

ORIGINAL

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

Operator: License # 5952

Name: Amoco Production Company

Address P.O. Box 800, Room 924

City/State/Zip Denver, CO 80201

Purchaser: _____

Operator Contact Person: Susan Potts

Phone (303) 830-5323

Contractor: Name: Cheyenne Drilling

License: 5382

Wellsite Geologist: _____

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/Re-entry: old well info as follows:

Operator: Dolomite Resources Corp.

Well Name: K.U. 1-5

Comp. Date _____ Old Total Depth 5870

Deepening Re-perf. Conv. to Inj/SWD

Plug Back 2910 P8TD

Commingled _____ Docket No. _____

Dual Completion _____ Docket No. _____

Other (SWD or Inj?) _____ Docket No. _____

07/09/94 07/13/94 10/20/94
Spud Date Date Reached TD Completion Date

API No. 15 - 175-214070001

County Seward

-NE -SW NE Sec. 05 Twp. 32S Rge. 33 East West

3420 Feet from (S)N (circle one) Line of Section

1800 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 Kansas University /D/Well # 5HT

Field Name Hugoton

Producing Formation Chase

Elevation: Ground 2834' KB 2839'

Total Depth 5807' P8TD 2910'

Amount of Surface Pipe Set and Cemented at 1667 Feet

Multple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan RE-ENTRY 8-30-96 SK
(Data must be collected from the Reserve Pit)

Chloride content 5800 ppm Fluid Volume 2140 bbls

Dewatering method used Dried and Filled

Location of fluid disposal if hauled offsite: _____

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KANSAS CORPORATION COMMISSION

Operator Name 7-7-95

Lease Name JUL 07 1995 License No. _____

Quarter _____ Sec. _____ Twp. _____ S.Rng. _____ E/W

CONSERVATION DIVISION

County WICHITA, KS Docket No. _____

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 to the best of my knowledge.

Signature E. Dean Hartley

Title Sr. Staff Asst Date 7/6/95

Subscribed and sworn to before me this 6th day of July, 1995

Notary Public Dina R Harris

Date Commission Expires 11-10-96

K.C.C. OFFICE USE ONLY			
F	<input checked="" type="checkbox"/>	Letter of confidentiality Attached	
C	<input checked="" type="checkbox"/>	Wireline Log Received	
C	<input type="checkbox"/>	Drillers Timelog Received	
Distribution			
<input checked="" type="checkbox"/>	KCC	<input type="checkbox"/> SWD/Rep	<input type="checkbox"/> NGPA
<input type="checkbox"/>	KGS	<input type="checkbox"/> Plug	<input type="checkbox"/> Other (Specify)

Operator Name Amoco Production Company Lease Name Kansas University /D/ Well # 5HI
 County Seward
 Sec. 05 Twp. 32S Rge. 33 East West

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	Chase	2568	KB
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Herrington	2590	
List All E. Logs Run: SDL-DSN; Microlog; Sonic; Dual Induction		Ft. Riley	2794	
		Council Grove	2908	

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#	1667			
Production	7 7/8"	5 1/2"	14#	2910	Prem Prem Plus Lite	75 670	168# 1/4# 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
	4	2590-2608'; 2636-2656'; 2674-2698'		Frac w/ 58,000# 10/20 sand & 538 BBLS N2 foam	
			Acidize w/ 47 BBLS 15% HCl & 16BBLS fresh water		2590-2698

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		Producing Method		<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 Mcf	Water Bbls.	Gas-Oil Ratio	Gravity	
		200				

Disposition of Gas: Vented Sold Used on Lease

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled

Production Interval: 2590-2698

(If vented, submit ACO-18) Other (Specify) _____

ORIGINAL

CEMENTING SERVICE REPORT



LOWELL SCHLUMBERGER INCORPORATED

TREATMENT NUMBER 05-12-0298 DATE 7/10/94
 DISTRICT JOLIET, KANSAS

02-400 PRINTED IN U.S.A.

WELL NAME AND NO: KU 1-5
 LOCATION (LEGAL): SEC 5-32S-33W
 FORMATION: HUGOTON
 COUNTY/PARISH: SEWARD KANSAS
 STATE: KANSAS
 API NO:

RIG NAME: VAL ENERGY
 WELL DATA:
 BIT SIZE: 12 1/4" CASING SIZE: 15 1/2"
 TOTAL DEPTH: 1655' WEIGHT: 5240
 ROT: CABLE FOOTAGE: 1570'
 MUD TYPE: WB GRADE:
 DIST: 93°F THREAD: 8 1/2"
 MUD DENSITY: 9.15 SPEC GRAV: 31.02
 MUD VISC: Disp. Capacity: 1659.98
 TOTAL: 1659.98

NAME: HUGOTON ENERGY
 ADDRESS:
 ZIP CODE:

TYPE	DEPTH	TYPE	DEPTH
TYPE	1639.98'	TYPE	
DEPTH		DEPTH	
TYPE	1671'	TYPE	
DEPTH		DEPTH	

SPECIAL INSTRUCTIONS:
 SHOWN LEADERT 8 1/2" CASING AS DIRECTED BY CUSTOMER

Head & Plugs: T&B O.P. SQUEEZE JOB
 Double SIZE: TOC TYPE
 Single WEIGHT: DEPTH
 Swage GRADE: TAIL PIPE SIZE DEPTH
 Knoggin THREAD: TUBING VOLUME BBL
 TOP OR CW DEPTH: CASING VOL BELOW TOOL OVL
 BOT OR CW DEPTH: TOTAL ANNUAL VOLUME BBL

IS CASING/TUBING SECURED? YES NO
 LIFT PRESSURE: 628 PSI CASING WEIGHT: 3.14 x R²
 PRESSURE LIMIT: 6100 PSI BUMP PLUS TO 500 + LIFT PSI
 ROTATE: RPM RECIPROCATE: FT. No. of Centralizers: 3

JOB SCHEDULED FOR TIME: 8:30 AM DATE: 7/10/94
 ARRIVE ON LOCATION TIME: 7:30 DATE: 7/10/94
 LEFT LOCATION TIME: 11:15 DATE: 7/10/94

TIME	PRESSURE	VOLUME PUMPED BBL	INJECT RATE	FLUID TYPE	FLUID DENSITY	REMARKS
15:17	800					PRE-JOB SAFETY MEETING
15:19	80	10	4	H ₂ O	8.33	PRESSURE TEST LINES, 5 SCOPS, TEST OK
15:25	90	209	5	CMT	12.2	START H ₂ O AHEAD, BREAK CIRCULATION.
16:07	110	35	4.6	CMT	14.8	START LEAD SLEWING.
16:14		294				START TAIL SLEWING.
16:16	60	1045		H ₂ O	8.33	SHOWDOWN DROP TOP PLUG.
16:35	410	349	2	H ₂ O	8.33	START DISPLACEMENT
16:45		452.5				LAUNCH PUMP RATE
16:45		1/2				SHOWDOWN
						Pump 1/2 more (Per Co. MAN).
						Don't bump plug.
						TEST FLAT. OK
						Apply LIFT Pressure ± 470 psi
						and shoot in cement head

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 WICHITA-KS

REMARKS:

SYSTEM CODE	NO. OF SACKS	YIELD CU. FT/SK	COMPOSITION OF CEMENTING SYSTEMS	BLLB	DENSITY
1	500	2.1	65/35, 4" Pore + 6% D2O + 2% SL + 1/4" H/SK D29	209	12.5
2	150	1.32	CLAYS C + 2% SL + 1/4" H/SK D29	35	14.8
3					
4					
5					
6					

BREAKDOWN FLUID TYPE: LTA VOLUME: LTA WA DENSITY: 610 psi (1.06)
 RESTATION SO RUNNING SO CIRCULATION LOST: YES NO
 BREAKDOWN: PSI FINAL: 104.47 PSI DISPLACEMENT VOL: 104.47 BBL
 WEARER TRU PARTS: YES NO FT. MEASURED DISPLACEMENT: WIRELINE
 CONFIRMATION: TO TO TO TO CUSTOMER REPRESENTATIVE: DALE SMITH SUPERVISOR: DAVID R. SARVER



JOB LOG FORM 2013 R-4

CUSTOMER Amoco Production WELL NO. 5117 LEASE K-11 Wind JOB TYPE PLUG BACK 5 1/2 LUG. TRAILER TICKET NO. 277114

Table with columns: CHART NO., TIME, RATE (BPM), VOLUME (BBL) (GAL), PUMPS (T, C), PRESSURE (PSI) (TUBING, CASING), DESCRIPTION OF OPERATION AND MATERIALS. Includes handwritten entries for job progress, pump rates, and volumes.

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JOB SUMMARY

HALLIBURTON DIVISION
HALLIBURTON LOCATION

Mid Continent
1000 N. 2nd

BILLED ON TICKET NO. 177114

WELL DATA

FIELD _____ SEC 5 TWP 32 RNG 23 COUNTY Wichita 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 3220

	NEW USED	WEIGHT	SIZE	FROM	TO	MAXIMUM PSI ALLOWABLE
CASING	<u>1</u>	<u>11"</u>	<u>6.6</u>	<u>K23</u>	<u>320</u>	
LINER						
TUBING						
OPEN HOLE						SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

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JOB DATA

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
FLOAT COLLAR		
FLOAT SHOE <u>5 1/2"</u>	<u>1</u>	<u>Hercules</u>
GUIDE SHOE		
CENTRALIZERS <u>1 1/2"</u>	<u>2</u>	<u>"</u>
BOTTOM PLUG		
TOP PLUG <u>5-W</u>	<u>1</u>	<u>"</u>
HEAD		
PACKER		
OTHER		

CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE <u>7 20 74</u>	DATE <u>7 24 74</u>	DATE <u>7 24 74</u>	DATE <u>7 27 74</u>
TIME <u>1:00</u>	TIME <u>1:00</u>	TIME <u>5:07</u>	TIME <u>3:00</u>

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
<u>J. Anderson 62513</u>	<u>4008 P/O</u>	<u>Wichita</u>
<u>P. CRIST D7653</u>	<u>2274 ADC RCN 1/28/74</u>	<u>"</u>
<u>J. ADAIR G3613</u>	<u>1 1/2" P/O 1/28/74</u>	<u>Wichita KS</u>
<u>D. HAMMILL G2670</u>	<u>4-7 1/2" P/O 1/28/74</u>	<u>"</u>
<u>E. COOPERSON G137</u>	<u>2203/1/28/74</u>	<u>"</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 _____

NE AGENT TYPE _____ GAL. _____ IN

FLUID LOSS ADD. TYPE _____ GAL. _____ LB.

GELLING AGENT TYPE _____ GAL. _____ LB.

FRIC. RED. AGENT TYPE _____ GAL. _____ LB.

BREAKER TYPE _____ GAL. _____ LB.

BLOCKING AGENT TYPE _____ GAL. _____ LB.

PERFFAC BALLS TYPE _____ QTY. _____

OTHER _____

OTHER _____

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JUL 07 1974
CONSERVATION DIVISION
WICHITA, KS

DEPARTMENT Cement

DESCRIPTION OF JOB 17 1/2" SK Plug at 3200'

Run in long string

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>Premium</u>	<u>Hercules</u>	<u>B</u>		<u>1.06</u>	<u>16.4</u>
		<u>Premium + L.F.F.</u>	<u>"</u>	<u>B</u>	<u>1/4" Flocc</u>	<u>2.06</u>	<u>12.3</u>

PRESSURES IN PSI

SUMMARY

VOLUMES

CIRCULATING _____ DISPLACEMENT _____

BREAKDOWN _____ MAXIMUM _____

AVERAGE _____ FRACTURE GRADIENT _____

SHUT-IN: INSTANT _____ 5-MIN _____ 15-MIN _____

ORDERED _____ AVAILABLE _____ USED _____

TREATING _____ DISPL. _____ OVERALL _____

FEET 2 REASON Flow stop

PRESLUSH: BBL.-GAL. _____ TYPE _____

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

TREATMENT: BBL.-GAL. _____ DISPL. (BBL.) GAL. 71

CEMENT SLURRY: BBL.-GAL. 245

TOTAL VOLUME: BBL.-GAL. _____

REMARKS _____



CHARGE TO:
 ADDRESS: *Amoco Production*
 CITY, STATE, ZIP CODE:

COPY

TICKET

No. 677814 - 5

PAGE 1 OF 2

FORM 1906 R-13

SERVICE LOCATIONS 1. <i>075542 L. BEAL</i>	WELL/PROJECT NO. <i>541</i>	LEASE <i>KANSAS UNIVERSITY GULF</i>	COUNTY/PARISH <i>SEWARD</i>	STATE <i>KS</i>	CITY/OFFSHORE LOCATION <i>SUBLETTE</i>	DATE <i>7-22-74</i>	OWNER <i>SAME</i>
2. <i>075535 MONTANA</i>	TICKET TYPE <input checked="" type="checkbox"/> SERVICE	NITROGEN JOB? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	CONTRACTOR <i>VAL ENERGY</i>	RIG NAME/NO.	SHIPPED VIA <i>WT</i>	DELIVERED TO <i>WELL SITE</i>	ORDER NO.
3.	WELL TYPE	WELL CATEGORY <i>OL DEVELOPMENT</i>	JOB PURPOSE <i>235" 5/8" LONG STRING</i>	WELL PERMIT NO.	WELL LOCATION <i>LAND</i>		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
<i>000-117</i>		<i>1</i>			MILEAGE	<i>24</i>	<i>m.</i>	<i>2</i>	<i>11</i>	<i>2.75</i>	<i>96.00</i>
<i>007-017</i>		<i>1</i>			Pump CHARGE	<i>3200</i>	<i>FT</i>			<i>1590.00</i>	<i>1590.00</i>
<i>001-011</i>		<i>1</i>			Pump CHARGE	<i>2913</i>	<i>FT</i>			<i>1455.00</i>	<i>1455.00</i>
<i>5A</i>	<i>837 07100</i>	<i>1</i>			SST FLOAT SHOE	<i>1</i>	<i>WA</i>	<i>5/8</i>	<i>IN</i>	<i>225.00</i>	<i>225.00</i>
<i>40</i>	<i>806 60022</i>	<i>1</i>			GENERAL FLO	<i>5</i>	<i>WA</i>	<i>5/8</i>	<i>IN</i>	<i>291.90</i>	<i>220.00</i>
<i>350</i>	<i>890-10802</i>	<i>1</i>			Houso well A	<i>1</i>	<i>FA</i>	<i>1</i>	<i>1/8</i>	<i>14.50</i>	<i>14.50</i>

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 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.

CUSTOMER OR CUSTOMER'S AGENT SIGNATURE
 X

DATE SIGNED	TIME SIGNED <input type="checkbox"/> A.M. <input type="checkbox"/> P.M.	TUBING SIZE	TUBING PRESSURE	WELL DEPTH	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 <i>3600 50</i>
TYPE LOCK DEPTH BEAN SIZE SPACERS TYPE OF EQUALIZING SUB. CASING PRESSURE							OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?			
TREE CONNECTION TYPE VALVE <input type="checkbox"/> do <input type="checkbox"/> do not require IPC (Instrument Protection). <input type="checkbox"/> Not offered					ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND		SUB-TOTAL APPLICABLE TAXES WILL BE ADDED ON INVOICE <i>13032 39</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) <i>X Sam Carmack</i>	CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE) <i>X Sam Carmack</i>	HALLIBURTON OPERATOR/ENGINEER <i>John Woodrow</i>	EMP # <i>62573</i>	HALLIBURTON APPROVAL <i>w/42.5%</i>	# <i>7493.62</i>
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disc.

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.