

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

ORIGINAL

API NO. 15- 093-21285-0000

Operator: License # 5293

Name: Helmerich & Payne, Inc.

Address P.O. Box 558

City/State/Zip Garden City, KS 67846

Purchaser: Coastal Derby

Operator Contact Person: Ken Jehlik

Phone (316) 276-3693

Contractor: Name: Cheyenne Drilling

License: 5382

Wellsite Geologist: Jeff Stofka - MBC

Designate Type of Completion
 New Well Re-Entry Workover

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

If Workover/Re-Entry: old well info as follows:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

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

9-17-93 9-22-93 11-10-93
Spud Date Date Reached TD Completion Date
State Test

County Kearny

NE NE NE SW Sec. 14 Twp. 26s Rge. 35 E W

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

2840 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 USA "B" Well # 3

Field Name Pleasant Praire

Producing Formation Lansing "F"

Elevation: Ground 2997 KB 3008

Total Depth 4250 PBSD 4200

Amount of Surface Pipe Set and Cemented at 1868 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cnt.

Drilling Fluid Management Plan ALT 1 JH 2-23-94
(Data must be collected from the Reserve Pit)

Chloride content 8000 ppm Fluid volume 5000 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, 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 and correct to the best of my knowledge.

Signature [Signature] AC

Title Dist Mgr Date 11-19-93

Subscribed and sworn to before me this 22 day of November 19 93.

Notary Public [Signature]

Date Commission Expires August 15, 1996

RECEIVED
K.C.C. OFFICE USE ONLY
STATE CORPORATION COMMISSION
F Letter of Confidentiality Acknowledgment
C Wireline Log Received
C Geologist Report Received
Distribution
 KCC
 KGS
 Plug
Wichita, Kansas
(Specify)
12/1/93
12/1/93

Operator Name Helmerich & Payne, Inc.

Lease Name USA "B"

Well # 3

Sec. 14 Twp. 26s Rge. 35

East

County Kearny

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 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: GR-DSN

Log Name	Formation (Top)	Depth and Datum		<input checked="" type="checkbox"/> Sample
		Top	Datum	
	Heebner Shale	3822	-814	
	Toronto Lime	3838	-830	
	Lansing "A"	3910	-902	
	Lansing "B"	3952	-944	
	Lansing "C"	4004	-996	
	Lansing "D"	4030	-1022	
	Lansing "E"	4066	-1058	
	Lansing "F"	4130	-1122	

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 casing	12 1/4	8-5/8"	24.0	1868'	Howco Lite "C" Premium	600 Lead 150 tail	2% CC and 1/4#/sk flocele
Production	7-7/8	5 1/2"	15.5	4246'	65/35 Poz C 50/50 Poz C	300 lead 125 tail	6% gel 1/4#/sk flocele 2% gel 10% salt 1/4#/sk flocele .75% CFR-3

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
4	Lansing "F" perforated 4129-4135		Acidize w/ 750 gal 15% HCl	4129-35

TUBING RECORD		Size	Set At	Packer At	Liner Run	Gas-Oil Ratio		Gravity
		2-3/8	4177	None	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	N/A		31° API
Date of First, Resumed Production, SWD or Inj. State Test			Producing Method					
11-10-93			<input type="checkbox"/> Flowing <input checked="" 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		
	20	TSTM	108	N/A		31° API		

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: 4129-4135'

ORIGINAL

DRILLERS LOG

HELMERICH & PAYNE, INC.
USA "B" #3
SECTION 14-T26S-R35W
KEARNY COUNTY, KANSAS

API# 15.093-21285

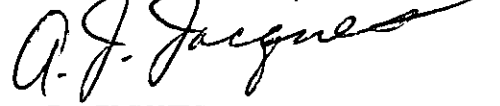
COMMENCED: 09-18-93
COMPLETED: 09-22-93

SURFACE CASING: 1871' OF 8 5/8"
CMTD W/600 SX PREM PLUS LT WT, 2% C.C.,
1/4#/SX FLO-CELE; TAILED IN W/150 SX
PREM PLUS, 2% C.C., 1/4#/SX FLO-CELE

FORMATION	DEPTH
SURFACE HOLE	0-1872
SHALE	1872-2680
SHALE & SAND	2680-3050
SHALE	3050-3650
LIME & SHALE	3650-4125
LIME & SAND	4125-4250 RTD

I DO HEREBY CERTIFY THAT THE FOREGOING STATEMENTS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

CHEYENNE DRILLING, INC.



A.J. JACQUES

STATE OF KANSAS : ss:

SUBSCRIBED AND SWORN TO BEFORE ME THIS 24TH DAY OF SEPTEMBER, 1993.

BECKY J. WHETSTONE
 NOTARY PUBLIC
 STATE OF KANSAS
 MY APPT. EXPIRES 4/29/95

RECEIVED
 STATE CORPORATION COMMISSION
 BECKY J. WHETSTONE, NOTARY PUBLIC
 DEC 01 1993

CONSERVATION DIVISION
Wichita, Kansas



CHARGE TO: *Deanna Dly*

ADDRESS:

CITY, STATE, ZIP CODE:

COPY:

No.

TICKET

5067

PAGE

1

RECEIVED

9-19-93

1/2 P

RECEIVED
 9-19-93
 1/2 P
 CONSERVATION DIVISION
 Wichita, Kansas

FORM 1908 R-12

1. SERVICE LOCATIONS <i>25540</i>	WELL/PROJECT NO. <i>B-3</i>	LEASE <i>USA</i>	COUNTY/PARISH <i>Keokuk</i>	STATE <i>Ks</i>	CITY/OFFSHORE LOCATION	DATE <i>9-19-93</i>	OWNER <i>1/2 P</i>
2. 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. <i>Deanna Dly</i>	SHIPPED VIA	DELIVERED TO <i>Loc</i>	ORDER NO.	
3. WELL TYPE	WELL CATEGORY <i>01 03</i>	JOB PURPOSE <i>010 8 1/2 Service</i>	WELL PERMIT NO.	WELL LOCATION			
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

ORIGINAL

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY.	UM	QTY.	UM	UNIT PRICE	AMOUNT
		LOC	ACCT	DF								
<i>00-117</i>		<i>1</i>				<i>50</i>	<i>miles</i>			<i>2.75</i>	<i>137</i>	<i>SC</i>
<i>001-016</i>		<i>1</i>			<i>Pump charge</i>	<i>18</i>	<i>FT</i>				<i>1220</i>	<i>FT</i>
<i>030-018</i>		<i>1</i>			<i>Sub Top Pkg</i>	<i>1</i>	<i>Fee</i>			<i>130</i>	<i>130</i>	<i>130</i>
<i>16A</i>	<i>830-201</i>	<i>1</i>			<i>Cuda Slec</i>	<i>1</i>		<i>8 1/2</i>		<i>161.00</i>	<i>161</i>	<i>161</i>
<i>24A</i>	<i>815-9502</i>	<i>1</i>			<i>Insert Float</i>	<i>1</i>				<i>171.00</i>	<i>171</i>	<i>171</i>
<i>27</i>	<i>815-9415</i>	<i>1</i>			<i>Flt</i>	<i>1</i>				<i>55.00</i>	<i>55</i>	<i>55</i>
<i>40</i>	<i>807-93059</i>	<i>1</i>			<i>Centralizers</i>	<i>2</i>				<i>72.00</i>	<i>144</i>	<i>144</i>
<i>350</i>		<i>1</i>			<i>Hydro uddl A</i>	<i>1</i>	<i>lbs</i>			<i>14.50</i>	<i>14</i>	<i>14</i>

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 Phil Reed

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 _____

TREE CONNECTION _____ TYPE VALVE _____

SURVEY: AGREE UN-DECIDED DIS-AGREE

OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?

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? YES NO

CUSTOMER DID NOT WISH TO RESPOND

PAGE TOTAL

FROM CONTINUATION PAGE(S) *10238 08*

SUB-TOTAL APPLICABLE TAXES WILL BE ADDED ON INVOICE

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) *X Phil Reed* HALLIBURTON OPERATOR/ENGINEER *DG Lee* EMP # *59179* HALLIBURTON APPROVAL

JOB LOG FORM 2013 R-3

CUSTOMER Home Data	WELL NO. B-3	LEASE USA	JOB TYPE 8 7/8 Surface	TICKET NO. 507673
------------------------------	------------------------	---------------------	----------------------------------	-----------------------------

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS T C	PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
					TUBING	CASING	
	2100						Time out of hole
	2140	21400					Time Ready
	0030						Time out of hole
							Start Pump Casing
	0505						Casing in hole
	0506						Hook up to Casedote
	0513						Circulate Casing w/leg Pump
	0515						Decelote Mud to Ground level
	0520						Hook up to Pump Truck
	0528						Start Mixing Cement
	0550		219.06				Start Tap Cement
	0555		35.26				Finish Mixing Cement
	0556						Set Down Drop Plug
	0557						Start Drop
	5	116.72					Loss Pump Lines
	0620						600/1100 P _g Down Float Addit Mud
							Circulate Cement to the PIT

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STATE CORPORATION COMMISSION

DEC 01 1993

CONSERVATION DIVISION
Wichita, Kansas

CUSTOMER

WELL DATA

ORIGINAL

FIELD _____ SEC. 14 TWP. 26 RING. 35W COUNTY LeRoy STATE K

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		214	8 3/8	K13	1873	03
LINER						
TUBING						
OPEN HOLE				6-L	1872	SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

JOB DATA

CALLED OUT		ON LOCATION		JOB STARTED		JOB COMPLETED	
DATE	9-18	DATE	9-19	DATE		DATE	
TIME	2100	TIME	0030	TIME	0505	TIME	0620

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
Down	4005	Lisbon, KS
D. Preece	59179	
State	B7106	7848
M. Hove	E0568	6612 Hesperia, KS
	F73113	3626/7420

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
ROCKET MOTOR		
TRIP HOOK	1	
GUIDE SHOE	1	
CENTRALIZERS	2	
BOTTOM PLUG		
TOP PLUG	1	
HEAD	1	
PACKER		
OTHER	1413	

MATERIALS

TREAT. FLUID _____ DENSITY _____ LB./GAL. °API
 DISPL. FLUID _____ DENSITY _____ LB./GAL. °API
 PROP. TYPE _____ SIZE _____ LB.
 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. _____
 PERFFAC BALLS TYPE _____ QTY. _____
 OTHER _____
 OTHER _____

DEPARTMENT _____
 DESCRIPTION OF JOB Cement 8 3/8 Surface

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

CUSTOMER REPRESENTATIVE X Bluff

HALLIBURTON OPERATOR Down COPIES REQUESTED _____

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
	600	Prem Plus	JUST	296CL	1/4# Floe	2.05	12.3
	150	Prem Plus		26CL	1/4# Floe	1.32	14.8

PRESSURES IN PSI

SUMMARY

VOLUMES

CIRCULATING _____ DISPLACEMENT _____ PRESLUSH: BBL.-GAL. _____ TYPE _____
 BREAKDOWN _____ MAXIMUM _____ LOAD & BKDN: BBL.-GAL. _____ PAD: BBL.-GAL. _____
 AVERAGE _____ FRACTURE GRADIENT _____ TREATMENT: BBL.-GAL. _____ DISPL: BBL.-GAL. 116.72
 SHUT-IN: INSTANT _____ 5-MIN. _____ 15-MIN. _____ CEMENT SLURRY: BBL.-GAL. 254.32
 HYDRAULIC HORSEPOWER _____ TOTAL VOLUME: BBL.-GAL. _____

ORDERED _____ AVAILABLE _____ USED _____
 AVERAGE RATES IN BPM _____

REMARKS

TREATING _____ DISPL. _____ OVERALL _____
 CEMENT LEFT IN PIPE _____

FEET 4057 REASON Shut in

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DEC 01 1993

WELL DATA
FIELD **SEC 14 TWP 20** COUNTY **Kansas** STATE **Ks**

FORMATION NAME **ORIGINAL**
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		153	5 1/2	KR	4246	
LINER						
TUBING						
OPEN HOLE			7 1/2		14250	SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
Float Collar 5 1/2	1	Huaco
Float Shoe 5 1/2	1	
GUIDE SHOE P-R	1	
CENTRALIZERS	5	
BOTTOM PLUG		
TOP PLUG	1	
HEAD	1	
PACKER		
OTHER Huaco w/d A	1 LB	

JOB DATA

CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE 9-22	DATE 9-22	DATE 9-22	DATE 9-22
TIME 0300	TIME 0545	TIME 1315	TIME 1500

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
D. Davis	40075	Liswell Ks
D. Reese	6903	"
J. Martin	50866	Hg Ten Ks
J. D. ...	52877	"

MATERIALS

TREAT. FLUID DENSITY LB/GAL. API
DISPL. FLUID DENSITY LB/GAL. API
PROP. TYPE SIZE LB.
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.

DEPARTMENT **CEMENT**
DESCRIPTION OF JOB **5K-POOL ST.**
JOB DONE THRU: TUBING CASING ANNULUS TBG/ANN.
CUSTOMER REPRESENTATIVE **X** *and P. ...*
HALLIBURTON OPERATOR **D. ...**
COPIES REQUESTED

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK BACKED	ADDITIONS	YIELD CU.FT./SK.	MIXED LBS./GAL.
	300	12 1/2	KTUT		10% SALT	2.65	12.3
	125	50/50 BR	C			1.36	11.0

PRESSURES IN PSI

CIRCULATING DISPLACEMENT
BREAKDOWN MAXIMUM
AVERAGE FRACTURE GRADIENT
SHUT-IN: INSTANT 5-MIN 15-MIN.
HYDRAULIC HORSEPOWER
ORDERED AVAILABLE USED
AVERAGE RATES IN BPM
TREATING DISPL. OVERALL
CEMENT LEFT IN PIPE
FEET **44** REASON **Stop lost**

SUMMARY

FRESH: BBL-GAL TYPE
LOAD & BKDN: BBL-GAL PAD: BBL-GAL
TREATMENT: BBL-GAL DISPL: BBL-GAL **100.0**
CEMENT SLURRY: BBL-GAL **139.30**
TOTAL VOLUME: BBL-GAL
STATE CORPORATION COMMISSION
RECEIVED
RAMARKS
DEC 01 1993
CONSERVATION DIVISION
Wichita, Kansas

JOB LOG FORM 2013 R-4

CUSTOMER		WELL NO.	LEASE	JOB TYPE	TICKET NO.		
H-P		R-3	USA	5/12/93	549027		
CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS T C	PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
					TUBING	CASING	
	0740						Time Called
	1000						Time Ready
	0845						Time on site
							P. Cement 1160
	1100						Start Pump Casing
							Casing in hole
							Hoop to Chocolate Co.
							Chocolate Casing w/ 2 Pumps
							Chocolate MUD to Ground Level
							Hoop to Pump Truck
	1346	5	500 ^{SD}		270		Start Mud Pump MUD
	1348	5			250		Start MUD Cement
	1408		109.53		300		Start Mud Cement
	1414		30.27		250		Final MUD Cement
	1415		139.50		250		Start Pump
							Depth
	1418	5			50		Start Disp
			100 ^{SD}				50 ^{SD} See Rate Due To 2 ^{SD}
	1500	2.3 ^{SD}			700 / 1100		P. Dues Pump 100 ^{PSI} Over 2 to Test
							Chocolate Fluid Through Jaws
							Thanks For Call
							Halliburton Energy Services

RECEIVED STATE CORPORATION COMMISSION
 DEC 01 1993
 CONSERVATION DIVISION
 Wichita Kansas



CHARGE TO: H-10
 ADDRESS: _____
 CITY, STATE, ZIP CODE: _____

COPY

TICKET

No. **549027-6**

PAGE 1 OF 2

FORM 1906 R-12

1. SERVICE LOCATIONS <u>25540</u>	WELL/PROJECT NO. <u>B-3</u>	LEASE <u>USA</u>	COUNTY/PARISH <u>Keamy</u>	STATE <u>LA</u>	CITY/OFFSHORE LOCATION	DATE <u>9-27-93</u>	OWNER <u>H-10</u>
2. TICKET TYPE <input type="checkbox"/> SERVICE <input type="checkbox"/> SALES	NITROGEN JOB? <input type="checkbox"/> YES <input type="checkbox"/> NO	CONTRACTOR	RIG NAME/NO. <u>Agri 3</u>	SHIPPED VIA	DELIVERED TO <u>loc</u>	ORDER NO.	
3. WELL TYPE	WELL CATEGORY	JOB PURPOSE <u>CRC 5K Prod Stg</u>	WELL PERMIT NO.	WELL LOCATION <u>Sgt D. Field</u>			
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS <u>0203</u>						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF								
<u>00-117</u>		<u>1</u>				<u>MILEAGE</u>	<u>50</u>	<u>mi</u>			<u>2.75</u>	<u>137.50</u>
<u>001-016</u>		<u>1</u>				<u>Purchase</u>	<u>14250</u>	<u>FR</u>				<u>1620.00</u>
<u>030-016</u>		<u>1</u>				<u>5000</u>	<u>1</u>	<u>EA</u>	<u>5K</u>		<u>60.00</u>	<u>60.00</u>
<u>12A</u>	<u>825-205</u>	<u>1</u>				<u>Circle Shim</u>	<u>1</u>	<u>EA</u>	<u>5K</u>		<u>121.00</u>	<u>121.00</u>
<u>24A</u>	<u>SL-423</u>	<u>1</u>				<u>Truss Plant</u>	<u>1</u>	<u>EA</u>			<u>110.00</u>	<u>110.00</u>
<u>27</u>	<u>315-19311</u>	<u>1</u>				<u>Ellip</u>	<u>1</u>	<u>EA</u>			<u>55.00</u>	<u>55.00</u>
<u>40</u>	<u>917-9322</u>	<u>1</u>				<u>Control Lines</u>	<u>5</u>	<u>EA</u>			<u>44.00</u>	<u>220.00</u>
<u>350</u>	<u>540-10202</u>	<u>1</u>				<u>House w/ld. A</u>	<u>1</u>	<u>EA</u>			<u>14.50</u>	<u>14.50</u>
<u>018-315</u>		<u>1</u>				<u>Whet. Flsh</u>	<u>500</u>	<u>31L</u>			<u>65.00</u>	<u>325.00</u>

ORIGINAL

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 <u>X</u> <u>[Signature]</u> DATE SIGNED <u>DEC 01 1993</u> TIME SIGNED <u>AM</u> <input type="checkbox"/> A.M. <input type="checkbox"/> P.M. <input checked="" type="checkbox"/> do not require IPC (Instrument Protection). <input type="checkbox"/> Not offered	SUB SURFACE SAFETY VALVE WAS: <input type="checkbox"/> PULLED & RETURN <input type="checkbox"/> PULLED <input type="checkbox"/> RUN	SURVEY AGREE <input type="checkbox"/> UN-DECIDED <input type="checkbox"/> DIS-AGREE <input type="checkbox"/> OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN? 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 <input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND	PAGE TOTAL <u>7013.00</u> FROM CONTINUATION PAGE(S) <u>4821.11</u> SUB-TOTAL APPLICABLE TAXES WILL BE ADDED ON INVOICE	
	TYPE LOCK _____ DEPTH _____ BEAN SIZE _____ SPACERS _____ TYPE OF EQUALIZING SUB. _____ CASING PRESSURE _____ TUBING SIZE _____ TUBING PRESSURE _____ WELL DEPTH _____ TREE CONNECTION _____ TYPE VALVE _____			

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) <u>X [Signature]</u>	HALLIBURTON OPERATOR/ENGINEER <u>[Signature]</u>	EMP # <u>59179</u>	HALLIBURTON APPROVAL
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