

15-057-20735-0000

WELL PLUGGING RECORD

Give All Information Completely  
 Make Required Affidavit

COUNTY Ford SEC. 23 TWP. 28 RGE. 23 NE/W  
 Location as in quarters or footage from lines:  
C SE SW

	2	3	
	0		

Lease Owner Samuel Gary Oil Producer  
 Lease Name Keller Farms Well No. 23-14  
 Office Address 4 Inverness Court East, Englewood, Colorado 80112-5599  
 Character of Well (Completed as Oil, Gas or Dry Hole): Dry Hole  
 Date Well Completed 10/20/81  
 Application for plugging filed Yes  
 Plugging commenced 10/20/81  
 Plugging completed 10/20/81  
 Reason for abandonment of well or producing formation

Locate Well  
 correctly on above  
 Section Platt.

Plugged as a Dry Hole  
 Was permission obtained from the Conservation Division or it's  
 Agent's before plugging was commenced? Yes

Name of Conservation Agent who supervised plugging of this well Paul Luthi  
 Producing formation N/A Depth to top \_\_\_\_\_ bottom T.D.

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS

Casing Record

Formation	Content	From	To	Size	Put in	Pulled Out
	Surf. Csg.	0'	554'	8-5/8"		No

Describe in detail the manner in which the well was plugged, indicating where the mud  
 fluid was placed and the method or methods used in introducing it into the hold. If cement  
 or other plugs were used, state the character of same and depth placed, from \_\_\_\_\_ feet  
 to \_\_\_\_\_ feet for each plug set.

Mud left in hole: Mud Weight 9.8; Viscosity 38

Plugged as follows:

70 sx 925'  
 35 sx 525'  
 10 sx 40'-0'  
 5 sx rathole  
 5 sx mousehole

(If additional description is necessary, use BACK of this sheet)

Name of Plugging Contractor Halliburton (field ticket #183623)

STATE OF Colorado COUNTY OF Denver, ss.  
E. E. Farnham (employee of owner) or (~~owner or operator~~) of the  
 above-described well, being first duly sworn on oath, says: That I have knowledge of the  
 facts, statements, and matters herein contained and the log of the above-described well as  
 filed and that the same are true and correct. So help me God.

(Signature) E. E. Farnham  
4 Inverness Court East  
 (Address)

SUBSCRIBED AND SWORN TO before me this 15th day of Dec., 19 81

My Commission expires: My commission expires Oct. 31, 1984

Linda Hastell  
 Notary Public.

RECEIVED  
 STATE CORPORATION COMMISSION

DEC 21 1981 12-21-81  
 CONSERVATION DIVISION  
 Wichita Kansas





A DIVISION OF HALLIBURTON COMPANY

REMIT TO  
P.O. BOX 84737  
DALLAS, TEXAS 75284

DIRECT ANY CORRESPONDENCE TO PAGE 1 OF  
P.O. DRAWER 1431  
DUNCAN, OKLAHOMA 73536

FIELD TICKET  
NO. 183623

FORM 1906 R-6

WELL NO. AND FARM <i>Keller # 23-14</i>	COUNTY <i>FORD</i>	STATE <i>KS</i>	DATE <i>8-10-20-81</i>
CHARGE TO <i>SAM BARY</i>	OWNER	DUNCAN USE ONLY	
ADDRESS	CONTRACTOR <i>Big A"</i>	LOCATION <i>1 Liberal, KS</i>	CODE <i>50340</i>
CITY, STATE, ZIP	SHIPPED VIA <i>HALLIBURTON</i>	LOCATION <i>2 Hugoton, KS</i>	CODE <i>50335</i>
DUNCAN USE ONLY	DELIVERED TO <i>LOCATION</i>	LOCATION <i>3</i>	CODE
	ORDER NO.	BULK MATERIAL DELIVERY TICKET NO. <i>B-037545</i>	
	WELL TYPE <i>GAS Development</i>	CODE <i>60</i>	
TYPE AND PURPOSE OF JOB <i>P.T.A.</i>			
TERMS: <b>NET</b> DUE BY THE 20TH OF FOLLOWING MONTH. INTEREST CHARGED AFTER 60 DAYS FROM DATE OF INVOICE			

PRICE REFERENCE	SECONDARY REF. OR PART NO.	CODE		DESCRIPTION	UNITS 1		UNITS 2		UNIT PRICE	AMOUNT
		L	D		QTY.	MEAS.	QTY.	MEAS.		
<i>000-117</i>		<i>1C</i>		<i>MILEAGE</i>		<i>M</i>			<i>2.50</i>	
<i>009-019</i>		<i>1C</i>		<i>Pump charge</i>	<i>925</i>	<i>FT</i>				<i>637.50</i>
<i>030-015</i>		<i>1C</i>		<i>5W TOP Plug</i>	<i>2</i>	<i>ea</i>			<i>60.00</i>	<i>120.00</i>
<i>Built Delivery Ticket No. = 037545</i>										<i>1172</i>
SERVICE CHARGE ON MATERIALS RETURNED						CU. FT.				
SERVICE CHARGE						CU. FT.				
<i>Ray</i>					TOTAL WEIGHT	LOADED MILES	TON MILES			

WAS JOB SATISFACTORILY COMPLETED? _____ WAS OPERATION OF EQUIPMENT SATISFACTORY? _____ WAS PERFORMANCE OF PERSONNEL SATISFACTORY? _____ <input checked="" type="checkbox"/> _____ Customer or His Agent	<b>TAX REFERENCES</b> _____ _____ <i>M.E. Russell</i> Halliburton Operator	SUB TOTAL TAX TAX TAX <b>TOTAL</b>
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**THIS IS NOT AN INVOICE**

TAXES, PRICE CHANGES, AND OTHER APPLICABLE DATA WILL BE SHOWN ON OUR INVOICE TO BE SUBMITTED FOR PAYMENT AT A LATER DATE.

CUSTOMER

JOB LOG

WELL NO. 23-74 LEASE Kellee TICKET NO. 11-26-81

CUSTOMER Sam Bailey PAGE NO. \_\_\_\_\_

JOB TYPE + DATE 10-20-81

FORM 2013 R-2

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1800							ON LOCATION SET UP TRUCK
	1922	5			X		100	START WATER AHEAD
	1923		5		X		100	FINISH WATER AHEAD
	1924	5			X		100	START TO MIX
	1927		<del>20</del> 14.000		X		100	FINISH MIXING
	1928	5			X		100	START WATER BEHIND
	1928		10.5		X		100	FINISH WATER BEHIND
	1928	5			X		100	START TO DISPLACEMENT
	1930		6		X		100	FINISH DISPLACEMENT
	2055	5			X		1000	START WATER BEHIND
	2056		5		X		1000	FINISH WATER BEHIND
	2056	5			X			START TO MIX CEMENT
	2058		<del>20</del> 14.000		X			FINISH MIXING CEMENT
					X			
					X			
					X			
	2100		4		X			FINISH DISPLACEMENT
					X			
	2205							SET 2-4" PLUG
	2210							SET MOUSE HOLE PLUG
	2215							SET RAT HOLE PLUG
	2215							START DISPLACEMENT AT 11:15 PM

# HALLIBURTON SERVICES JOB SUMMARY

HALLIBURTON  
DIVISION

HALLIBURTON  
LOCATION

BILLED ON  
TICKET NO.

## WELL DATA

FIELD \_\_\_\_\_ SEC. 23 TWP. N RNG. 23 COUNTY FORD STATE IN

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. 1.5  
 PACKER TYPE \_\_\_\_\_ SET AT \_\_\_\_\_  
 BOTTOM HOLE TEMP. \_\_\_\_\_ PRESSURE \_\_\_\_\_  
 MISC. DATA \_\_\_\_\_ TOTAL DEPTH 5870

## JOB DATA

CALLER OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE <u>10-20-81</u> TIME <u>1300</u>	DATE <u>10-20-81</u> TIME <u>1800</u>	DATE <u>10-20-81</u> TIME <u>2110</u>	DATE _____ TIME <u>2200</u>

## TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
<u>8 5/8</u>		
FLOAT COLLAR		
FLOAT SHOE		
GUIDE SHOE		
CENTRALIZERS		
BOTTOM PLUG		
TOP PLUG <u>5 in</u>	<u>2</u>	<u>HOBAS</u>
HEAD		
PACKER		
OTHER		

## PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
<u>M. K. Russell</u>	<u>6283</u>	<u>L. S. Hill</u>
<u>T. B. Quinn</u>	<u>2 T.</u>	
<u>W. B. Hill</u>	<u>2 T.</u>	<u>Huyoten</u> <u>KS</u>

## MATERIALS

TREAT. FLUID \_\_\_\_\_ DENSITY \_\_\_\_\_ LB/GAL.<sup>°API</sup>  
 DISPL. FLUID \_\_\_\_\_ DENSITY \_\_\_\_\_ LB/GAL.<sup>°API</sup>  
 PROP. TYPE \_\_\_\_\_ SIZE \_\_\_\_\_ LB.  
 ACID TYPE \_\_\_\_\_ GAL. %  
 SURFACTANT TYPE \_\_\_\_\_ GAL. IN  
 NG 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 \_\_\_\_\_

DEPARTMENT CEMENT  
 DESCRIPTION OF JOB UT

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

CUSTOMER REPRESENTATIVE X M. K. Russell

HALLIBURTON OPERATOR M. K. Russell COPIES REQUESTED \_\_\_\_\_

## CEMENT DATA

STAGE	NUMBER OF SACKS	TYPE	API CLASS	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
<u>1</u>	<u>70</u>	<u>H</u>			<u>10</u>		<u>1.87</u>	<u>15.6</u>
<u>2</u>	<u>35</u>	<u>H</u>			<u>5</u>		<u>1.87</u>	<u>15.6</u>
<u>3</u>	<u>10</u>	<u>H</u>			<u>5</u>		<u>1.87</u>	<u>15.6</u>
<u>1</u>	<u>5</u>	<u>K</u>			<u>5</u>		<u>1.87</u>	<u>15.6</u>
<u>3</u>	<u>5</u>	<u>H</u>			<u>5</u>		<u>1.87</u>	<u>15.6</u>

## PRESSURES IN PSI

## SUMMARY

## VOLUMES

CIRCULATING \_\_\_\_\_ DISPLACEMENT \_\_\_\_\_ PRESFLUSH: DBL.-GAL. \_\_\_\_\_ TYPE \_\_\_\_\_  
 BREAKDOWN \_\_\_\_\_ MAXIMUM \_\_\_\_\_ LOAD & BKDN: DBL.-GAL. \_\_\_\_\_ PAD: DBL.-GAL. \_\_\_\_\_  
 AVERAGE \_\_\_\_\_ FRACTURE GRADIENT \_\_\_\_\_ TREATMENT: DBL.-GAL. \_\_\_\_\_ DISPL: DBL.-GAL. \_\_\_\_\_  
 SHUT-IN: INSTANT \_\_\_\_\_ 5-MIN. \_\_\_\_\_ 15-MIN. \_\_\_\_\_ CEMENT SLURRY: DBL.-GAL. 215 500  
 TOTAL VOLUME: DBL.-GAL. \_\_\_\_\_

## HYDRAULIC HORSEPOWER

## REMARKS

ORDERED \_\_\_\_\_ AVAILABLE \_\_\_\_\_ USED \_\_\_\_\_  
 AVERAGE RATES IN BPM \_\_\_\_\_  
 TREATING \_\_\_\_\_ DISPL. \_\_\_\_\_ OVERALL \_\_\_\_\_  
 CEMENT LEFT IN PIPE \_\_\_\_\_  
 FEET \_\_\_\_\_ REASON \_\_\_\_\_

CUSTOMER



WORK ORDER CONTRACT AND PRE-TREATMENT DATA

FORM 1908 R-3

A Division of Halliburton Company DUNCAN, OKLAHOMA 73536

ATTACH TO INVOICE & TICKET NO. 183623

DISTRICT Liberal, KS

DATE 10-20-81

TO: HALLIBURTON SERVICES YOU ARE HEREBY REQUESTED TO FURNISH EQUIPMENT AND SERVICEMEN TO DELIVER AND OPERATE THE SAME AS AN INDEPENDENT CONTRACTOR TO: SAM GARY (CUSTOMER) AND DELIVER AND SELL PRODUCTS, SUPPLIES, AND MATERIALS FOR THE PURPOSE OF SERVICING

WELL NO. 23-14 LEASE Keller SEC. 23 TWP. 28 RANGE 23

FIELD COUNTY FORD STATE KS OWNED BY

THE FOLLOWING INFORMATION WAS FURNISHED BY THE CUSTOMER OR HIS AGENT

FORMATION NAME TYPE THICKNESS FROM TO PACKER: TYPE SET AT TOTAL DEPTH 5876 MUD WEIGHT 9.5 BORE HOLE INITIAL PROD: OIL BPD, H2O BPD, GAS MCF PRESENT PROD: OIL BPD, H2O BPD, GAS MCF

Table with columns: NEW USED, WEIGHT, SIZE, FROM, TO, MAX. ALLOW. P.S.I. Rows include CASING, LINER, TUBING, OPEN HOLE, and PERFORATIONS.

PREVIOUS TREATMENT: DATE TYPE MATERIALS

TREATMENT INSTRUCTIONS: TREAT THRU TUBING ANNULUS CASING TUBING/ANNULUS HYDRAULIC HORSEPOWER ORDERED

CUSTOMER OR HIS AGENT WARRANTS THE WELL IS IN PROPER CONDITION TO RECEIVE THE PRODUCTS, SUPPLIES, MATERIALS, AND SERVICES

THIS CONTRACT MUST BE SIGNED BEFORE WORK IS COMMENCED

- As consideration, the above-named Customer agrees: (a) To pay Halliburton in accord with the rates and terms stated in Halliburton's current price lists. (b) Halliburton shall not be responsible for and Customer shall secure Halliburton against any liability for damage to property of Customer and of the well owner...

I HAVE READ AND UNDERSTAND THIS CONTRACT AND REPRESENT THAT I AM AUTHORIZED TO SIGN THE SAME AS CUSTOMER'S AGENT.

SIGNED [Signature] CUSTOMER

DATE 10-20-81

TIME 2:00 A.M. P.M.

We certify that the Fair Labor Standards Act of 1938, as amended, has been complied with in the production of goods and/or with respect to services furnished under this contract.

CUSTOMER