C. Craig</u> DATE SIGNED _____ TIME SIGNED _____ <input type="checkbox"/> A.M. <input type="checkbox"/> P.M.	SUB SURFACE SAFETY VALVE WAS: <input type="checkbox"/> PULLED & RETURN <input type="checkbox"/> PULLED <input type="checkbox"/> RUN			<b>SURVEY</b> AGREE UN-DECIDED DIS-AGREE			PAGE TOTAL <u>2745.00</u>  FROM CONTINUATION PAGE(S) <u>10866.46</u>  SUB-TOTAL <u>13,611.46</u> APPLICABLE TAXES WILL BE ADDED ON INVOICE
	TYPE LOCK	DEPTH	OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				
	BEAN SIZE	SPACERS	WE UNDERSTOOD AND MET YOUR NEEDS?				
	TYPE OF EQUALIZING SUB.	CASING PRESSURE	OUR SERVICE WAS PERFORMED WITHOUT DELAY?				
TUBING SIZE	TUBING PRESSURE	WELL DEPTH	WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				
FREE CONNECTION	TYPE VALVE	ARE YOU SATISFIED WITH OUR SERVICE?		<input type="checkbox"/> YES	<input type="checkbox"/> NO		
<input type="checkbox"/> do <input type="checkbox"/> do not require IPC (Instrument Protection). <input type="checkbox"/> Not offered			<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) <u>W. C. CRAIG</u>	CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE) <u>x W. C. Craig</u>	HALLIBURTON OPERATOR/ENGINEER <u>ROBERT ELWOOD</u>	EMP # <u>D-4360</u>	HALLIBURTON APPROVAL
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L10105

## TERMS AND CONDITIONS

(1295)

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 not recovered or is irreparable, Customer shall pay the replacement cost, unless such loss is caused by Halliburton's sole negligence. If a radioactive source becomes lost or lodged in the well, this agreement will constitute Customer's written agreement under 10 CFR Sec. 39.15 (a) that Customer shall be responsible for meeting all requirements of 10 CFR Sec. 39.15 and any other applicable laws or regulations concerning retrieval, monitoring, decontamination, and abandonment, and Customer shall permit Halliburton to observe the recovery or abandonment efforts, all without risk or expense 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.

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# Halliburton Energy Services

DATE:07-03-1997 TIME:06:02:54 SERVICE TICKET: 184217

HUGOTON-25535 BULK TICKET ONLY: 800328

JOB PURPOSE:SURFACE COMPANY TRUCK::58 DRIVER: 47

## ORIGINAL

CUSTOMER: R.J.Patrick Operating Co.LEASE & WELL#:Ramsey 2#

504-282	MIDCON CEMENT PREMIUM PLUS	380	SKS.	17.06	6482.80
504-050	PREMIUM PLUS CEMENT	100	SKS.	14.01	1401.00
507-210	FLOCELE	215	SKS.	1.90	408.50
509-406	CALCIUM CHLORIDE	13	SKS.	46.90	609.70
500-207	SERVICE CHARGES	540	CU FT	1.55	837.00
					TOTAL 9739.00
500-306	WEIGHT: 47773	MILES: <u>40</u>	TON MILES: <u>955.46</u>	1.18	1127.44
					<del>4530.24</del>
					TOTAL BULK PRICE: <u>1054.44</u>
					<del>\$11289.24</del>

500-225 RETURN SERVICE CHARGES \_\_\_\_\_ CU FT 1.55 \_\_\_\_\_

500-306 WEIGHT: \_\_\_\_\_ RETURN MILES: 55 TON MILES: \_\_\_\_\_ 1.18 \_\_\_\_\_





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(1296)

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**JOB SUMMARY** 4239-1

TICKET #	235744	TICKET DATE	7-16-97
BDA / STATE	KS.	COUNTY	meade.
PSL DEPARTMENT	CMT		
CUSTOMER REP / PHONE	K.T. Patrick.		
API / UWI #			
JOB PURPOSE CODE	035		

REGION	North America	NWA/COUNTRY	USA
MBU ID / EMP #	L70103 F4550	EMPLOYEE NAME	T. DAVIS
LOCATION	Liberal	COMPANY	R.T. Patrick.
TICKET AMOUNT		WELL TYPE	01
WELL LOCATION	Land.	DEPARTMENT	CMT
LEASE / WELL #	Kamsay 7	SEC / TWP / RNG	24-32-30

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
S. Rainal	43377						
J. Frost	69775						

HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES
52938-7131	RCM 40						
470042	P.V. 40						
50404	6610		100				

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

**TOOLS AND ACCESSORIES**

TYPE AND SIZE	QTY	MAKE
Float Collar		
Float Shoe		
Guide Shoe		
Centralizers		
Bottom Plug		
Top Plug		
Head	P.C. 4 1/2	1 Howco
Packer		
Other		

**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		

DATE	TIME	CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
7-15-97	2210		7-15-97	7-16-97	7-16-97
			2345	0600	0635

**WELL DATA**

	NEW/USED	WEIGHT	SIZE	FROM	TO	MAX ALLOW
Casing	N	10.5	4 1/2	KB	5760	
Liner						
Liner						
Tbg/D.P.						
Tbg/D.P.						
Open Hole						SHOTS/FT.
Perforations						
Perforations						
Perforations						

HOURS ON LOCATION		OPERATING HOURS		DESCRIPTION OF JOB
DATE	HOURS	DATE	HOURS	
				CMT
				4 1/2
				L.S.
<b>TOTAL</b>		<b>TOTAL</b>		

**HYDRAULIC HORSEPOWER**  
 ORDERED \_\_\_\_\_ Avail. \_\_\_\_\_ Used \_\_\_\_\_  
**AVERAGE RATES IN BPM**  
 TREATED \_\_\_\_\_ Disp. \_\_\_\_\_ Overall \_\_\_\_\_  
**CEMENT LEFT IN PIPE**  
 FEET 5 Reason Shoe Jt

**CEMENT DATA**

STAGE	SACKS	CEMENT	BULK/SKS	ADDITIVES	YIELD	LBS/GAL
1	130	PIP 50	K3	18% S914, 7.5% 200FL3, 1/4 #156 F10	1.21	14.5
	25	50/50		" Plug RCM	"	"

Circulating Displacement _____	Preflush: Gal - BBI _____	Type _____
Breakdown Maximum _____	Load & Bkdn: Gal - BBI _____	Pad: BBI - Gal _____
Average Frac Gradient _____	Treatment Gal - BBI _____	Disp: BBI - Gal 96.5
Shut In: Instant 5 Min _____ 15 Min _____	Cement Slurr Gal - BBI 30.3	
	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 *[Signature]*





**JOB LOG** 4239-5

TICKET #	1357411	TICKET DATE	7-11-97
BDA / STATE	LC	COUNTY	2300de
PSL DEPARTMENT	5005		
CUSTOMER REP / PHONE	21 106116		
API / UWI #			
JOB PURPOSE CODE	75		

REGION	North America	NWA/COUNTRY	USA
MBU ID / EMP #	16107 EW550	EMPLOYEE NAME	T. NOVAK
LOCATION	Liberal	COMPANY	W. J. H. H. H.
TICKET AMOUNT		WELL TYPE	C?
WELL LOCATION	Load	DEPARTMENT	5005
LEASE / WELL #	1111111 7	SEC / TWP / RNG	24 37-30

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
1111111 42377							
1111111 5-1775							

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL)(GAL)	PUMPS		PRESS. (psi)		JOB DESCRIPTION / REMARKS
				T	C	Tbg	Csg	
02730	0720	240						called out for job.
02730	0735	0	40					on loc. Rig L.P.D.P.
	0740							out of hole W.D.P.
	0745							start 4 1/2 csg.
	0755							CSG on Box Hook up 4 1/2 pc 2' circ. r. r. r.
	0826							brk circ wiring.
	0828							circ. to pit.
	0848							They are Hook iron to P.T
	0800	5.0	30	✓		450		pump 130y from 50750707 9x13.5" 1/2"
	0807	0	30	✓		0		Shut down pump plug.
	0813	6.5	91.5	✓		100		pump disp
	0823	6.0	91.5	✓		180		10 bbls in left cont
	0828	7.5	91.5	✓		500		24 bbls in sid take
	0830	7.5	91.5	✓		624		Load Plug
	0831	0	91.5	✓		100		Repose Fluid - Hold

**ORIGINAL**

Job over  
 Thank For calling.  
 Tyce Sterling Tech.  
 Plug down at 6:50 AM

Ran 136 jts + 16' sink  
 137 jts = 57 60' casing  
 with 7 7/8" bit on bottom

