

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

Operator: License # 4549

Name: ANADARKO PETROLEUM CORPORATION

Address P. O. BOX 351

City/State/Zip LIBERAL, KANSAS 67905-0351

Purchaser: TO BE DETERMINED

Operator Contact Person: J. L. ASHTON

Phone (316) 624-6253

Contractor: Name: GABBERT-JONES

License: 5842

Wellsite Geologist: NA

Designate Type of Completion
 New Well Re-Entry Workover

- * Oil SWD SLOW Temp. Abd.
- * Gas ENHR SIGW
- Dry Other (Core, WSW, Expl., Cathodic, etc)
- *To be determined

If Workover:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

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

<u>4-12-95</u>	<u>4-20-95</u>	<u>**</u>
Spud Date	Date Reached TD	Completion Date
		**Waiting on Completion

ORIGINAL

RELEASED
MAR 23 1998

FROM CONFIDENTIAL

CONFIDENTIAL

API NO. 15- 081-20917-0000

County HASKELL

SE - NE Sec. 16 Twp. 29S Rge. 34 **E**

1980 Feet from **N** (circle one) Line of Section

610 Feet from **E** X (circle one) Line of Section

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

Lease Name OWENS 'A' Well # 1

Field Name EUBANK

Producing Formation BASAL CHESTER

Elevation: Ground 2975.0 KB --

Total Depth 5600 PBDT 5432

Amount of Surface Pipe Set and Cemented at 1811 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set 2868 Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan ART / 3-14-99
(Data must be collected from the Reserve Pit) DPW

Chloride content 1100 ppm Fluid volume 700 bbls

Dewatering method used NATURAL EVAPORATION

Location of fluid disposal if hauled offsite: _____

Operator Name _____ **CONFIDENTIAL**

Lease Name AUG 9 License No. _____

CONFIDENTIAL 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 *Tom Hooper*

Title DRILLING ENGINEER Date 8/8/95

Subscribed and sworn to before me this 8th day of August, 19 95.

Notary Public *Freda L. Hinz*

Date Commission Expires _____

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"/>	Geologist Report Received
Distribution		
<input type="checkbox"/>	KCC	<input type="checkbox"/> SWD/Rep
<input type="checkbox"/>	KGS	<input type="checkbox"/> Plug
		<input type="checkbox"/> NGPA
		<input type="checkbox"/> Other
		(Specify)

FREDA L. HINZ
Notary Public - State of Kansas
My Appt. Expires 5-15-99

RECEIVED
KANSAS CORPORATION COMMISSION ACD-1 (7-91)

AUG 09 1995

CONSERVATION DIVISION
WICHITA, KS

Operator Name ANADARKO PETROLEUM CORPORATION Lease Name OWENS 'A' Well # 1

Sec. 16 Twp. 29S 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 Yes No
(Attach Additional Sheets.)
Samples Sent to Geological Survey Yes No
Cores Taken Yes No
Electric Log Run Yes No
(Submit Copy.)
List All E.Logs Run: CNL-LDT, DIL, ML, SONIC, SBT-GR,

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datums	<input type="checkbox"/> Sample
Name	Top	Datum
B/STONE CORRAL	1808	
CHASE	2527	
COUNCIL GROVE	2838	
HEEBNER	3980	
LANSING	4068	
MARMATON	4658	
MORROW	5160	
CHESTER	5344	
ST. LOUIS	5536	

CASING RECORD New 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	12.25	8.625	24	1881	PREM PLUS LT/ PREM PLUS	480/160	2%CC, 1/4#/SK FLC /2%CC, 1/4#/SK FLC
PRODUCTION	7.875	5.5	15.5	5600	50/50 POZ/H	50/160	10PPG:10%SALT, 1/4#/SK FLOCELE 14.5PPG: SAME
			F.O. TOOL	2868	MIDCON-2	90	NONE

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	5516-5532, CIBP @ 5500	NONE.	5516-5532
4	5471-5480, CMT RTNR @ 5465	NONE.	5471-5480
4	5441-5452, CMT RTNR @ 5432	ACID:600 GAL 7-1/2% FE HCL.	5441-5452
4	5392-5410	ACID:900 GAL 7-1/2% HCL.	5392-5410

TUBING RECORD Size 2-3/8" Set At 5390 Packer At _____ Liner Run Yes No

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

Estimated Production Per 24 Hours Oil *** Bbls. Gas *** Mcf Water *** Bbls. Gas-Oil Ratio Gravity

Disposition of Gas: Method of completion Vented To Be Sold Used on Lease (If vented, submit ACO-18.)
Production Interval Open Hole Perf. Dually Comp. Commingled
 Other (Specify) _____ 5392-5410'

**WAITING ON FINAL COMPLETION

GABBERT-JONES, INC.
WICHITA, KANSAS

ORIGINAL

DRILLER'S WELL LOG

WELL NAME: Owen A-1
Sec 16-29S-34W
Haskell County, Kansas

KCC
AUG 9
CONFIDENTIAL

CONFIDENTIAL

COMMENCED: April 12, 1995
COMPLETED: April 22, 1995
OPERATOR: Anadarko Petroleum Corporation

DEPTH		FORMATION	REMARKS
From	To		
0	635	Sand	
635	838	Redbed-Sand-Gyp	Ran 44 jts of 24# 8 5/8" csg set
838	1225	Redbed-Gyp	@ 1811' w/480 sks Prem Plus Lite
1225	1750	Redbed-Gyp-Sand	65% Class C 35% Posmix 6% Gel
1750	1812	Redbed-Gyp	2% CC 1/4# Flocele - 160 sks
1812	2120	Anhy-Redbed-Shale	Prem Plus C 2% CC 1/4#
2120	2530	Redbed-Shale	Flocele
2530	3090	Shale-Lime	PD @ 8:30PM 04/13/95
3090	5600	Lime-Shale	

5600' TD

MAR 23 1998

FROM CONFIDENTIAL

RECEIVED
KANSAS CORPORATION COMMISSION

AUG 09 1995

CONSERVATION DIVISION
WICHITA, KS

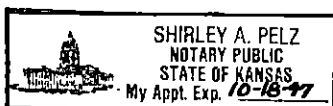
Ran 128 jts of 15 1/2# 5 1/2" csg set @ 5599' - FO Tool @ 2868' - cemented w/210 sks 50/50 Posmix Class H 10% Salt 1/4# Flocele .75% Halid 322 PD @ 9:00AM 04/22/95 RR @ 10:00AM 04/22/95

[STATE OF KANSAS]
[COUNTY OF SEDGWICK]

Subscribed and sworn to before me this
24th day of April, 1995.

Shirley A. Pelz
Shirley A. Pelz, Notary Public

My commission expires:
October 18, 1997



I, the undersigned, being sworn on oath, state that the above Driller's 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 S. Sutton, II
James S. Sutton, II President

CEMENTING SERVICE REPORT

Schlumberger

DOWELL SCHLUMBERGER INCORPORATED

TREATMENT NUMBER 02-12-9024	DATE 4-13-95
STAGE 1	DS 03
DISTRICT 12	

PRINTED IN U.S.A.

WELL NAME AND NO. Owens A#1	LOCATION (LEGAL) SEC 16-29S-34W
FIELD-POOL HUGOTON	FORMATION
COUNTY/PARISH HASKELL	STATE KS.
API. NO.	

WELL DATA:		BOTTOM		TOP	
BIT SIZE 17.7	CSG/Liner Size 8.25				
TOTAL DEPTH	WEIGHT	24			
<input type="checkbox"/> ROT <input type="checkbox"/> CABLE	FOOTAGE	1826	CONFIDENTIAL		
MUD TYPE	GRADE				
<input type="checkbox"/> BHST <input type="checkbox"/> BHCT 90	THREAD	9RD			
MUD DENSITY	LESS FOOTAGE SHOE JOINT(S)	1783			
MUD VISC.	Disp. Capacity	112.6	TOTAL		

NAME **Quadrark Petroleum**

AND _____

ADDRESS _____

ZIP CODE _____

SPECIAL INSTRUCTIONS
Safety cmt. 8' surface casing as per customer orders as follows

IS CASING/TUBING SECURED? YES NO

LIFT PRESSURE PSI **750** CASING WEIGHT - SURFACE AREA (3.14 x R²)

PRESSURE LIMIT PSI **820** BUMP PLUG TO **820** PSI

ROTATE RPM _____ RECIPROCATATE FT _____ No. of Centralizers **4 check**

NOTE: Include Footage From Ground Level To Head in Disp. Capacity

Float	TYPE	Auto Fill Plug	Stage Tool	TYPE	
	DEPTH	1783		DEPTH	
SHOE	TYPE	Cmt nose		TYPE	
	DEPTH	1826		DEPTH	

Head & Plugs TBG D.P. SQUEEZE JOB

Double WEIGHT TOOL TYPE

Single GRADE TAIL PIPE: SIZE DEPTH

Swage THREAD TUBING VOLUME Bbls

Knockoff NEW USED CASING VOL. BELOW TOOL Bbls

TOP C/W DEPTH TOTAL Bbls

BOT C/W ANNUAL VOLUME Bbls

TIME	PRESSURE		VOLUME PUMPED BBL		JOB SCHEDULED FOR			ARRIVE ON LOCATION		LEFT LOCATION	
	TBG OR D.P.	CASING	INCREMENT	CUM	TIME	DATE	TIME	DATE	TIME	DATE	
0001 to 2400											
19:35		2480					H2O	8.3			
19:37		190	10		7	420	8.3				
19:38		210		11	7	420	8.3				
19:38		230	190		7	CMT	12.3				
19:47		260		60	7.3	CMT	12.3				
19:55		200		120	2.3	CMT	12.3				
20:03		280		181	7.3	CMT	12.3				
20:03		280	38		6.8	CMT	14.8				
20:09		210	38		5.8	CMT	14.8				
20:09											
20:12		190	1136		7	H2O	8.3				
20:20		160		50	5.5	H2O	8.3				
20:22		250		63	6.7	H2O	8.3				
20:26		400		90	6.7	H2O	8.3				
20:28		550		105	2	H2O	8.3				
20:34		820		114.8		H2O	8.3				

RECEIVED
KANSAS CORPORATION COMMISSION

AUG 09 1995

CONSERVATION DIVISION
WICHITA KS

RELEASED

MAR 23 1998

FROM CONFIDENTIAL

SYSTEM CODE	NO. OF SACKS	YIELD CU. FT/SK	COMPOSITION OF CEMENTING SYSTEMS				SLURRY MIXED	
			BBL	DENSITY	BBL	DENSITY		
1.	490	7.1	$\frac{1}{5} PZ + 6\% S-20 + 2\% S-1 + \frac{1}{4} S-29$				151	12.3
2.								
3.	1601	1.32	$10' + 2\% S-1 + \frac{1}{4} S-29$				38	14.9
4.								
5.								
6.								

BREAKDOWN FLUID TYPE	VOLUME	DENSITY	PRESSURE	MAX 820	MIN: 7
<input type="checkbox"/> HESITATION SQ.	<input type="checkbox"/> RUNNING SQ.	<input type="checkbox"/> YES <input type="checkbox"/> NO	Cement Circulated To Surf.	<input type="checkbox"/> YES <input type="checkbox"/> NO	23 Bbls
BREAKDOWN	PSI	FINAL	PSI	DISPLACEMENT VOL. 114.8	Bbls
Washed Thru Perfs	<input type="checkbox"/> YES <input type="checkbox"/> NO	TO	FT.	MEASURED DISPLACEMENT <input checked="" type="checkbox"/>	<input type="checkbox"/> WIRELINE
PERFORMATIONS	TO	TO	CUSTOMER REPRESENTATIVE	DS	SUPERVISOR
			Jim BARLOW		Ray P...

DOWELL SCHLUMBERGER INCORPORATED

P.O. BOX 4378 HOUSTON, TEXAS 77210

CUSTOMER

OILFIELD SERVICES

Dowell Service Order Receipt & Invoice No. **7024**
 Dowell Service Location Name and Number **ULYSES, KS. 03-12**

CUSTOMER'S NAME **ANADARKO PETROLEUM**
 ADDRESS _____
 CITY, STATE AND ZIP CODE _____

ORIGINAL

Dowell will furnish and Customer shall purchase materials and services required in the performance of the following SERVICE INSTRUCTIONS in accordance with the general terms and conditions as printed on the reverse side of this service order and/or attached to this service order. This service order is subject to alternative dispute resolution.

Safety cont. 8 1/2" surface casing as per customer's orders with the following.

IMPORTANT
 SEE OTHER SIDE FOR TERMS & CONDITIONS

ARRIVE LOCATION **4 13 95 14:15**

SERVICE ORDER I authorize work to begin per service instructions in accordance with terms and conditions printed on the reverse side of this form and/or attached to this form and represent that I have authority to accept and sign this order.

SIGNATURE OF CUSTOMER OR AUTHORIZED REPRESENTATIVE
John Shoen

JOB COMPLETION **4 13 95**

SERVICE RECEIPT I certify that the materials and services listed were received and all services performed in a workmanlike manner.

SIGNATURE OF CUSTOMER OR AUTHORIZED REPRESENTATIVE
John Shoen

CUSTOMER NUMBER _____ CUSTOMER PO/CONTRACT NUMBER _____ TYPE SERVICE CODE **271** WORKOVER NEW WELL OTHER W N O AFE NUMBER _____

STATE **KS.** CODE **15** COUNTY/PARISH **HASKELL** CODE **081** CITY **CONFIDENTIAL**

WELL NAME AND NUMBER/JOB SITE **OWENS A #1** LOCATION NAME AND NUMBER/OFFSHORE PLATFORM **SEC. 16-295-34W**

ACCOUNTING CODES _____ ROUND TRIP MILEAGE _____

SERVICE ORDER RECEIVED
 KANSAS CORPORATION COMMISSION
 AUG 09 1995

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
102971-020	Pump chg.	EQ.	1	1250 ⁰⁰	1250 ⁰⁰
049102-000	DEL. chg.	mi.	616	1 ⁰⁰	616 ⁰⁰
049100-000	GRV. chg.	cu.ft.	708	1 ³⁰	962 ⁸⁰
059697-000	PAIR	EA.	1	15 ⁰⁰	15 ⁰⁰
059700-002	MIL. chg.	mi.	20	2 ⁹⁵	59 ⁰⁰
040003-000	1" CMT. 0903	CUFT.	473	10 ⁴⁰	4928 ⁶⁶
101545-000	POZ D-132	CUFT.	168	4 ³³	737 ²⁴
045014-050	GEL D-20	LB.	2610	.17	443 ⁷⁰
067005-100	COCK. 5-1	LB.	1152	.40	460 ⁸⁰
044003-025	GEL. FLK. D-29	LB.	160	1 ⁷²	
056702-085	TOP PLUG	EQ.	1	109 ⁰⁰	109 ⁰⁰
050101-085	CMT. Guide shoe	EQ.	1	280 ⁰⁰	280 ⁰⁰
053003-085	AUTO FILL INSERT/FIBER	EQ.	1	360 ⁰⁰	360 ⁰⁰
056011-085	CENTRALIZERS	EQ.	6	82 ⁰⁰	492 ⁰⁰
055008-085	CMT. BASKET	EQ.	1	267 ⁰⁰	267 ⁰⁰
057499-001	THREADED LOCK NUT	EQ.	1	28 ⁰⁰	28 ⁰⁰
048601-000	CMT. Head	EQ.	1	70 ⁰⁰	N/C
					\$ 11153 ⁵⁶
					\$ 3292 ⁵¹
					\$ 7361 ³⁵

RELEASED

7361³⁵ CONSERVATION DIVISION WICHITA, KS SUBMITTAL 23 1998

LICENSE/REIMBURSEMENT FEE _____ FROM CONFIDENTIAL

REMARKS: **Thanks for using Dowell-Schlumberger**
 STATE _____ % TAX ON \$
 COUNTY _____ % TAX ON \$
 CITY _____ % TAX ON \$
 SIGNATURE OF DOWELL REPRESENTATIVE **Ray Pearson** TOTAL \$ _____

WELL DATA

FIELD _____ SEC. _____ TWP. _____ RNG. _____ COUNTY Haskell STATE Kansas

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 _____

	NEW USED	WEIGHT	SIZE	FROM	TO	MAXIMUM PSI ALLOWABLE
CASING	<u>W</u>	<u>15.5</u>	<u>5 1/2</u>	<u>0</u>	<u>5616</u>	
LINER						
TUBING						
OPEN HOLE						SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

ORIGINAL

JOB DATA

CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE <u>4-21-95</u>	DATE <u>4-22-95</u>	DATE <u>4-22-95</u>	DATE <u>4-22-95</u>
TIME <u>22:00</u>	TIME <u>01:00</u>	TIME <u>07:47</u>	TIME <u>08:40</u>

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
FLOAT COLLAR		
FLOAT SHOE		
GUIDE SHOE <u>Ry 5 1/2</u>	<u>1</u>	<u>Hallib</u>
CENTRALIZERS <u>S-Y 5 1/2</u>		
BOTTOM PLUG		
TOP PLUG <u>SW 5 1/2</u>	<u>1</u>	
HEAD		
PACKER <u>basket 5 1/2</u>	<u>1</u>	
OTHER <u>insert 5 1/2</u>	<u>1</u>	

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
<u>K. Boone 47841</u>	<u>40076</u>	<u>Liberal</u>
<u>N. Tate E0562</u>	<u>52823</u> <u>75374</u>	<u>"</u>
<u>M. Longworth 69510</u>	<u>56464</u> <u>5803</u>	<u>Hogston</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. _____ 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 _____

OTHER _____

CONFIDENTIAL

DEPARTMENT Cement

DESCRIPTION OF JOB Cement 5616' of 5 1/2" casing

Baker FOTW @ 286P

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

CUSTOMER REPRESENTATIVE X [Signature]

HALLIBURTON OPERATOR K. Boone COPIES REQUESTED _____

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
	<u>22702</u>	<u>50/50 P62</u>	<u>P</u>	<u>B</u>	<u>10% salt, 1/4" Flocc, .75% Halad - 322</u>	<u>1.30</u>	<u>18.5</u>

RELEASED

PRESSURES IN PSI

SUMMARY

VOLUMES

CIRCULATING _____ DISPLACEMENT _____ PRES. AND BLD. _____ TYPE KCL / mud flush

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

AVERAGE _____ FRACTURE GRADIENT _____ TREATMENT: BBL.-GAL. _____ DISPL.: BBL.-GAL. 133

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

HYDRAULIC HORSEPOWER _____

ORDERED _____ AVAILABLE _____ USED _____

AVERAGE RATES IN BPM _____

TREATING _____ DISPL. _____ OVERALL _____

CEMENT LEFT IN PIPE _____

FEET 26 REASON Shoe Joint

TOTAL VOLUME: BBL.-GAL. _____

REMARKS _____

FROM CONFIDENTIAL

CUSTOMER: AVA DAKO
LEASE: Owens
WELL NO.: A-1
JOB TYPE: 5 1/2" 133'
DATE: 4-22-95



JOB LOG HAL-2013-C

CUSTOMER: *Amadarko* WELL NO.: *A1* LEASE: *Owens* JOB TYPE: *5 1/2 L.S.* TICKET NO.: *706675*

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	<i>02:00</i>							<i>called out Ready @ 02:00</i>
	<i>06:00</i>							<i>on loc.</i>
								<i>Safety Meeting</i>
	<i>02:47</i>	<i>6</i>	<i>20</i>			<i>250</i>		<i>Pump KCL water</i>
	<i>07:50</i>	<i>6</i>	<i>30</i>			<i>250</i>		<i>Pump mud Flush</i>
	<i>07:55</i>	<i>6</i>	<i>20</i>			<i>250</i>		<i>Pump KCL water</i>
	<i>07:58</i>	<i>6</i>	<i>15</i>			<i>250</i>		<i>Pump 50 sh SCAURON cement</i>
	<i>08:01</i>	<i>6</i>	<i>37</i>			<i>250</i>		<i>Pump 160 sh cement</i>
	<i>08:12</i>							<i>wash up to pit</i>
	<i>08:14</i>							<i>Release plug</i>
	<i>08:15</i>	<i>6</i>						<i>start Displacement</i>
		<i>1 1/2</i>						<i>slow Rate down</i>
	<i>08:40</i>					<i>1000</i>		<i>plug down</i>
								<i>ck fit</i>
								<i>Job Time 7 Hrs</i>
								<i>Pump Time 53 min</i>

ORIGINAL

CONFIDENTIAL

RECEIVED
KANSAS CORPORATION COMMISSION

AUG 09 1995

CONSERVATION DIVISION
WICHITA, KS

RELEASED
MAR 23 1998
FROM CONFIDENTIAL



CHARGE TO: AWADARCO
 ADDRESS:
 CITY, STATE, ZIP CODE:

COPY

TICKET

No. 706675 - 2

PAGE 1 OF 2

FORM 1906 R-13

SERVICE LOCATIONS 1. <u>Liberal 025510</u>	WELL/PROJECT NO. <u>A-1</u>	LEASE <u>DWENS</u>	COUNTY/PARISH	STATE <u>Ks.</u>	CITY/OFFSHORE LOCATION	DATE <u>4-22-95</u>	OWNER <u>Huadarko</u>
2. <u>Hugoton 025535</u>	TICKET TYPE <input checked="" type="checkbox"/> SERVICE	NITROGEN JOB? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	CONTRACTOR <u>Gabbert & Jones</u>	RIG NAME/NO. <u>12</u>	SHIPPED VIA <u>Co. Truck</u>	DELIVERED TO <u>Loc</u>	ORDER NO.
3.	WELL TYPE	WELL CATEGORY <u>02</u>	JOB PURPOSE <u>035</u>	WELL PERMIT NO.	WELL LOCATION		
4.	REFERRAL LOCATION	INVOICE INSTRUCTIONS					

CONFIDENTIAL

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LOC	ACCT.	DF.		QTY.	UM	QTY.	UM	
000-117		1			MILEAGE	100	m			275.00
001-016		1			Pump charge	5616	ft			2000.00
030-016		1			Top Rubber Plug	1	EA			60.00
12A	825-305	1			Slip St. Guide shoe	1	EA	5/2		165.00
24A	815-19251	1			Insert JH valve	1	EA	5/2		110.00
27	815-19311	1			Auto F-Flap Assy	1	EA	5/2		55.00
40	806-60082	1			Centralizers	17	EA	5/2	60.00	1020.00
320	806-71430	1			concrete Basket	1	EA	5/2		90.00
350	890-10802	1			Weld-A	1	lb			14.50
314-113		1			CLAY-FIX II	2	BA		28.00	56.00
018-365		1			mud-Flush	1260	BA		65	819.00
019-0010	0245-052	1			Strip sheet	1	EA			150.00

RECEIVED
KANSAS CORPORATION COMMISSION
AUG 09 1995
CONSERVATION DIVISION
MICHIGAN

RELEASED
MAR 23 1998
FROM 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 David Gilmore
 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

SURVEY

OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?	AGREE	UN-DECIDED	DIS-AGREE
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?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	

PAGE TOTAL	4814	50
FROM CONTINUATION PAGE(S)	3445	15
SUB-TOTAL APPLICABLE TAXES WILL BE ADDED ON INVOICE	8259	65

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>David Gilmore</u>	CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE) <u>X David Gilmore</u>	HALLIBURTON OPERATOR/ENGINEER <u>Keith Leane</u>	EMP # <u>47841</u>	HALLIBURTON APPROVAL
---	--	---	-----------------------	----------------------



HALLIBURTON

HALLIBURTON ENERGY SERVICES

TICKET CONTINUATION

CUSTOMER COPY

TICKET No. 71

FORM 1911 R-10

CUSTOMER Anadarko Petroleum Corp. WELL Owens A-1 DATE 04-21-95 PAGE OF

Table with columns: PRICE REFERENCE, SECONDARY REFERENCE/PART NUMBER, ACCOUNTING (LOC, ACCT, DF), DESCRIPTION, QTY., U/M, UNIT PRICE, AMOUNT. Includes items like 50/50 Premium Pozmix Cement, Floccs, Haled, Granulated Salt, and summary rows for SERVICE CHARGE, CUBIC FEET, MILEAGE CHARGE, TOTAL WEIGHT, LOADED MILES, and TON MILES.

ORIGINAL

CONFIDENTIAL

RELEASED MAR 23 1998 FROM CONFIDENTIAL

RECEIVED KANSAS CORPORATION COMMISSION AUG 09 1995

CONSERVATION DIVISION WICHITA, KS

No. B 218917

CONTINUATION TOTAL 3,145.5



JOB LOG HAL-2013-C

CUSTOMER *Andersco Ptes.* WELL NO. *A 1#* LEASE *Owens* JOB TYPE *Convent FO Tech* TICKET NO. *706686*

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0900							Time Called
	1300							Time Ready
	1145							Time on loc.
	1500							Hookup To Tub.
	1508					1500		Press Test Casing
	1513					300		Release Press To 300 lbs
	1515							Open FO Tech
	1516	2 ^{gpm}	2			400		Break Circulation
	1518							Start Downhole w/cut
	1544		52.48					Finish Plug Cement
	1545							Start Displacement
	1549		10.5					Shut Down
	1550							Close FO Tech
	1552					1500		Press up
	1554							Release Press
	1555							Hookup To BS
	1602	3				400		Reverse out
	1613		30			350		Shut Down
	1615							Finish work.

CONFIDENTIAL

ORIGINAL

RECEIVED KANSAS CORPORATION COMMISSION

AUG 09 1995

CONSERVATION DIVISION WICHITA, KS

Thanks For Calling Halliburton

Oliver & Crew

RELEASED

1 HE 15 mu For cbs
4 HE 30 mu on loc

MAR 23 1998

FROM CONFIDENTIAL



HALLIBURTON ENERGY SERVICES

CHARGE TO: Armedero Petroleum Corp.
 ADDRESS:
 CITY, STATE, ZIP CODE:

COPY

TICKET

No. 706686 - 2

PAGE 1 OF

FORM 1906 R-13

SERVICE LOCATIONS 1. <u>Wichita, KS 25540</u>	WELL/PROJECT NO. <u>A1</u>	LEASE <u>OWENS</u>	COUNTY/PARISH <u>Haskell</u>	STATE <u>KS</u>	CITY/OFFSHORE LOCATION	DATE <u>4-27-95</u>	OWNER <u>Armedero</u>
2. <u>Hugoton, KS 25535</u>	TICKET TYPE <input type="checkbox"/> SERVICE <input type="checkbox"/> SALES	NITROGEN JOB? <input type="checkbox"/> YES <input type="checkbox"/> NO	CONTRACTOR	RIG NAME/NO.	SHIPPED VIA <u>Loc</u>	DELIVERED TO	ORDER NO.
3.	WELL TYPE	WELL CATEGORY <u>01 02</u>	JOB PURPOSE <u>Count FO Tool</u>	WELL PERMIT NO.	WELL LOCATION <u>NW of Satanta</u>		
4.	REFERRAL LOCATION	INVOICE INSTRUCTIONS					

PRICE REFERENCE	SECONDARY REFERENCE / PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
					MILEAGE	84				2.75	231.00
					Pump charge	2868	FT				1535
RECEIVED KANSAS CORPORATION COMMISSION AUG 09 1995 CONSERVATION DIVISION WICHITA, KS											
RELEASED MAR 23 1998 FROM 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 _____ TIME SIGNED _____ A.M. P.M.

do do not require IPC (Instrument Protection). Not offered

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	1766	100
TYPE LOCK	DEPTH	OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?					FROM CONTINUATION PAGE(S)	1751	132
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?						
TREE CONNECTION	TYPE VALVE	ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO					SUB-TOTAL APPLICABLE TAXES WILL BE ADDED ON INVOICE		
		<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>[Signature]</u>	CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE) <input checked="" type="checkbox"/> <u>[Signature]</u>	HALLIBURTON OPERATOR/ENGINEER <u>[Signature]</u>	EMP # <u>59179</u>	HALLIBURTON APPROVAL
---	--	---	-----------------------	----------------------

