

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

Operator: License # 5293

Name: Helmerich & Payne, Inc.

Address 2606 Fleming

City/State/Zip Garden City, Kansas 67846

Purchaser: ClG

Operator Contact Person: Ken Jehlik

Phone (316) 276-3693

Contractor: Name: Cheyenne Drlg

License: _____

Wellsite Geologist: None

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/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. _____

4-17-97 4-19-97 6-2-97

Spud Date 4-17-97 Date Reached TD 4-19-97 Completion Date 6-2-97

STATE TEST

API NO. 15- 081-211100000 ORIGINAL

County Haskell

- NE - SW - SE Sec. 4 Twp. 27S Rge. 34 X W

1250 Feet from SN (circle one) Line of Section

1400 Feet from EW (circle one) Line of Section

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

Lease Name Jones Well # 9-2

Field Name Hugoton

Producing Formation Chase

Elevation: Ground 2963 KB 2973

Total Depth 2825 PBTD 2811

Amount of Surface Pipe Set and Cemented at 515 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 2825

feet depth to Surf w/ 575 sx cmt.

Drilling Fluid Management Plan AH. 2, 1-27-98 U.C.
(Data must be collected from the Reserve Pit)

Chloride content 29000 ppm Fluid volume 1900 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 Ken Jehlik
Title District Manager Date 6-9-97

Subscribed and sworn to before me this 9th day of June, 19 97.

Notary Public Judith R. Richmeier

Date Commission Expires August 15, 2000



RCO 7-11-97

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

Operator Name Helmerich & Payne, Inc. Lease Name Jones Well # 9-2

Sec. 4 Twp. 27S Rge. 34 East West
 County Haskell

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

List All E.Logs Run:
Cased hole GRN

CASING RECORD <input 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 3/4	8 5/8	28	513	Howcolite C Class C	155 100	2% CC, 1/4# flocele 2% CC, 1/4# flocele
					65/35 Poz C	450	1/4# flocele
Production	7 7/8	5 1/2	15.5	2825	50/50 Poz C	125	1/4# flocele, 10% 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 Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
2	2570-2613 Herington/Krider	2500 gal 7 1/2% HCl acid	
2	2629-2651 Winfield	41000 gal 20# gel, 29100 gal	
1SP2F	2685-2695 U. Ft. Riley	75 Q foam, 5000 gal 70Q foam, 300 gal 65 Q foam, 6000# 30-70sd, 77000#	

TUBING RECORD	Size	Set At	Packer At	Liner Run
				12-20sd, 22500# 16-30sd, 25000# 20-40sd <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumed Production, SWD or Inj. 5-27-97 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls. <u>0</u>	Gas Mcf <u>398</u>	Water Bbls. <u>0</u>	Gas-Oil Ratio <u>25</u>	Gravity <u>1.166</u>
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Disposition of Gas: METHOD OF COMPLETION Production Interval

Vented Sold Used on Lease (If vented, submit ACO-18.)

Open Hole Perf. Dually Commingled 2570-2695

Other (Specify) _____

1997 JUL 17 11:10 AM
 H&P COMPANY
 OKLAHOMA



JOB LOC 39-5 *87/8 Surf down 9-2*

TICKET # *1001* TICKET DATE *4-17-97*

REGION North America	NW/COUNTRY	BDA / STATE <i>KS</i>	COUNTY <i>Wesley</i>
MBU ID / EMP # <i>L1102</i>	EMPLOYEE NAME <i>David...</i>	PSL DEPARTMENT <i>1001 Cement</i>	
LOCATION <i>Wesley, KS 66540</i>	COMPANY <i>Halliburton</i>	CUSTOMER REP / PHONE	ORIGINAL
TICKET AMOUNT	WELL TYPE	API / UWI #	
WELL LOCATION <i>Wesley</i>	DEPARTMENT <i>Cement</i>	JOB PURPOSE CODE <i>010 67% Service</i>	
LEASE / WELL # <i>9-2 down</i>	SEC / TWP / RNG		

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
<i>L1102 34174</i>		<i>Stal...</i>					
<i>down 64725</i>							

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL)(GAL)	PUMPS		PRESS. (psi)		JOB DESCRIPTION / REMARKS
				T	C	Tbg	Csg	
	<i>1330</i>							<i>Time Collected</i>
	<i>1630</i>							<i>Time on loc.</i>
								<i>Time Ready</i>
								<i>Start Pump Casing</i>
	<i>2005</i>							<i>Casing in Hole</i>
	<i>2005</i>							<i>Hook up to Circulate Casing</i>
	<i>2015</i>							<i>Circulate Casing w/ 100 MPa</i>
	<i>2017</i>							<i>Circulate Mud to Control level</i>
	<i>2037</i>							<i>Hook up to Pump Track</i>
	<i>2037</i>							<i>150 Start Mixing Cement</i>
	<i>2042</i>	<i>5</i>	<i>58.86</i>					<i>150 Start Tail Cement</i>
	<i>2049</i>		<i>23.5</i>					<i>150 Finish Mixing Cement</i>
	<i>2058</i>		<i>72.36</i>					<i>150/70 Start Pump Deep Plug</i>
	<i>2059</i>							<i>70 Start Displacement</i>
	<i>2100</i>	<i>3</i>	<i>30.4</i>					<i>150/70 Plug Return Plug Done Wash Pump & Lines Shut in Head & Mainfield</i>
								<i>8.1384 Circulate Cement to P...</i>

Thanks For Help
H. H. H.
Energy
David...
Wesley



JOB SURVEILLARY 4239-1

TICKET # TICKET DATE 4-17-97

REGION North America	NWA/COUNTRY 	BDA / STATE Ks	COUNTY Haskell
MBU ID / EMP # L10102	EMPLOYEE NAME Dennis Cooper 59179	PSL DEPARTMENT 5001 Cement	
LOCATION L10102 Ks 25540	COMPANY Haycocks Drilling H&P	CUSTOMER REP / PHONE 	
TICKET AMOUNT 	WELL TYPE 	API / UWI # 	ORIGINAL
WELL LOCATION NW 1/4 Sunkette	DEPARTMENT Cement	JOB PURPOSE CODE 010 8 1/2 SURFACE	
LEASE / WELL # 9-2 slavers	SEC / TWP / RNG 		

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
Cooper 59179	Stefanek 11487		
James G 9125			

HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES	HES UNIT NUMBERS	R/T MILES
420041	120	50737-75505	62				
53552-78202	120						

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 Barite Plug	1	Hayco
Float Shoe		
Guide Shoe		
Centralizers	3	
Bottom Plug		
Top Plug	1	
Head	1	
Packer		
Other Haycocks 148		

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 _____	In _____
Perfpac Balls _____	Qty. _____	
Other _____		
Other _____		
Other _____		
Other _____		

DATE	CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
	4-17	4-17	4-17	4-17
TIME	1330	1600	2000	2100

WELL DATA

	NEW/USED	WEIGHT	SIZE	FROM	TO	MAX ALLOW
Casing		24	8 5/8	KB		
Liner						
Liner						
Tbg/D.P.						
Tbg/D.P.						
Open Hole			12 1/4	GL	520	SHOTS/FT.
Perforations						
Perforations						
Perforations						

HOURS ON LOCATION		OPERATING HOURS		DESCRIPTION OF JOB
DATE	HOURS	DATE	HOURS	
TOTAL		TOTAL		

HYDRAULIC HORSEPOWER

ORDERED _____	Avail. _____	Used _____
TREATED _____	AVERAGE RATES IN BPM	Overall _____
FEET 42 FT	Disp. _____	
	CEMENT LEFT IN PIPE	Reason Shoe Joint
	Reason _____	

STAGE	SACKS	CEMENT	BULK/SKS	ADDITIVES	YIELD	LBS/GAL
	1.55	Primo Plus	15WT	2% CC 1/4 1/2 Flocc	2.04	11.6
					1.32	15.8

Circulating _____	Displacement _____	Preflush: Gal - BBI _____	Type _____
Breakdown _____	Maximum _____	Load & Bkdn: Gal - BBI _____	Pad: BBI - Gal _____
Average _____	Frac Gradient _____	Treatment Gal - BBI _____	Disp: BBI - Gal 30.4
Shut In: Instant _____	5 Min _____ 15 Min _____	Cement Slurr Gal - BBI 72.36	
		Total Volume Gal - BBI _____	

Frac Ring #1 _____	Frac Ring #2 _____	Frac Ring #3 _____	Frac Ring #4 _____
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THE INFORMATION STATED HEREIN IS CORRECT

CUSTOMER'S REPRESENTATIVE SIGNATURE
[Signature]

Dowell

REMIT TO:

P O BOX 890788
DALLAS TX 75389-0788

0312

ORIGINAL

624804
HELMERICH & PAYNE INC

BOX 558
GARDEN CITY KS 67846

PAGE	INVOICE DATE
1	04/19/97
INVOICE NUMBER	
03-12-9143I	
TYPE SERVICE	
CEMENTING CEMENT PRODUCTIO	

WELL NAME / JOB SITE	STATE	COUNTY / CITY	SERVICE FROM LOCATION	SHIPPED VIA	CUSTOMER P.O. NO./REF.
JONES # 9-2	KS	HASKELL	ULYSSES	DOWELL	
LOCATION / PLANT ADDRESS			DATE OF SERVICE ORDER	CUSTOMER OR AUTHORIZED REPRESENTATIVE	
SEC 04-27S-34W			04/19/97	BRAD KLINE	

ACCOUNTING CODES

ITEM CODE	DESCRIPTION	UOM	QTY	UNIT PRICE	AMOUNT
102871030	CSNG CMNT 2501-3000' 1ST 8HR	8HR	1	1,560.0000	1,560.00
048601000	CEMENT HEAD RENTAL	JOB	1	.0000	N/C
049102000	TRANSPORTATION CMNT TON MILE	MI	810	1.1200	907.20
049100000	SERVICE CHG CEMENT MATL LAND	CFT	627	1.5300	959.31
059697000	PACR TREAT ANALYSIS RECORDER	JOB	1	179.0000	179.00
059200002	MILEAGE, ALL OTHER EQUIPMENT	MI	30	3.1500	94.50
040003000	D903, CEMENT CLASS C	CFT	355	10.9400	3,883.70
101545000	D132, LITEPOZ	CFT	220	4.7000	1,034.00
045004050	D44, GRANULATED SALT	LBS	594	.1400	83.16
045014050	D20, BENTONITE EXTENDER	LBS	2720	.1800	489.60
047002050	D46, ANTIFOAM	LBS	21	3.6800	77.28
044003025	D29, CELLOPHANE FLAKES	LBS	144	1.9100	275.04
044002050	D60, FLAC FLUID LOSS ADDITIV	LBS	81	10.0400	813.24
053003054	INSERT ORIFICE FILL 5-1/2"	EA	1	286.0000	286.00
056011054	CENTR REG 5-1/2, B DIA-9"	EA	9	73.0000	657.00
056702054	PLUG CEMG 5-1/2" TOP PLASTIC	EA	1	83.0000	83.00
	DISCOUNT - MATERIAL				2,919.16-
	DISCOUNT - SERVICE				1,406.01-
				SUB TOTAL --	7,656.86
M C	STATE TAX ON			5,325.32	260.94
M F C	LOCAL TAX ON			5,325.32	53.25
				AMOUNT DUE --	7,371.05

CHARGE James 9-2
S/L 118 AFE 90/197 1003
DESCRIP 5-29-97

THANK YOU, WE APPRECIATE YOUR BUSINESS.

** WE CAN INVOICE YOU VIA EDI. CALL (713)275-8414 FOR INFORMATION **

WITH QUESTIONS CALL 316-356-1272
FEDERAL TAX ID # 22-1692661
TERMS -- NET 30 DAYS DUE ON OR BEFORE MAY 19, 1997