

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

Operator: License # 7457  
Name: ELDER & VAUGHN, INC.  
Address P.O. BOX 18938  
City/State/Zip OKLAHOMA CITY, OK 73154  
Purchaser: \_\_\_\_\_  
Operator Contact Person: JACK H. VANGHN  
Phone (405) 842-8877  
Contractor: Name: GABBERT & JONES, INC.  
License: 5842  
Wellsite Geologist: DON HUBER  
Designate Type of Completion  
 New Well  Re-Entry  Workover  
 Oil  SWD  S10W  Temp. Abd.  
 Gas  ENHR  SIGW  
 Dry  Other (Core, WSV, 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  PBT  
 Commingled  Docket No. \_\_\_\_\_  
 Dual Completion  Docket No. \_\_\_\_\_  
 Other (SWD or Inj?)  Docket No. \_\_\_\_\_  
12/27/95 1/3/96 1/23/96  
Spud Date Date Reached TD Completion Date

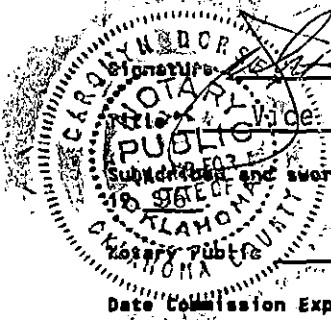
API NO. 15- 175-215180000 **ORIGINAL**  
County SEWARD  
W/2. SW SE SE Sec. 13 Twp. 32S Rge. 33   
330 Feet from (S)N (circle one) Line of Section  
1155 Feet from (E)W (circle one) Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
NE, (SE) NW or SW (circle one)  
Lease Name KANE TRUST Well # 1-13  
Field Name HUGOTON GAS AREA  
Producing Formation NONE  
Elevation: Ground 2851 KB 2863  
Total Depth 5185 PBT 3212  
Amount of Surface Pipe Set and Cemented at 1672 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 D&A JH 4-3-96  
(Data must be collected from the Reserve Pit)  
Chloride content 6000 ppm Fluid volume \_\_\_\_\_ bbls  
Dewatering method used EVAPORATION  
Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name 3-13-96  
Lease Name \_\_\_\_\_ License No. \_\_\_\_\_  
Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. 13 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: Vice President Date: 3/7/96  
Subscribed and sworn to before me this 7 day of March  
[Signature]  
Date Commission Expires 1/16/98



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

Operator Name ELDER & VAUGHN, INC. Lease Name KANE TRUST Well # 1-13  
 Sec. 13 Twp. 32S Rge. 33  East County SEWARD  
 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:  
Rosel-Dual Induction and Compensated-  
 Newtron Logs

Name	Top	Datum
WELLINGTON ANHYDRITE	2215'	+648
HERINGTON LS	2622'	+241
UPPER KRIDER LS	2652'	+211
LOWER KRIDER LS	2681'	+182
WINFIELD LS	2736'	+127
UPPER FT. RILEY LS	2790'	+73
BASE HEEBNER SH	4230'	-1367
TORONTO LS	4240'	-1377
LANSING LS	4344'	-1481
MARMATON LS	4982'	-2119

CASING RECORD <input checked="" 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	24	1672	POZMIX & CLASS C	665	2% CCL + 1/2# Celloseal/SK
PRODUCTION	7 7/8	5 1/2	14 & 15.5	3257	POZMIX	210	10% SALT 12 5/8 SK, GILSONITE & 0.75% 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 Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) Depth
2	2806 - 2814	1550 GALS 15% HCl ACID
2	2790 - 2796	1350 " " " "
2	2742 - 2750	1000 " " " "
2	2692 - 2700	1000 " " " "
2	2658 - 2666	1000 " " " "
2	2623 - 2631	1000 " " " "

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	NO TUBING			

Date of First, Resumed Production, SWD or Inj. TEMP. ABANDONED - 1/23/96 Producing Method  Flowing  Pumping  Gas Lift  Other (Explain)

Estimated Production Per 24 Hours	OIL Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	N/A	N/A	N/A		

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

METHOD OF COMPLETION DRY HOLE  
 Open Hole  Perf.  Dually Comp.  Commingled  
 Other (Specify)

UPTOWN Production Interval

GABBERT-JONES, INC.  
WICHITA, KANSAS

ORIGINAL

DRILLER'S WELL LOG

WELL NAME: Kane Trust #1  
Sec 13-33S-32W  
Seward County, Kansas

COMMENCED: December 27, 1995  
COMPLETED: January 5, 1996  
OPERATOR: Elder & Vaughn

DEPTH		FORMATION	REMARKS
From	To		
0	1125	Sand-Redbed	Ran 40 jts of 24# 8 5/8" csg set @ 1675' w/515 sks 85/15 Posmix C 8% Gel 2% CC 1/4# Celloseal + 150 sks C 2% CC 1/4# Celloseal PD @ 8:15AM 12/28/95
1125	1315	Glorietta Sand	
1315	1677	Redbed-Gyp	
1677	1775	Redbed	
1775	2140	Redbed-Shale	
2140	2650	Shale	
2650	3190	Shale-Lime	
3190	5185	Lime-Shale	

5185' TD

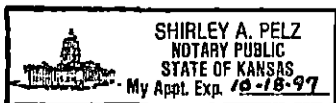
Ran 82 jts of 14 & 15 1/2# 5 1/2" csg set @ 3241' w/ 210 sks 50/50 Posmix 12 1/2# Gilsonite 3/4% CRF 3 PD @ 8:30AM 01/05/96 RR @ 9:30AM 01/05/96

RECEIVED  
KANSAS CORP COMM  
1996 MAR 13 A 10:29

[STATE OF KANSAS]  
[COUNTY OF SEDGWICK]

Subscribed and sworn to before me this  
8th day of January, 1996.

*Shirley A. Pelz*  
Shirley A. Pelz, Notary Public  
My commission expires:  
October 18, 1997



glog0001

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



BJ Services Company

RECEIVED

15-175-21518-0000

KANSAS CORP

CUSTOMER (COMPANY NAME) <i>Eloer &amp; Vaughn Inc</i>		CREDIT APPROVAL NO. <i>782</i>	PURCHASE ORDER NO. <i>73154</i>	CUSTOMER NUMBER <i>27610-000</i>	INVOICE NUMBER <i>49727.2</i>
MAIL <i>Box 18938</i>	STREET OR BOX NUMBER	CITY <i>OKC</i>	STATE <i>OKA</i>	ZIP CODE <i>73154</i>	JOB TYPE CODES
INVOICE TO: <i>Box 18938</i>	DATE WORK <i>12/22/95</i>	DATE YEAR <i>12/22/95</i>	BJ SERVICES SUPERVISOR <i>Yeaves</i>	WELL TYPE: <input checked="" type="checkbox"/> NEW <input type="checkbox"/> OLD	CEMENTING SERVICES
COMPLETED: <i>12/22/95</i>	BJ SERVICES DISTRICT <i>Perryton - Cmt</i>	JOB DEPTH (FT.) <i>1677</i>	WELL CLASS: <input type="checkbox"/> OIL <input checked="" type="checkbox"/> GAS <input type="checkbox"/> DISPOSAL	(CHECK ONE)	STIMULATION SERVICES
WELL NAME AND NUMBER <i>Kane Trust 1-13</i>	TD WELL DEPTH (FT.) <i>1677</i>	GAS USED ON JOB: <input type="checkbox"/> N <input checked="" type="checkbox"/> NONE <input type="checkbox"/> CO <sub>2</sub> <input type="checkbox"/> BINARY	(CHECK ONE)		
WELL LOCATION: <i>13-32.8-3317</i>	SECTION/RANGE	COUNTY <i>Seaward</i>	STATE <i>Ka</i>		

PRODUCT CODE	DESCRIPTION	UNIT OF MEASURE	QUANTITY	LIST PRICE UNIT	GROSS AMOUNT	PERCENT DISC	NET AMOUNT
13915	Mileage light	mi	40.00	1.80	72.00	38%	
13925	Mileage heavy	mi	40.00	2.95	118.00		
14015	Bulk Delivery Dry	ton mi	662.00	1.00	662.00		
14055	Cmt Pump Solv	ea	1.00	1260.00	1260.00		
14105	Cmt Service 2kg	cu ft	748.00	1.40	1047.20		
14315	Class C Cmt	55.222* 588 lb <sup>3</sup>	8x	588.00	10.80	6397.44	
14425	Pa	56.98* 77 lb <sup>3</sup>	8x	77.00	5.48	421.96	
14495	Bentonite	3.252* 420	lb	3,252.00	18	625.00	
14565	Calc. Flake		lb	167.00	2.05	342.35	
14507	Calcium Chloride 2280*	20 lb <sup>3</sup>	lb	1,280.00	40	512.00	
14625	5/8" Top Rubber Plug		ea	1.00	132.00	132.00	
13480	Cmt Nose Guide Shoe		ea	1.00	225.00	225.00	
180	Insect Float w/AFU		ea	1.00	405.00	405.00	
17068	Contractors		ea	3.00	88.50	265.50	
ORIGINAL					12160545		781538

ARRIVE LOCATION <i>12/28/95 3:30</i>	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 REPRESENT THAT I HAVE AUTHORITY TO ACCEPT AND SIGN THIS ORDER.	SERVICE RECEIPT: I CERTIFY THAT THE MATERIALS AND SERVICES LISTED WERE RECEIVED AND ALL SERVICES PERFORMED IN A WORKMANLIKE MANNER.
CUSTOMER REP. LAST NAME <i>Deac</i>		CUSTOMER AUTHORIZED AGENT <i>[Signature]</i>
SEE REVERSE SIDE FOR GENERAL TERMS AND CONDITIONS	CUSTOMER AUTHORIZED AGENT	BJ SERVICES APPROVED <i>[Signature]</i>

PAGE.003/003 TO OKLA CITY FROM BJ SERV PERRYTON JAN 12 '96 11:52

\*\*\* TOTAL PAGE.003 \*\*\*



15-175-21518-0000  
CEMENT JOB DETAIL SHEET

8 5/8 Surface Log

CUSTOMER RIDER - LAUGHIN			DATE 12-28-95		F.R.# 375633		SER. SUP. REEVES		TYPE JOB SURFACE				
LEASE/WELL NAME/CSG KANE TRUST 1-13				LOCATION 13-325-330				COUNTY-PARISH-BLOCK SEWARD, KS					
DISTRICT PERRYTON		DRILLING CONTRACTOR RIG #					OPERATOR						
MATERIAL FURNISHED BY WPS	TYPE OF PLUGS		LIST-CSG-HARDWARE			SQ MANI FOLD Y N	TOP OF EACH FLUID	PHYSICAL SLURRY PROPERTIES					
	TOP BTM	RUBBER	INSERT FLOAT W/AFU GUIDE SHOE					SLURRY WGT PPG	SLURRY YLD FT	WATER GPS	PUMP TIME HR:MIN	BM SLURRY	BM MIX WATER
515 SX 85/15 C-POZ + 8% GEL + 2% CACL <sub>2</sub> + 1#/SK CELLO- FLAKE								12.4	2.2	12.3	202	151	
150 SX C + 2% CACL <sub>2</sub> + 1#/SK CELLO-FLAKE								14.8	1.34	6.32	36	22.6	
Available Mix Water 500 Bbl.		Available Displ. Fluid 500 Bbl.		TOTAL		238		174					
HOLE			TBG-CSG-D.P.				TBG-CSG-D.P.				COLLAR DEPTHS		
SIZE	% EXCESS	DEPTH	SIZE	WGT.	TYPE	DEPTH	SIZE	WGT.	TYPE	DEPTH	SHOE	FLOAT	STAGE
12 1/2	100	1677	8 5/8	24#		1677					1677	1642	
LAST CASING			PKR-CMT RET-BR PL-LINER				PERF. DEPTH		TOP CONN		WELL FLUID		
SIZE	WGT	TYPE	DEPTH	BRAND & TYPE		DEPTH	TOP	BTM	SIZE	THREAD	TYPE	WGT.	
									8 5/8	8 <sup>R</sup>	MUD	9#	
CAL DISPL. VOL.-Bbl.			CAL. PSI	CAL. MAX PSI	OP. MAX	MAX TBG PSI	MAX CSG PSI	DISPL. FLUID		WATER SOURCE			
TBG.	CSG.	CSG.	TOTAL	BUMP PLUG	TO REV	50 PSI	RATED	OP.	RATED	OP.	TYPE	WGT.	
	104		104	400							WATER	8.4	RIG
EXPLANATION: TROUBLE SETTING TOOL RUNNING CSG, ETC. PRIOR TO CEMENTING.													
PRESSURE/RATE DETAIL							EXPLANATION						
TIME	PRESSURE-PSI		RATE	Bbl. FLUID	FLUID	SAFETY MEETING: WPS CREW <input type="checkbox"/> CO. REP <input type="checkbox"/>							
HR: MIN.	PIPE	ANNULUS	BPM	PUMPED	TYPE	TEST LINES 2000 PSI							
6:30						CIRCULATING WELL-RIG <input checked="" type="checkbox"/> WPS <input type="checkbox"/>							
7:15	200		6.5	10	WATER	START WATER AHEAD.							
7:17	300		6.5	202	CEMENT	MIX & PUMP HEAD @ 12.4 PPG.							
7:47	300		6	36	CEMENT	MIX & PUMP TAIL @ 14.8.							
7:55	0					SHUT DOWN - DROP PLUG - WASH ON.							
7:58	250		7	90	WATER	DISPLACE CEMENT.							
8:19	450		3	14	WATER	SLOW RATE.							
8:15	500-900					BUMP PLUG.							
8:16	900-0					CHECK FLOAT.							
BUMPED PLUG	PSI TO BUMP PLUG	TEST FLOAT EQUIP.	TOTAL Bbl PUMPED	Bbl. CMT RETURNS/ REVERSED	PSI LEFT ON CSG	SPOT TOP CEMENT SURFACE	SER. SUP. REEVES CUSTOMER REP. DEAR						
(Y) N	500	Y N	316		0								



TICKET CONTINUATION - CUSTOMER COPY

TICKET No.  

HALLIBURTON ENERGY SERVICES

FORM 1911 R-10

15-175-21518-0000

CUSTOMER <b>Elder Vaughn</b>	WELL <b>Rain Trust</b>	DATE <b>1-5-96</b>	PAGE	OF
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PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	WELL		UNIT PRICE	AMOUNT
		LOC	ACCT	DF		QTY.	U/M		
504131					210 cu.ft. 50/50 Premium Poz	210	sk	8.77	1841.70
504043	516.00272					105	sk		
506105	516.00286					770	lb		
506121	516.00259					4	sk		
506291	516.00337				Glycerite 12.50	2625	lb	.40	1050.00
509968	516.00315				Salt 10%	910	lb	.15	136.50
507153	516.00161				GR-3 3/4"	132	lb	4.85	640.20
ORIGINAL									
500207					SERVICE CHARGE				
500806					MILEAGE CHARGE				
					TOTAL WEIGHT				
					LOADED MILES				
					TON MILES				
					CUBIC FEET				
						276		1.35	372.60
						487.35		.95	462.99

No. B 219586

CONTINUATION TOTAL	4513.90
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# JOB SUMMARY

HALLIBURTON DIVISION  
HALLIBURTON LOCATION

BILLED ON TICKET NO. 811 157

15-175-21518-0000

## WELL DATA

FIELD \_\_\_\_\_ SEC. 17 TWP. 30S RING. 3 COUNTY. SANDERS STATE OK

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	14	5.5	K1	7050	
LINER						
TUBING						
OPEN HOLE						SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

## JOB DATA

### TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
FLOAT COLLAR		
FLOAT SHOE		
GUIDE SHOE		
CENTRALIZERS		
BOTTOM PLUG		
TOP PLUG		
HEAD		
PACKER		
OTHER		

CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE <u>1-5-96</u>	DATE <u>1-5-95</u>	DATE <u>1-5-96</u>	DATE <u>1-5-96</u>
TIME <u>0000</u>	TIME <u>0900</u>	TIME <u>0715</u>	TIME <u>0530</u>

### PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
<u>R C WIST</u>	<u>420045</u>	<u>2.8.201</u>
<u>R 7623</u>	<u>RU</u>	
<u>C. C. ...</u>	<u>75496</u>	
<u>G 2569</u>	<u>PCU</u>	
<u>R. C. ...</u>	<u>6612</u>	<u>HUGOTON</u>
<u>H 2441</u>	<u>BUK</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 5001  
 DESCRIPTION OF JOB ORIS

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

 CUSTOMER REPRESENTATIVE X

 HALLIBURTON OPERATOR R C WIST COPIES REQUESTED \_\_\_\_\_

## CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
	<u>210</u>	<u>H 3/4 22</u>		<u>R</u>	<u>12% 24% Glycerite, 10% Sulf, 1/2% LSP</u>	<u>1.5</u>	

### PRESSURES IN PSI

### SUMMARY

### VOLUMES

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 413 REASON SH. = J. ...

PRESLUSH: BBL-GAL \_\_\_\_\_ TYPE \_\_\_\_\_  
 LOAD & BKDN: BBL-GAL \_\_\_\_\_ PAD: BBL-GAL \_\_\_\_\_  
 TREATMENT: BBL-GAL \_\_\_\_\_ DISPL: BBL-GAL 78  
 CEMENT SLURRY: BBL-GAL 57  
 TOTAL VOLUME: BBL-GAL \_\_\_\_\_

### REMARKS







HAL-1906-N

CHARGE TO: *Elder & Vaughn*  
 ADDRESS: *12000 Elder & Vaughn*  
 CITY, STATE, ZIP CODE: *HOUSTON, TX 77055*

DUNCAN COPY

TICKET No. **881450** 9  
 15-175-21518-0000  
 PAGE 1 OF 1

SERVICE LOCATIONS 1. <i>Liberal 025540</i> 2. <i>Houston 025540</i>	WELL/PROJECT NO. <i>1-813</i>	LEASE <i>Kan Trust</i>	COUNTY/PARISH <i>Beward</i>	STATE <i>KS</i>	CITY/OFFSHORE LOCATION	DATE <i>1-27-96</i>	OWNER
TICKET TYPE <input type="checkbox"/> SERVICE <input type="checkbox"/> SALES	NITROGEN JOB? <input type="checkbox"/> YES <input type="checkbox"/> NO	CONTRACTOR <i>Gabriel Jones</i>	RIG NAME/NO. <i>12</i>	SHIPPED VIA <i>HES</i>	DELIVERED TO <i>LOC #12.6001</i>	ORDER NO.	
WELL TYPE <i>02</i>	WELL CATEGORY <i>01</i>	JOB PURPOSE <i>035</i>	WELL PERMIT NO.	WELL LOCATION			
REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/PART NUMBER	ACCOUNTING LOC ACCT DF	DESCRIPTION	QTY	U/M	QTY	U/M	UNIT PRICE	AMOUNT
<i>000-117</i>			<i>MILEAGE</i>	<i>44</i>	<i>mi</i>			<i>2.85</i>	<i>125</i>
<i>001-016</i>			<i>Pressure Charge</i>	<i>3256</i>	<i>FT</i>	<i>6hr</i>			<i>1500</i>
<i>030-018</i>			<i>TOP Plug</i>	<i>5 1/2</i>	<i>in</i>	<i>1</i>			<i>65</i>
	<i>ORIGINAL</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.

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

*X* *[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	<b>SURVEY</b>	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL <i>1690</i>	
TYPE LOCK DEPTH	OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?					FROM CONTINUATION PAGE(S) <i>4503</i>
BEAN SIZE SPACERS	WE UNDERSTOOD AND MET YOUR NEEDS?					
TYPE OF EQUALIZING SUB. CASING PRESSURE	OUR SERVICE WAS PERFORMED WITHOUT DELAY?					SUB-TOTAL APPLICABLE TAXES WILL BE ADDED ON INVOICE <i>6194</i>
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					
<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)	CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE) <i>X [Signature]</i>	HALLIBURTON OPERATOR/ENGINEER <i>Ronald Crist</i>	EMP # <i>07653</i>	HALLIBURTON APPROVAL
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