

ORIGINAL

FORM MUST BE TYPED

SIDE ONE

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

Operator: License # 8996
Name: Mid-Continent Resources
P.O. Box 399
Address _____
City/State/Zip Garden City, KS. 67846

Purchaser: Northern Natural
Operator Contact Person: Kevin Wiles, Sr.
Phone (316) 275-2963

Contractor: Name: Cheyenne Drilling
License: 5382
Wellsite Geologist: Scott Corsair

Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD SOW
 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 PSTD
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____
8-24-95 8-27-95 10-17-95
Spud Date Date Reached TD Completion Date

API NO. 15- 055214360000
County Finney
SW Sec. 19 Twp. 24 Rge. 31 E/W

1250 Feet from SW (circle one) Line of Section
1250 Feet from E (circle one) Line of Section

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

Lease Name I.D. Well # 1-19
Field Name Hugoton

Producing Formation Krider
Elevation: Ground 2869 KB 2875

Total Depth 3000' PSTD 2939

Amount of Surface Pipe Set and Cemented at 1936 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 2998

Feet depth to surface w/ 225 sx cement

RECEIVED
STATE CORPORATION COMMISSION
NOV 27 1995

Drilling Fluid Management Plan ALT 1 09/ 7-3-96
Data must be collected from the Reserve Pit

Chloride content 454,000 ppm Fluid volume 200 bbls

Dewatering method used n/a

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]
Title Production Manager Date 11-24-95

Subscribed and sworn to before me this 24th day of NOVEMBER, 19 95.

Notary Public [Signature]
Date Commission Expires 8-13-96

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
Distribution
 KCC SWD/Rep NGA
 KGS Plug Other (Specify)

NOTARY PUBLIC - State of Kansas
SANDRA BROWN
My Appt. Exp. 8-13-96

SIDE TWO

Operator Name Mid-Continent Resources Lease Name I.D. Well # 1-19
 County: Finney
 Sec. 19 Twp. 24 Rge. 31 East 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.)

Name	Top	Datum
Herrington	2580	+295
Krider	2612	+263
Winfield	2670	+205
Towanda	2730	+145
Ft. Riley	2797	+ 78

List All E.Logs Run:
 Dual Spaced Neutron
 Dual Induction Laterlog
 Gamma Ray

CASING RECORD <input type="checkbox"/> New <input checked="" 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	12-1/4	8-5/8"	25#	1936	Midconl. 60/40poz	400 230	3% cc 2% gel
Production	7-7/8	4-1/2"	10/5#	2998	Halliburton Class A	100 125	HCL ₂ EA ₂

ADDITIONAL CEMENTING/SQUEEZE RECORD					
Purpose:	Depth		Type of Cement	#Sacks Used	Type and Percent Additives
	Top	Bottom			
<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 Plug Set/Type		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	
3	2642 - 2648		2000 gallons 28%	
3	2616 - 2630		MCA 40,000#	
			12/20 sand in crossliner gel	

TUBING RECORD Size 2-3/8" Set At 2670' Packer At _____ Liner Run Yes No

Date of First, Resumed Production, SVD or Inj. Shut in Producing Method Flowing Pumping Gas Lift Other (Explain)

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

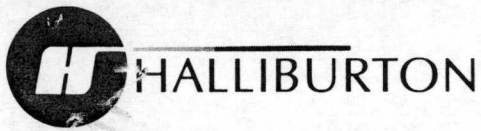
SHUT IN

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACD-18.)

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval: 2642-48
2616-30

SHUT IN



HALLIBURTON

HALLIBURTON ENERGY SERVICES

HAL-1906-N

CHARGE TO: *M. H. ...*
 ADDRESS: *...*
 CITY, STATE, ZIP CODE: *...*

CUSTOMER COPY

TICKET

No. **839832 - 4**

15-055-21436-0000

PAGE 1 OF 2

SERVICE LOCATIONS 1. <i>...</i>	WELL/PROJECT NO. <i>119</i>	LEASE <i>...</i>	COUNTY/PARISH <i>...</i>	STATE <i>...</i>	CITY/OFFSHORE LOCATION	DATE <i>...</i>	OWNER <i>...</i>
2.	TICKET TYPE <input type="checkbox"/> SERVICE <input type="checkbox"/> SALES	NITROGEN JOB? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	CONTRACTOR <i>...</i>	RIG NAME/NO. <i>...</i>	SHIPPED VIA <i>...</i>	DELIVERED TO <i>...</i>	ORDER NO.
3.	WELL TYPE <i>...</i>	WELL CATEGORY <i>01</i>	JOB PURPOSE <i>...</i>	WELL PERMIT NO.	WELL LOCATION <i>...</i>		
4.	REFERRAL LOCATION	INVOICE INSTRUCTIONS					

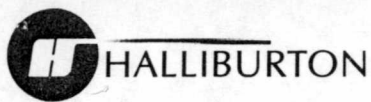
PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
000 117		1			MILEAGE - 11/5/99	2	mi	1		2.5	5.0
001 016		1			Pump Service	2999	hr	1		140	140
002 017		1			5 W Top Mfg	1	hr	4%		53.15	53
17A	825 201	1			Good SL	1	hr	4%		9	9
24A	513 1101	1			...	1	hr	4%		7	7
24	513 1101	1			...	1	hr	4%		45	45
40	509 1104	1			54 Overhaul	4	hr	4%		53.15	212
320	509 851	1			...	1	hr	4%		105.8	105
015 116		1			...	5	hr			45	225
314 103		1			...	2	hr			40	80

RECEIVED
 STATE CORPORATION COMMISSION
 NOV 27 1995
 CONSUMER RIGHTS DIVISION

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	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 FROM CONTINUATION PAGE(S) SUB-TOTAL APPLICABLE TAXES WILL BE ADDED ON INVOICE
	TYPE LOCK	DEPTH	OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?					
	BEAN SIZE	SPACERS	WE UNDERSTOOD AND MET YOUR NEEDS?					
	TYPE OF EQUALIZING SUB.	CASING PRESSURE	OUR SERVICE WAS PERFORMED WITHOUT DELAY?					
DATE SIGNED: <i>8-28-95</i> TIME SIGNED: <i>0100</i> <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M.		TUBING SIZE	TUBING PRESSURE	WELL DEPTH	WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY? <input type="checkbox"/> YES <input type="checkbox"/> NO			
<input type="checkbox"/> do <input type="checkbox"/> do not require IPC (Instrument Protection). <input type="checkbox"/> Not offered		TREE CONNECTION	TYPE VALVE		ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO			
				<input checked="" type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				7632.4

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) <i>Scott Corsi</i>	CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE) <i>Scott Corsi</i>	HALLIBURTON OPERATOR/ENGINEER <i>...</i>	EMP # <i>...</i>	HALLIBURTON APPROVAL
---	--	---	---------------------	----------------------



HALLIBURTON ENERGY SERVICES

TICKET CONTINUATION

CUSTOMER COPY

15-055-21436-0000

TICKET No. 57

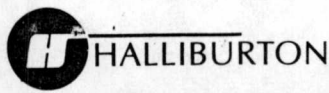
CUSTOMER: MID Continent Res. WELL: FPD 111 DATE: 2-24-95 PAGE 2 OF 2

FORM 1911 R-10

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
504-316		1			HLC	100				8.03	803.00
504-308		1			Shaded Cement	125				8.96	1120.00
507-210		1			Fine sand blend w/ HLC	56				1.65	92.40
508-127		1			Coarse blend w/ SH	6				25.10	150.60
509-968		1			Salt blend w/ SH	110				1.50	165.00
507-772		1			Hard 344 blend w/ SH	35				27.15	950.25
ORIGINAL											
RECEIVED STATE CORPORATION COMMISSION NOV 27 1995 CONSERVATION DIVISION WICHITA, KANSAS											
500-207		1			SERVICE CHARGE						
500-306		1									
						CUBIC FEET				1.35	341.25
						TON MILES				15	1058.25
						TOTAL WEIGHT					
						MILEAGE CHARGE					
						LOADED MILES					
						253					
						1114.05					

No. B 285393

CONTINUATION TOTAL
~~4672.75~~
 4673.40



JOB SUMMARY

HALLIBURTON DIVISION

Mid Continent

15-055-21436-0000

HALLIBURTON LOCATION

Hug, B.

BILLED ON TICKET NO.

839832

WELL DATA

FIELD _____ SEC. 19 TWP. 24^s RNG. 32^w COUNTY Finn 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 3,000

	NEW USED	WEIGHT	SIZE	FROM	TO	MAXIMUM PSI ALLOWABLE
CASING			4 1/2	RB	2998	
LINER						
TUBING						
OPEN HOLE						SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

ORIGINAL

JOB DATA

CALLLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE <u>8-27-93</u>	DATE <u>8-28-93</u>	DATE <u>8-28</u>	DATE <u>8-28</u>
TIME <u>1830</u>	TIME <u>2430</u>	TIME <u>0200</u>	TIME <u>0700</u>

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
FLOAT COLLAR <u>4 1/2"</u>	<u>1</u>	<u>HALLIBURTON</u>
FLOAT SHOE		
GUIDE SHOE <u>Reg</u>	<u>1</u>	<u>"</u>
CENTRALIZERS <u>3-4</u>	<u>4</u>	<u>"</u>
BOTTOM PLUG		
TOP PLUG <u>5-w</u>	<u>1</u>	<u>"</u>
HEAD		
PACKER		
OTHER <u>Cont. Bumper</u>	<u>1</u>	<u>"</u>

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
<u>R. Taylor</u>	<u>B0719</u>	<u>35422 Hug, B.</u>
<u>E. Reynolds</u>	<u>47558</u>	<u>51997 Rem "</u>
<u>C. Doherty</u>	<u>41659</u>	<u>7R2 7RL 4444 5070 "</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 _____

DEPARTMENT _____
 DESCRIPTION OF JOB _____
 JOB DONE THRU: TUBING CASING ANNULUS TBG/ANN.

CUSTOMER REPRESENTATIVE X Scott Corson
 HALLIBURTON OPERATOR Reg. B. Splet COPIES REQUESTED _____

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
	<u>100</u>	<u>HLC</u>		<u>B</u>	<u>1/4" Floeche</u>	<u>1.24</u>	<u>127</u>
	<u>150</u>	<u>EA2</u>		<u>B</u>	<u>3/16" Metal 322, 1/4" Floeche</u>	<u>1.30</u>	<u>155</u>

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 33.85 REASON Shut in

SUMMARY

VOLUMES

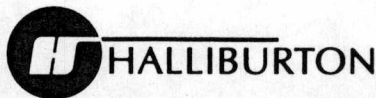
PRESLUSH: BBL-GAL 500 TYPE Multi-Phase - Self-Flowing
 LOAD & BKDN: BBL-GAL _____ PAD: BBL-GAL _____
 TREATMENT: BBL-GAL _____ DISPL: BBL-GAL 40.2
 CEMENT SLURRY: BBL-GAL 679
 TOTAL VOLUME: BBL-GAL _____

REMARKS

See Chart + Job Log
Thank You Reg

FIELD OFFICE

CUSTOMER: MidContinent Resources
 LEASE: I.P.D.
 WELL NO: 111
 JOB TYPE: H.A.S.



JOB LOG HAL-2013-C

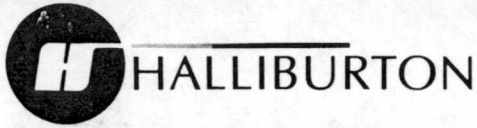
DATE: 8-28-95 PAGE NO.: 1

CUSTOMER: Midway Resources WELL NO.: 119 LEASE: T.P.O. JOB TYPE: Long Slurry TICKET NO.: 839832

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1630							Called out
	1730							On loc Rg logging
	0200							Start 4" Csg in hole
								Condo Show Tacti Float
								Cont on "1, "9, "14, "29
								Cont. Backit on "15
	0450							Drop Ball
	0455							Csg on Bottom Circulate
	0520	5	12					Pump 500 gal Mud Flush
	0525	5	20					Pump 20" C19F, water
	0530		327					Mix 100 gal HLC 12.7 #/gal
			30.2					Mix 125 gal EA2 15.5 #/gal
	0547							Wash pump + line
	0550		48					Release Plug + Drop 48" H ₂ O
	0600					1100		Plug down Holding 1100'
								Release Press Float hold
								Wash + Rack up track
	0700							Job Comp H ₂ O

ORIGINAL

Thank You
Rg



HALLIBURTON ENERGY SERVICES

HAL-1906-N

CHARGE TO

American Warrant

ADDRESS

Box 311

CITY, STATE, ZIP CODE

Garden City, KS 67846

CUSTOMER COPY

TICKET

No.

839913 - 8

15-055-21436-0000

PAGE 1 OF 1

1. SERVICE LOCATIONS 1/1 days Ks 25525	WELL/PROJECT NO # 117	LEASE IAD	COUNTY/PARISH Franklin	STATE KS	CITY/OFFSHORE LOCATION	DATE 3-25-95	OWNER Sams
2. TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	NITROGEN JOB? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	CONTRACTOR Chapman	RIG NAME/NO Chapman #3	SHIPPED VIA CF	DELIVERED TO Well site	ORDER NO	
3. WELL TYPE 02	WELL CATEGORY 01	JOB PURPOSE OIL	WELL PERMIT NO 15-055-21436		WELL LOCATION S.E. Garden City		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

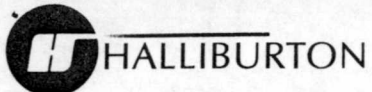
PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LOC	ACGT	DF		QTY.	U/M	QTY.	U/M	
000-117		1		34	MILEAGE 51374 RCM	300	mi	10.75		3225
001-016		1		34	Pump Service	1926	CF	1320		1320
030-016		1		34	Plg 2000 ft H	1	2700	120		120
24A	313.19201	1		34	Insert float valve "H"	1	2700	120		120
27	315.19413	1		34	Filling unit "H"	1	2700	2700		2700
40	326.60059	1		34	Leak test "H"	2	2700	2700		1600
320	800.8888	1		34	Leak test Basket "H"	1	2700	120		120
045-020		1		100	Can paper	1	2700	2700		2700

ORIGINAL

RECEIVED
STATE CORPORATION COMMISSION
NOV 27 1995

<p>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.</p> <p>MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS</p> <p>X <i>Scott Cox</i> DATE SIGNED: 8-24-95 TIME SIGNED: 3:00</p> <p><input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M.</p> <p><input type="checkbox"/> do <input type="checkbox"/> do not require IPC (Instrument Protection). <input type="checkbox"/> Not offered</p>	<p>SUB SURFACE SAFETY VALVE WAS <input type="checkbox"/> PULLED & RETURN <input type="checkbox"/> PULLED <input type="checkbox"/> RUN</p>	<p>SURVEY</p> <p>OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?</p> <p>WE UNDERSTOOD AND MET YOUR NEEDS?</p> <p>OUR SERVICE WAS PERFORMED WITHOUT DELAY?</p> <p>WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?</p> <p>ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p><input checked="" type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND</p>	<p>AGREE</p> <p>UN-DECIDED</p> <p>DIS-AGREE</p>	<p>PAGE TOTAL</p> <p>FROM CONTINUATION PAGE(S) 10, 125</p> <p>SUB-TOTAL APPLICABLE TAXES WILL BE ADDED ON INVOICE</p>
	<p>TYPE LOCK DEPTH</p>	<p>BEAN SIZE SPACERS</p>	<p>TYPE OF EQUALIZING SUB. CASING PRESSURE</p>	<p>TUBING SIZE TUBING PRESSURE WELL DEPTH</p>
	<p>TREE CONNECTION TYPE VALVE</p>			
	<p>CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.</p>			

CUSTOMER OR CUSTOMER'S AGENT (PLEASE PRINT) <i>Scott Cox</i>	CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE) <i>Scott Cox</i>	HALLIBURTON OPERATOR/ENGINEER <i>Allen F. Wood</i>	EMP # 86101	HALLIBURTON APPROVAL <i>Allen F. Wood</i>
---	--	---	----------------	--



HALLIBURTON ENERGY SERVICES

3-60
TICKET CONTINUATION

15-055-21436-0000
CUSTOMER COPY

TICKET No. 237913

CUSTOMER: American Warriors
WELL: IFL 111
DATE: 2-24-15
PAGE 2 OF 2

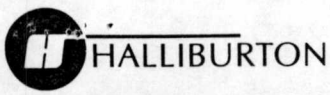
FORM 1911 R-10

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT	
		LOC	ACCT	DF								
504-200		1			MID CON-2	400		SKS		11.92	4768.00	
504-136		1			40/60 Pozmix-Standard	230		SKS		7.16	1646.80	
506-121		1			2 1/2 Gel allowed w/ Pozmix	4		SKS			NIC	
509-406		1			Calcium Chloride blended w/ Pozmix	1		SKS		36.75	661.50	
507-210		1			Fleck blended w/ mid con	100		LLS		1.05	105.00	
SERVICE CHARGE					CUBIC FEET		673		1.35		908.25	
					MILEAGE CHARGE	TOTAL WEIGHT	LOADED MILES	TON MILES	2925.05		75	

ORIGINAL

No. B 285390

CONTINUATION TOTAL 10,705.6



JOB SUMMARY

HALLIBURTON DIVISION
HALLIBURTON LOCATION

M.P. Cont
Hays KS

15-055-21436-0000

BILLED ON TICKET NO. 839913

WELL DATA

FIELD _____ SEC _____ TWP _____ RNG _____ COUNTY FINNEY 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	K13		
LINER						
TUBING						
OPEN HOLE						SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

JOB DATA

CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE 8-24-95	DATE 8-24-95	DATE 8-28-95	DATE 8-28-95
TIME 1930	TIME 1930	TIME 0030	TIME 2245

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
A Worth 2610	40071 PU	Hays KS
R Brens 57220	51374 REM	Hays KS
J Becker 43222	38604 BIK	Hays KS
T. Pfennig 11683	5020 BIK	Hays KS
Mel Kailin 04511	5444 BIK	Hays KS
Eldon Reynolds 47233	38604 BIK	Hays KS

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
FLOAT COLLAR IFAF	1	8 7/8 HALCO
FLOAT SHOE		
GUIDE SHOE		
CENTRALIZERS 2-4 5/8	2	HALCO
BOTTOM PLUG		
TOP PLUG 5/8 5/8	1	HALCO
HEAD		
PACKER		
OTHER Basket 3 3/8	1	HALCO

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 cut 8 7/8 surface log

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

CUSTOMER REPRESENTATIVE X [Signature]

HALLIBURTON OPERATOR Allen [Signature] COPIES REQUESTED _____

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
	400	m.p.c. m	Port	B	1/4# Floccule 3%	224	11.10
	230	40/60	Port	A	2 3/8 T. Gel 3%	129	14.12

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. 118

SHUT-IN: INSTANT _____ 5-MIN _____ 15-MIN _____ CEMENT SLURRY: BBL.-GAL. 283.64

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

ORDERED _____ AVAILABLE _____ USED _____ REMARKS

AVERAGE RATES IN BPM _____

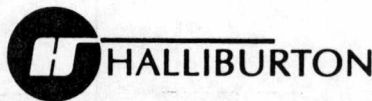
TREATING _____ DISPL. _____ OVERALL _____

CEMENT LEFT IN PIPE _____

FEET 3504 REASON Stop IT

see Job Log & chart
Pump 116 BBLS - customer D.I.
water to help plug
thanks Allen, Row, John, Tim

FIELD OFFICE



JOB LOG HAL-2013-C

CUSTOMER	WELL NO.	LEASE	JOB TYPE
American Water	# 119	120	8 5/8 surface

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
1	1430							Called out on location w/ equip + BIK cont 400 SKS mid conc-2 1/4" floater 39%cc 230 SKS 40/60 Puz 29% T Gel 39%cc Float Equip - TRAF, 2-34 cont - 1 BBL Discuss safety, set up + Plan job Rig Pulling Drill Pipe out of hole w/ Drill Pipe + B.T missing 2 joints on bit Released for the day
	1130 1445							On loc 8-22-95 Rig Running, ca, Drop Ball 1-Joint left air last joint down csg Parted. Pick up heading, joint screwed into csg
	1520							Pull csg to find end connection Found joint that parted - knot on pin end of csg - pulled it out Get some different csg + weld collars on csg.
	1600 1730							Pipe on Bottom, air down w/ Rig Pump "good air" Hookup Head + man. Cold
	2030							200# Sl mix 400 SKS mid conc-2 w/ 1/4" # floater/sk 39%cc FIN-mid conc-2 - 230 BBLs
	2057	7	230					200# Sl mix 40/60 Puz 29% gel 39%cc FIN mix cont - Release S-wiper Plug
	2144	7	52					200# Start Disp csg cap to insert. 11800 PST increase's while pumping, Disp. cut 2 BBLs short 600# pump 116 BBLs - "customer Request." Release PST - Float Held.
	2245		116					Job complete. 74 SKS csg top it customer did want to hand Plug. Thanks Allen, Ray, Eldon, Joel

ORIGINAL