

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

Operator: License # 5330

Name: Excalibur Production Co., Inc.

Address P.O. Box 278

City/State/Zip McPherson KS 67460

Purchaser: NCRA

Operator Contact Person: Charles D. Johnson

Phone (316) 241-1265

Contractor: Name: Glaves Drilling Co.

License: 30864

Wellsite Geologist: James C. Hess

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/Re-Entry: 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. _____

12/7/95 12/15/95 1/2/96

Spud Date 12/7/95 Date Reached TD 12/15/95 Completion Date 1/2/96

API NO. 15- 155-213680000

ORIGINAL

County RENO

S/2 S/2 NW/4- Sec. 36 Twp. 23 Rge. 4W

2310 Feet from N (circle one) Line of Section

1320 Feet from W (circle one) Line of Section

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

Lease Name Eshelman Well # 1

Field Name Burton

Producing Formation Mississippian

Elevation: Ground 1462 KB 1467

Total Depth 3339 PBTD _____

Amount of Surface Pipe Set and Cemented at 606 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 cmt.

Drilling Fluid Management Plan alt I h 6-4-96
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid Volume _____ bbl's

Dewatering method used _____

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 Charles D. Johnson

Title President Date 2/22/96

Subscribed and sworn to before me this 22nd day of February, 19 96.

Notary Public Juanita M. Flood

Date Commission Expires 5/27/96

2-21-96

K.C.C. OFFICE USE ONLY

F Letter of Confidentiality Attached

C Wireline Log Received

C Geologist Report Received

Distribution

KCC SWD/Rep NGPA

KGS Plug Other

(Specify)

JUANITA M. FLOOD
State of Kansas
NOTARY PUBLIC
My Appt. Exp. 5/27/96

SIDE TWO

Operator Name Excalibur Production Co., Inc. Lease Name Eshelman Well # 1

Sec. 36 Twp. 23 Rge. 4
 East
 West

County Reno

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests given 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 sheets 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 Datum	<input checked="" type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Lansing	2551	-1084
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Mississippian	3273	-1806
List All E.Logs Run:		Osage	3373	-1856

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
Conductor	17"	13 3/8	60	277	common	180	
Surface	11"	8 5/8	24	606	common	242	
Production	7 7/8"	5 1/2"	15	3332-3336	40-60poz	100	

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

TUBING RECORD	Size <u>2 7/8"</u>	Set At <u>3335</u>	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj.	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil <u>10</u> Bbls.	Gas	Mcf	Water <u>60</u> Bbls. Gas-Oil Ratio Gravity

Disposition of Gas:	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input checked="" type="checkbox"/> Used on Lease	<input checked="" type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Cemented	
(If vented, submit NCC-133)	<input type="checkbox"/> Other (Specify)	



CHARGE TO: Excaliber
 ADDRESS: _____
 CITY, STATE, ZIP CODE: KANSAS CORP COMM

ORIGINAL

TICKET

No. 906918 - 1

PAGE 1 OF 3

HAL-1906-N

1. SERVICE LOCATIONS <u>Pratt KS</u>	WELL/PROJECT NO. <u>#1</u>	LEASE <u>1970 JUN -4</u>	COUNTY/PARISH <u>RENO</u>	STATE <u>KS</u>	CITY/OFFSHORE LOCATION	DATE <u>12.8.95</u>	OWNER <u>same</u>
2. TICKET TYPE <input checked="" type="checkbox"/> SERVICE	NITROGEN JOB? <input type="checkbox"/> YES	CONTRACTOR <u>Glave's</u>	RIG NAME/NO.	SHIPPED VIA <u>Loc</u>	DELIVERED TO <u>Loc</u>	ORDER NO.	
3. <input type="checkbox"/> SALES	<input checked="" type="checkbox"/> -NO	WELL TYPE <u>01</u>	WELL CATEGORY <u>01</u>	JOB PURPOSE <u>conductor</u>	WELL PERMIT NO.	WELL LOCATION <u>land</u>	
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS <u>API # 15156213680003</u>						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE		AMOUNT
		LOC	ACCT	DF								
000.117		1			MILEAGE RD TP 50120 th	140	mi	1		2.85		399 L
001.016		1			Pump Charge 1 Trk	277	ft	6	hrs	5.85	-	585 -
030.503		1			Top wooden Plug	1	ea	13	3/8	1.60	-	160 -
001.018		1			Additional Hr's	1	Trk	4	hrs	235	-	940 -
019.200		1			1" Tbg Top Outside	40	ft	1		60	00	N/C
001.018		1			Additional Hr's	1	Trk	3	hrs	705	00	N/C
					Bulk TK # 325505							1502 87

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.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X Dennis D. Borelly
 DATE SIGNED: 12.8.95 TIME SIGNED: 0700
 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?	<input type="checkbox"/> YES <input type="checkbox"/> NO		
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND			

PAGE TOTAL	
FROM CONTINUATION PAGE(S)	
Bulk TK	
TK #	2902 96
SUB-TOTAL	
APPLICABLE TAXES WILL BE ADDED ON INVOICE	65091 83

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>Dennis D. Borelly</u>	CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE) <u>X Dennis D. Borelly</u>	HALLIBURTON OPERATOR/ENGINEER <u>David L. Scott</u>	EMP # <u>B9475</u>	HALLIBURTON APPROVAL <u>D.L. Scott</u>
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HALLIBURTON

TICKET CONTINUATION

ORIGINAL

TICKET No. 906918

HALLIBURTON ENERGY SERVICES

FORM 1911 R-10

CUSTOMER EXCALIBUR	WELL ECHELMAN #1	DATE 12-07-95	PAGE 2	OF 2
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PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT	
		LOC	ACCT	DF								
504-280		1			MIDCON-2 STD	125	sks			11.72	1,465	00
509-406	890.50812	1			CHALCIUM CHLORIDE BLENDED 3%	4	sks			36.75	147	00
LOADED ON TRK. #4413-FRONT												
504-308	516.00261	1			STANDARD CEMENT	50	sks			8.86	443	00
509-406	890.50812	1			CALCIUM CHLORIDE BLENDED 3%	1	sks			36.75	36	75
LOADED ON TRK. #4413-BACK												
500-207		1			SERVICE CHARGE	CUBIC FEET		191		1.35	257	85
500-306		1			MILEAGE CHARGE	TOTAL WEIGHT	LOADED MILES	TON MILES		95	573	36
						17,245	70	603.540				

No. B 325504

CONTINUATION TOTAL 2922.96



HALLIBURTON ENERGY SERVICES

TICKET CONTINUATION

conductor
FIELD COPY

TICKET No. 906918

CUSTOMER	WELL	DATE	PAGE	OF
EXCALIBUR	ECHELMAN #1	12-07-95	2	2

FORM 1911 R-10

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT	
		LOC	ACCT	DF								
504-280		1			MIDCON-2 STD	125	sks			11.72	1,465	00
509-406	890.50812	1			CHALCIUM CHLORIDE BLENDED 3%	4	sks			36.75	147	00
LOADED ON TRK. #4413-FRONT												
504-308	516.00261	1			STANDARD CEMENT	50	sks			8.86	443	00
509-406	890.50812	1			CALCIUM CHLORIDE BLENDED 3%	1	sks			36.75	36	75
LOADED ON TRK. #4413-BACK												
500-207		1			SERVICE CHARGE	CUBIC FEET		191		1.35	275	85
500-306		1			MILEAGE CHARGE	TOTAL WEIGHT	LOADED MILES	TON MILES		95	573	36
						17,245	70	603.540				

No. B 325504

CONTINUATION TOTAL	2940.96
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JOB SUMMARY

HALLIBURTON DIVISION
HALLIBURTON LOCATION

Mid Cont
Pratt KS

BILLED ON TICKET NO. 906918

WELL DATA

FIELD _____ SEC 36 TWP. 23 RNG. 4 COUNTY Reno 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 _____

	NEW USED	WEIGHT	SIZE	FROM	TO	MAXIMUM PSI ALLOWABLE
CASING	<input checked="" type="checkbox"/>	40	13 3/8	KTS	277	
LINER						
TUBING						
OPEN HOLE			17 1/2	277	278	SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

JOB DATA

CALLER OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE 12.7 TIME 9100	DATE 12.7 TIME 2330	DATE 12.8 TIME 0917	DATE 12.8 TIME 1545

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
D Scott B9475	40042 P14	Pratt KS
C Nixon H1660	50120 Comb	" "
B Johnson G9726	4413 Bulk	" "

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
FLOAT COLLAR		
FLOAT SHOE		
GUIDE SHOE		
CENTRALIZERS		
BOTTOM PLUG		
TOP PLUG <u>Wooden</u>	<u>1</u>	<u>Howe</u>
HEAD <u>manifold</u>	<u>1 ea</u>	<u>Howe</u>
PACKER		
OTHER		

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 _____

DEPARTMENT Cmt

DESCRIPTION OF JOB 13 3/8 Surface

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

CUSTOMER REPRESENTATIVE X Kevin D. [Signature]

HALLIBURTON OPERATOR D Scott COPIES REQUESTED _____

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
Lead	125	Mid Cont-2	Std		3% CC	2.93	11.4
Tail	50		Std		3% CC	1.15	15.8
1"	100	Standard			2% 3% CC	1.15	15.8

PRESSURES IN PSI

SUMMARY

VOLUMES

CIRCULATING _____ DISPLACEMENT _____ PRESLUSH: BBL.-GAL. 5 TYPE H2O

BREAKDOWN _____ MAXIMUM _____ LOAD & BKDN: BBL.-GAL. _____ PAD: BBL.-GAL. 41.1

AVERAGE _____ FRACTURE GRADIENT _____ TREATMENT: BBL.-GAL. _____ DISPL: BBL.-GAL. 30.4

SHUT-IN: INSTANT _____ 5-MIN _____ 15-MIN. _____ CEMENT SLURRY: BBL.-GAL. 64.5 + 10.5 = 75 @ 20.5

HYDRAULIC HORSEPOWER _____ TOTAL VOLUME: BBL.-GAL. _____

ORDERED _____ AVAILABLE _____ USED _____ AVERAGE RATES IN BPM _____

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

FEET 15 REASON Requested

REMARKS

see Job Log

FIELD OFFICE

CUSTOMER: Halliburton
LEASE: Echelman
WELL NO.: H
JOB TYPE: 13 3/8 Surface
DATE: 12.8.95

JOB LOG HAL-2013-C

CUSTOMER		WELL NO.		LEASE		JOB TYPE		TICKET NO.	
Excaliber		#1		Echelman		1378 Surface		906918	
CHART NO.	TIME	RATE (BPM)	VOLUME (BBL)(GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS	
				T	C	TUBING	CASING		
	2100								Called Out
	2330								On Loc w/Trk's Safety mtg
									Break Cir w/Rig
									Rig up Howco
	0922	5	5		✓	200			Pump H ₂ O Flush
	0924	5			✓	200			St mixing Lead Cmt @ 11.4ppg
	0935	6	64.5		✓	150			St mixing Tail Cmt @ 15.6ppg
	0940	-0-	75		✓	-0-			Finish mixing Cmt
	0941	5			✓	100			Release Plug st Disp w/H ₂ O
	0952	-0-	41		✓	175			Plug Down - Close In
									Jet cellar - No Cmt Return's
									Good mud Circulation During Job
									T.O.C @ 40' Down
	1030								Order 100sk's Standard 29.6el 3%CC
	1345								1" Cmt on Loc
									Run In 40' lin Tbg
	1500	1			✓	50			St mixing Cmt
	1545	-0-	21			150			Finish mixing Cmt
									Trace's Cmt In Pit
									Pumped Total 275sk's Cmt
									Job Complete
									Thank you
									D. Scott
									C. Nixon
									B. Johnson



HALLIBURTON ENERGY SERVICES

HAL-1906-N

CHARGE TO: *EXCALIBUR PRODUCTION Co INC.*
 ADDRESS: *P.O. Box 278*
 CITY, STATE, ZIP CODE: *McPHERSON KS. 67460*

DUNCAN COPY

TICKET

No.

906836 - 7

RECEIVED
KANSAS CORP COMM

PAGE 1 OF 2

SERVICE LOCATIONS 1. <i>PLAT 15.</i>	WELL/PROJECT NO. <i>1</i>	LEASE <i>ESTELMAN</i>	COUNTY/PARISH <i>RENO</i>	STATE <i>KS</i>	CITY/OFFSHORE LOCATION <i>A 10: 23</i>	DATE <i>12-9-95</i>	OWNER <i>JAME</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 <i>GLADE'S DRILL</i>	RIG NAME/NO.	SHIPPED VIA <i>P.T.</i>	DELIVERED TO <i>WELL SITE</i>	ORDER NO.
3.	WELL TYPE <i>01</i>	WELL CATEGORY <i>01</i>	JOB PURPOSE <i>010 Surface</i>	WELL PERMIT NO. <i>AP115 155 213680006</i>	WELL LOCATION <i>36-23S.-4W.</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>			<i>MILEAGE Reported TRK # 5-2504</i>	<i>140</i>	<i>MI.</i>			<i>280</i>	<i>399.00</i>
<i>001-016</i>		<i>1</i>			<i>Pump 010066</i>	<i>6</i>	<i>HP</i>	<i>2006</i>	<i>ft.</i>	<i>890.00</i>	<i>890.00</i>
<i>630-503</i>		<i>1</i>			<i>8 3/4" PLUG</i>	<i>1</i>	<i>EA.</i>			<i>95.00</i>	<i>95.00</i>
<i>320</i>	<i>806.70060</i>	<i>1</i>			<i>CEMENT BASKET 8 3/4"</i>	<i>1</i>	<i>EA.</i>			<i>144.00</i>	<i>144.00</i>
<i>597</i>	<i>825.1269</i>	<i>1</i>			<i>RANGE PLATE 8 3/4"</i>	<i>1</i>	<i>EA.</i>			<i>50.00</i>	<i>50.00</i>

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MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

SUB SURFACE SAFETY VALVE WAS: <input type="checkbox"/> PULLED & RETURN <input type="checkbox"/> PULLED <input type="checkbox"/> 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? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND			PAGE TOTAL <i>1578.00</i>
	FROM CONTINUATION PAGE(S) <i>3843.93</i>			
	SUB-TOTAL APPLICABLE TAXES WILL BE ADDED ON INVOICE <i>5421.93</i>			
	<input type="checkbox"/> do <input type="checkbox"/> do not require IPC (Instrument Protection). <input type="checkbox"/> Not offered			

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)	CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE)	HALLIBURTON OPERATOR/ENGINEER	EMP #	HALLIBURTON APPROVAL
	<i>X Dennis D Gordley</i>	<i>M.R. Johnson</i>	<i>50848</i>	<i>m.R.B.</i>

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.



JOB SUMMARY

HALLIBURTON DIVISION MID CONTINENT
 HALLIBURTON LOCATION PRAT 15

BILLED ON TICKET NO. 906836

WELL DATA

FIELD _____ SEC. 36 TWP. 23S RNG. 4W COUNTY. REID 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 _____

	NEW USED	WEIGHT	SIZE	FROM	TO	MAXIMUM PSI ALLOWABLE
CASING		28	8 7/8	0	606	
LINER			13 7/8	1.3	250	
TUBING						
OPEN HOLE				250	607	SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

JOB DATA

CALLLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE <u>12-9</u>	DATE <u>12-9</u>	DATE <u>12-9</u>	DATE <u>12-9</u>
TIME <u>12:00</u>	TIME <u>16:20</u>	TIME <u>17:20</u>	TIME <u>20:30</u>

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
FLOAT COLLAR <u>Baffle</u>	<u>1</u>	<u>HCS</u>
FLOAT SHOE		
GUIDE SHOE		
CENTRALIZERS		
BOTTOM PLUG		
TOP PLUG	<u>1</u>	<u>HCS</u>
HEAD <u>PC</u>	<u>1</u>	<u>HCS</u>
PACKER		
OTHER <u>1st Baffle</u>	<u>1</u>	<u>HCS</u>

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
<u>M. Blum</u>	<u>38413</u>	<u>PRAT 15</u>
<u>J. Seba</u>	<u>52804</u>	<u>PRAT 15</u>
<u>M. Stevens</u>	<u>415-7888</u>	<u>PRAT 15</u>

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. _____
 OTHER _____
 OTHER _____

DEPARTMENT 12-9-95
 DESCRIPTION OF JOB Cont 8 7/8 SURT 056
 JOB DONE THRU: TUBING CASING ANNULUS TBG./ANN.

CUSTOMER REPRESENTATIVE **X**
 HALLIBURTON OPERATOR M. Blum COPIES REQUESTED _____

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
	<u>135</u>	<u>MID CONT II</u>		<u>3 7/8</u>		<u>2.85</u>	<u>11.4</u>
	<u>110</u>	<u>STD.</u>		<u>3 7/8</u>		<u>1.18</u>	<u>10.6</u>

PRESSURES IN PSI

SUMMARY

VOLUMES

CIRCULATING _____ DISPLACEMENT _____ PRES LUSH: BBL.-GAL. _____ TYPE _____
 BREAKDOWN _____ MAXIMUM _____ LOAD & BKDN: BBL.-GAL. _____ PAD: BBL.-GAL. _____
 AVERAGE _____ FRACTURE GRADIENT _____ TREATMENT: BBL.-GAL. _____ DISPL. BBL.-GAL. 35.82
 SHUT-IN: INSTANT _____ 5-MIN. _____ 15-MIN. _____ CEMENT SLURRY: BBL.-GAL. 74.75 + 21.02 = 95.77
 HYDRAULIC HORSEPOWER _____ TOTAL VOLUME: BBL.-GAL. _____
 ORDERED _____ AVAILABLE _____ USED _____ AVERAGE RATES IN BPM _____
 TREATING _____ DISPL. _____ OVERALL _____
 FEET 32 REASON Baffle 2.476 CEMENT LEFT IN PIPE _____
 REMARKS 13 7/8 PVC C 230'
MIXED 100 SACKS STD FOR PIPE JOBS
1" WITH APC SOCKS UNDER IT

FIELD OFFICE

CUSTOMER ESSEX PRODUCTION CO INC LEASE ESSEX #1000 WELL NO. 1 JOB TYPE Production DATE 12-9-95



JOB LOG HAL-2013-C

CUSTOMER EXPLOR. RISK. AREA No. 016	WELL NO.	LEASE L. S. H. E. AREA	JOB TYPE Production	TICKET NO. 201836
--	----------	---------------------------	------------------------	----------------------

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	12:00							CALLER OUT
	16:20							NO PRODUCTION RIG JUST STARTED 1st.
								Hook up to pipe NO PROD
								JUST REP DECIDED TO RMT Hook up to TRK.
	17:20		0			0	100	mix of pump mixes STD. (ESTAB. RETURNS @ 12.3 & 12.4 mixed)
	17:25		21.01				250	FINISH MIX RELEASE PLUG
	17:27	6	0				150	START PROD
	17:31	2.5					150	SLOW RATE
	17:38	1.8	35.8				300	PLUG DOWN START 1st KICK LOSS TO RIG 1" (CALL TRK.) Hook up 1" 30' 1"
	18:33	1.34	0			150	100	START 1st & Pump 2nd
	18:37	1	5			300	100	MIX @ 7 BBL @ 12.4
	18:53		15			350	100	START DOWN (8 BBL @ 12.3)
	18:54		5			400	100	2. pump (15 BBL @ 13.4)
	19:07		30					START DOWN 30 BBL GOOD PROD RETURNS RIG 1" 1" WASH UP TRK. WASH OUT 1" ON WALL Rack up 503 BBL
	20:30							190 TOTAL BBL



HALLIBURTON ENERGY SERVICES

HAL-1906-N

SERVICE LOCATIONS

CHARGE TO: **EXCALIBUR**
 ADDRESS: **Box 278**
 CITY, STATE, ZIP CODE: **Mc PHERSON, KANSAS 67060**

CUSTOMER COPY

TICKET

No.

906878 - 5

PAGE 1 OF 2

1. SERVICE LOCATIONS: **WHI/KS 25555** WELL/PROJECT NO.: **#1** LEASE: **ECHELMHN** COUNTY/PARISH: **1005** STATE: **KS** CITY/OFFSHORE LOCATION: **KS** DATE: **12-15-95** OWNER: **SMIE**

2. TICKET TYPE: SERVICE SALES NITROGEN JOB? YES NO CONTRACTOR: **GLAVES DRLLC.** RIG NAME/NO.: **REWR 10:22** SHIPPED VIA: **C.T.** DELIVERED TO: **WELL SITE** ORDER NO.:

3. WELL TYPE: **01** WELL CATEGORY: **01** JOB PURPOSE: **035 CHIT. PROD. CSG.** WELL PERMIT NO.: WELL LOCATION: **LAWD 36-235-4w**

4. REFERRAL LOCATION: INVOICE INSTRUCTIONS: **API # 15156213680000**

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT.	DF							
000-117		1			MILEAGE 1 UNIT K.T.	140	miles			285	399.00
001-016		1			PUMP CHARGE	6 hrs.	3332 ft.			1500.00	1500.00
030-016		1			TOP PLUG SW ALUM.	1 EA	5 1/2 in.			60.00	60.00

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.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

DATE SIGNED: **12-15-95** TIME SIGNED: **2359** A.M. P.M.

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

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: **1959.00**
FROM CONTINUATION PAGE(S): **1296.01**
SUB-TOTAL APPLICABLE TAXES WILL BE ADDED ON INVOICE: **3255.01**

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): **Devin D. Gandy** CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE): **X Devin D. Gandy** HALLIBURTON OPERATOR/ENGINEER: **KEVIN P. COOPER 08500** EMP #: HALLIBURTON APPROVAL: **Kevin P. Gandy**

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.

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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.

CUSTOMER
EXHIBIT
LEASE
WELL NO.
JOB TYPE
DATE

WELL DATA
FIELD _____ SEC. *36* TWP. *23S* RING. *4W* COUNTY. *REWO* 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 _____

	NEW USED	WEIGHT	SIZE	FROM	TO	MAXIMUM PSI ALLOWABLE
CASING		<i>14155</i>	<i>5 1/2</i>	<i>0</i>	<i>3332</i>	
LINER						
TUBING						
OPEN HOLE				<i>3332</i>	<i>3336</i>	SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

JOB DATA

CALLLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE <i>12-15</i> TIME <i>1900</i>	DATE <i>12-15</i> TIME <i>2120</i>	DATE <i>12-15</i> TIME <i>2300</i>	DATE <i>12-16</i> TIME <i>0100</i>

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
FLOAT COLLAR <i>INSERT FLOAT</i>	<i>1</i>	<i>COMP.</i>
FLOAT SHOE		
GUIDE SHOE	<i>1</i>	<i>COMP.</i>
CENTRALIZERS	<i>3</i>	<i>COMP.</i>
BOTTOM PLUG		
TOP PLUG <i>5W ALUM</i>	<i>1</i>	<i>HOWCO</i>
HEAD <i>1 MANIFOLD</i>	<i>1</i>	<i>HOWCO</i>
PACKER		
OTHER		

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
<i>K. GORDLEY</i> <i>C 8500</i>	<i>40033</i> <i>P.U.</i>	<i>PRATT, KS.</i>
<i>C. BAKER</i> <i>C 9447</i>	<i>51936</i> <i>PUMP TRK</i>	<i>"</i>
<i>M. BARBER</i> <i>B 8476</i>	<i>4413</i> <i>PULL TRK.</i>	<i>"</i>

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. _____
PERFFAC BALLS TYPE _____ QTY. _____

DEPARTMENT *CEMENT*
DESCRIPTION OF JOB
CEMENT 5 1/2 PROD. CSC.
JOB DONE THRU: TUBING CASING ANNULUS TBG./ANN.
CUSTOMER REPRESENTATIVE *X Dennis D Gordley*
HALLIBURTON OPERATOR *K. GORDLEY* COPIES REQUESTED _____

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
	<i>100</i>	<i>40-60 P02</i>		<i>B</i>	<i>2% GEL, 10% SALT</i>	<i>1.33</i>	<i>14.26</i>

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 *16* REASON *INSERT FLOAT*

SUMMARY

VOLUMES

PRESLUSH *20* BBL.-GAL. TYPE *SALT FLUSH*
LOAD & BKDN: BBL.-GAL. _____ PAD: BBL.-GAL. _____
TREATMENT: BBL.-GAL. _____ DISPL. BBL.-GAL. *81.1*
CEMENT SLURRY *23.6* BBL.-GAL.
TOTAL VOLUME: BBL.-GAL. _____

REMARKS

PUMP TIME = 24 MIN.
PUMP RAT HOLE WITH 361 CMT
TOTAL PIPE = 3342

JOB LOG HAL-2013-C

CUSTOMER	WELL NO.	LEASE	JOB TYPE	TICKET NO.
EXCALIBUR	#1	ECHELMAN	CMT. PROD. CSB.	906878

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
1	1900							(CALLED) OUT
	2120							ON LOCATION
								TD = 3336'
								5 1/2 CASING SET HT = 3332'
								TOTAL CASING RUN = 3342'
								SHOE TO JAW = 16'
								CASING ON BOTTOM
	1100							BREAK CIRCULATION WITH
								MUD PUMP
	1120							REG UP HOWEO TO CASING
	1123	6	20	-		300		PUMP 20 bbl SALT FLUSH
	1127	6	23	-		300		PUMP 3 bbl H ₂ O SPACER
	1129	6	0	-		300		START MIX CEMENT
	1133	6	20	-		200		FINISH MIX CEMENT
								SHUT DOWN
								WASH OUT LINES & RELEASE PLUG
	1136	7 1/2	0	-		200		START DISP.
	1145	7 1/2	65	-		400		LIFTING CEMENT
	1148	5	81.1	-		1000		PLUG DOWN
								RELEASE PSI - FLOAT HELD
	0030		3					PLUG RHT HOLE
								WASH UP - BACK UP
	0100							JOB COMPLETE
								THANKS : KEVIN
								PEDRICK
								MARK