

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

Operator: License # 4732

Name: CLAY MOORE

Address 6440 N. CENTRAL EXPRESSWAY  
Suite #620 LB 33

City/State/Zip DALLAS, TX 75206

Purchaser: TEXACO - TTTI

Operator Contact Person: CLAY MOORE

Phone (214) 750-9912

Contractor: Name: DUKE DRILLING CO., INC.

License: 5929

Wellsite Geologist: CLAY MOORE & JAMES R. CRAIG

Designate Type of Completion

New Well  Re-Entry  Workover

Oil  SWD  SIOW  Temp. Abandoned  
 Gas  ENHR  SIGW  
 Dry  Other (Core, MSW, Expl., Cathodic, etc.)

If Workover/Re-Entry: old well info as follows MAR 16 1992

Operator: 3-16-92

Well Name: \_\_\_\_\_

Comp. Date \_\_\_\_\_ Old Total Depth \_\_\_\_\_

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

11-14-91 11-19-91 1-10-92  
Spud Date Date Reached TD Completion Date

API NO. 15- 185-22-814-0000

County STAFFORD

NW - NW - SE - \_\_\_\_\_ Sec. 9 Twp. 22S Rge. 12  E

2310 Feet from  NW (circle one) Line of Section

2310 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 DENKER Well # 1

Field Name DRACH

Producing Formation ARBUCKLE

Elevation: Ground 1865 KB 1870

Total Depth 3776 PBTB 3731

Amount of Surface Pipe Set and Cemented at 271 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/ \_\_\_\_\_ ex cat.

Drilling Fluid Management Plan A 17-2  
(Data must be collected from the Reserve Pit)

Chloride content \_\_\_\_\_ ppm Fluid volume \_\_\_\_\_ bbls

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.

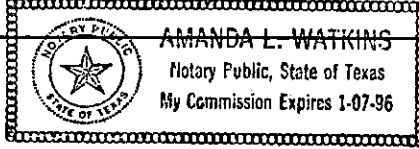
Signature Clay Moore

Title OWNER - OPERATOR Date 3-9-92

Subscribed and sworn to before me this 13th day of MARCH 19 92.

Notary Public Amanda L. Watkins

Date Commission Expires \_\_\_\_\_



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)

ORIGINAL  
SIDE TWO

Operator Name CLAY-MOORE Lease Name DENKER Well # 1

Sec. 9 Twp. 22S Rgs. 12  East  West  
County STAFFORD

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<br>(Attach Additional Sheets.) | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input checked="" type="checkbox"/> Log | Formation (Top), Depth and Datum | <input type="checkbox"/> Sample |
| Samples Sent to Geological Survey                     | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Name                                    | Top                              | Datum                           |
| Cores Taken   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | ANHYDRITE                               | 662                              | +1208                           |
| Electric Log Run<br>(Submit Copy.)                    | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | TOPEKA LM.                              | 2862                             | -992                            |
| List All E.Logs Run:                                  |   | HEEBNER SH.                             | 3155                             | -1285                           |
| DUAL INDUCTION FOCUSED LOG                            |   | BROWN LIME                              | 3292                             | -1422                           |
| BHC AC-GR-CAL   |   | LANSING KC                              | 3308                             | -1438                           |
| ZDLC-CN-GR-ML   |   | BASE KC                                 | 3527                             | -1657                           |
| MINILOG-GR, FRACLOG                                   |   | CONG.                                   | 3548                             | -1678                           |
|   |   | VIOLA                                   | 3560                             | -1690                           |
|   |   | SIMPSON SEC.                            | 3608                             | -1738                           |
|   |   | ARBUCKLE                                | 3664                             | -1794                           |

| 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   | 12 1/4"           | 8 5/8"                    | 20#             | 271'          | 60/40Poz       | 160          | 2%Gel 3%CC  |
| PRODUCTION  | 7 7/8"            | 5 1/2"                    | 14#             | 3775'         | 40/60Poz       | 150          | 10% Salt<br>1.75% Halad<br>& 5 #Gilsonite<br>per sack |

| ADDITIONAL CEMENTING/SQUEEZE RECORD     |                  |                |             |                            |
|---|------------------|----------------|-------------|----------------------------|
| Purpose:                                | Depth Top Bottom | Type of Cement | #Sacks Used | Type and Percent Additives |
| <input type="checkbox"/> Perforate      |                  |                |             |                            |
| <input type="checkbox"/> Protect Casing |                  |                |             |                            |
| <input type="checkbox"/> Plug Back TD   |                  |                |             |                            |
| <input type="checkbox"/> Plug Off Zone  |                  |                |             |                            |

| Shots Per Foot | PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated | Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) | Depth |
|----------------|--|--|-------|
| 4              | 3666-3670'   |  |       |
|                |  |  |       |
|                |  |  |       |

|                      |                    |                     |           |   |
|----------------------|--------------------|---------------------|-----------|---|
| <b>TUBING RECORD</b> | Size <u>2 3/8"</u> | Set At <u>3728'</u> | Packer At | Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|----------------------|--------------------|---------------------|-----------|---|

|   |  |
|---|--|
| Date of First, Resumed Production, SWD or Inj. <u>1-10-92</u> | Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input checked="" type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) |
|---|--|

|                                   |                     |               |             |       |                         |         |
|-----------------------------------|---------------------|---------------|-------------|-------|-------------------------|---------|
| Estimated Production Per 24 Hours | Oil <u>56</u> Bbls. | Gas Trace Mcf | Water Trace | Bbls. | Gas-Oil Ratio <u>38</u> | Gravity |
|-----------------------------------|---------------------|---------------|-------------|-------|-------------------------|---------|

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 3666-3670'

ORIGINAL

# FORMATION

# TEST

# REPORT

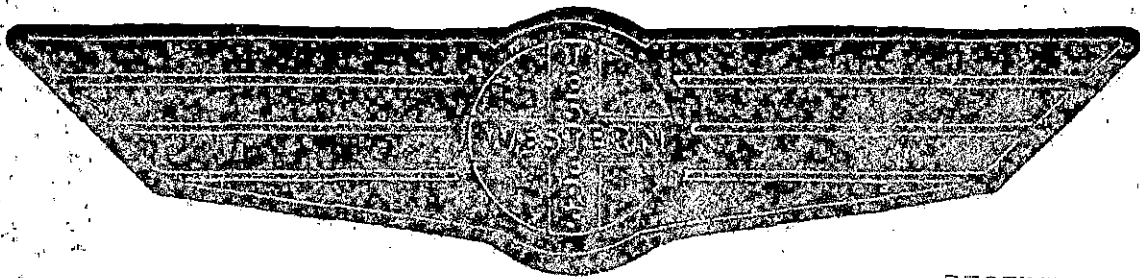
COMPANY

CLAY MOORE

LEASE & WELL NO. DENKER #1

SEC. 9 TWP. 22S. RGE. 12W TEST NO. 1

DATE 11/18/91



Home Office:

P.O. Box 1599

Wichita, Kansas 67201

Phone 1-800-688-7021

RECEIVED

MAR 16 1992

WESTERN TESTING CO. INC.  
SUBSURFACE PRESSURE SURVEY

DATE : 11/18/91 TICKET : 18294  
CUSTOMER : CLAY MOORE LEASE : DENKER  
WELL : 1 TEST: 1 GEOLOGIST : MOORE  
ELEVATION : 1870 KB FORMATION : ARBUCKLE  
SECTION : 9 TOWNSHIP : 22S  
RANGE : 12W COUNTY : STAFFORD STATE : KANSAS  
GAUGE SN# : 10979 RANGE : 4100 CLOCK : 12

INTERVAL FROM : 3669 TO : 3681 TOTAL DEPTH : 3681  
DEPTH OF SELECTIVE ZONE :  
PACKER DEPTH : 3664 SIZE : 6.63  
PACKER DEPTH : 3669 SIZE : 6.63  
PACKER DEPTH : SIZE :  
PACKER DEPTH : SIZE :

DRILLING CON. : DUKE RIG 1  
MUD TYPE : CHEMICAL VISCOSITY : 51  
WEIGHT : 9.3 WATER LOSS (CC) : 10.4  
CHLORIDES (PPM) : 5000  
JARS-MAKE : WTC SERIAL NUMBER : 114  
DID WELL FLOW ? : REVERSED OUT ? :

DRILL COLLAR LENGTH : 0 FT I.D. inch : 0.00  
WEIGHT PIPE LENGTH : 600 FT I.D. inch : 2.80  
DRILL PIPE LENGTH : 3039 FT I.D. inch : 3.80  
TEST TOOL LENGTH : 30 FT TOOL SIZE : 5.50  
ANCHOR LENGTH : 12 FT ANCHOR SIZE : 5.50  
SURFACE CHOKE SIZE : .75 IN BOTTOM CHOKE SIZE : .75  
MAIN HOLE SIZE : 7.875 IN TOOL JOINT SIZE : 4.5FH

BLOW COMMENT #1 : INITIAL FLOW PERIOD VERY STRONG BLOW-BOTTOM  
BLOW COMMENT #2 : OF BUCKET IN 1 MINUTE. GAS TO SURFACE AT END  
BLOW COMMENT #3 : OF FLOW.  
BLOW COMMENT #4 : FINAL FLOW PERIOD VERY STRONG BLOW.

# ORIGINAL

RECOVERED : 2481 FT OF: FREE OIL 38 GRAVITY @ 60 DEGREES  
RECOVERED : 120 FT OF: GASSY OIL CUT MUD  
RECOVERED : 0 FT OF: 40%GAS;30%OIL;30%MUD  
RECOVERED : 120 FT OF: GASSY OIL CUT SALTWATER  
RECOVERED : 0 FT OF: 40%GAS;20%WATER;30%MUD;10%OIL  
RECOVERED : 0 FT OF: CHLORIDES 24000 PPM

Total Barrels Fluid = 34.32  
Total Fluid Prod Rate = 705.99 BFPD  
Indicated Oil Rate = 656.18 BOPD  
Indicated Wtr Rate = 7.16 BWPD  
Corrected Oil Rate = 474.46 BOPD  
Corrected Wtr Rate = 5.18 BWPD

REMARK 1 :  
REMARK 2 : RECOVERED 960 FT GAS ABOVE FLUID  
REMARK 3 :  
REMARK 4 :

SET PACKER(S) : 11:00 PM TIME STARTED OFF BOTTOM : 2:15 AM  
WELL TEMPERATURE : 117  
INITIAL HYDROSTATIC PRESSURE (A) 1826  
INITIAL FLOW PERIOD MIN: 30 (B) 309 PSI TO (C) : 694  
INITIAL CLOSED IN PERIOD MIN: 42 (D) 1115  
FINAL FLOW PERIOD MIN: 40 (E) 755 PSI TO (F) : 970  
FINAL CLOSED IN PERIOD MIN: 51 (G) 1113  
FINAL HYDROSTATIC PRESSURE (H) 1806

Phone 913-483-2827, Russell, Kansas  
 Phone 316-793-5861, Great Bend, Kansas

**ORIGINAL**

Phone Plainville 913-434-2812  
 Phone Ness City 913-798-3843

**ALLIED CEMENTING CO., INC.**

2579

Home Office P. O. Box 31

Russell, Kansas 67665

New

|       |          |          |    |          |    |       |    |                             |           |             |           |           |            |        |            |  |
|-------|----------|----------|----|----------|----|-------|----|-----------------------------|-----------|-------------|-----------|-----------|------------|--------|------------|--|
| Date  | 11-14-91 | Sec.     | 9  | Twp.     | 22 | Range | 12 | Called Out                  | 7:00 P.M. | On Location | 3:30 P.M. | Job Start | 10:00 P.M. | Finish | 10:50 P.M. |  |
| Lease | Dunker   | Well No. | #1 | Location |    |       |    | Ike + Joe, 20 1/2 S, W into | County    | Stafford    | State     | KS        |            |        |            |  |

|                     |             |            |            |
|---------------------|-------------|------------|------------|
| Contractor          | Duke Rig #1 |            |            |
| Type Job            | Surface     |            |            |
| Hole Size           | 12 1/4"     | T.D.       | 272'       |
| Csg.                | 8 5/8"      | Depth      | 271'       |
| Tbg. Size           |             | Depth      |            |
| Drill Pipe          |             | Depth      |            |
| Tool                |             | Depth      |            |
| Cement Left in Csg. | 15'         | Shoe Joint |            |
| Press Max.          |             | Minimum    |            |
| Meas Line           |             | Displace   | 16 3/4 bbl |

Owner Same  
 To Allied Cementing Co., Inc.  
 You are hereby requested to rent cementing equipment and furnish cement and helper to assist owner or contractor to do work as listed.

Charge To Clay Moore  
 Street  
 City State  
 The above was done to satisfaction and supervision of owner agent or contractor.

Purchase Order No.  
 X *Travis Walker*

**EQUIPMENT**

|         |     |          |       |
|---------|-----|----------|-------|
| #       | No. | Cementer | Tim   |
| Pumptrk | 181 | Helper   | Cary  |
| #       | No. | Cementer |       |
| Pumptrk |     | Helper   |       |
| #       | No. | Driver   | Jacks |
| Bulktrk | 68  | Driver   |       |

**CEMENT**

|                |                                 |
|----------------|---------------------------------|
| Amount Ordered | 1100 sq ft @ 100.37 cc, 2905e 1 |
| Consisting of  |                                 |
| Common         |                                 |
| Poz. Mix       |                                 |
| Gel.           |                                 |
| Chloride       |                                 |
| Quickset       |                                 |
| Sales Tax      |                                 |

**DEPTH of Job**

|            |                   |  |
|------------|-------------------|--|
| Reference: | Pumptrk Charge    |  |
|            | Pumptrk Mileage   |  |
|            | 8 5/8 Wooden Plug |  |
|            | Sub Total         |  |
|            | Tax               |  |
|            | Total             |  |

|           |  |  |
|-----------|--|--|
| Handling  |  |  |
| Mileage   |  |  |
| Sub Total |  |  |
| Total     |  |  |

RECEIVED CORPORATION UN...  
 MAR 16 1992

Remarks: Cement lid Circulate.  
 Allied Cementing  
 Ray Tim Dickson

Floating Equipment



ORIGINAL SUMMARY

HALLIBURTON DIVISION  
HALLIBURTON LOCATION

OK City  
G+ Bond

BILLED ON TICKET NO. 197110

WELL DATA

FIELD \_\_\_\_\_ SEC. 9 TWP. 22 RNG. 12 COUNTY Stafford 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       |          | 11"    | 5 1/2 | 0    | 2775 |                       |
| LINER        |          |        |       |      |      |                       |
| TUBING       |          |        |       |      |      |                       |
| OPEN HOLE    |          |        |       |      |      | SHOTS/FT              |
| PERFORATIONS |          |        |       |      |      |                       |
| PERFORATIONS |          |        |       |      |      |                       |
| PERFORATIONS |          |        |       |      |      |                       |

JOB DATA

| CALLED OUT | ON LOCATION | JOB STARTED | JOB COMPLETED |
|------------|-------------|-------------|---------------|
| DATE 11-19 | DATE 11-19  | DATE 11-20  | DATE 11-20    |
| TIME 9:00  | TIME 10:15  | TIME 2:15   | TIME 11:30    |

PERSONNEL AND SERVICE UNITS

| NAME     | UNIT NO. & TYPE | LOCATION |
|----------|-----------------|----------|
| Blossing | 5322            |          |
| M. ...   | ...             | ...      |
| B...     | ...             | ...      |

TOOLS AND ACCESSORIES

| TYPE AND SIZE | QTY. | MAKE  |
|---------------|------|-------|
| FLOAT COLLAR  |      |       |
| FLOAT SHOE    |      |       |
| GUIDE SHOE    | 1    | H...  |
| CENTRALIZERS  | 7    | "     |
| BOTTOM PLUG   |      |       |
| TOP PLUG      |      |       |
| HEAD          | 1    |       |
| PACKER        | 1    | 110-5 |
| OTHER         | 25   | "     |

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 CH-117

DESCRIPTION OF JOB long string

JOB DONE THRU: TUBING  CASING  ANNULUS  TBG/ANN

CUSTOMER REPRESENTATIVE X Rob Gary

HALLIBURTON OPERATOR ... COPIES REQUESTED \_\_\_\_\_

CEMENT DATA

| STAGE | NUMBER OF SACKS | CEMENT | BRAND | BULK SACKED | ADDITIVES                         | YIELD CU.FT./SK. | MIXED LBS/GAL. |
|-------|-----------------|--------|-------|-------------|-----------------------------------|------------------|----------------|
|       | 50              | 100/20 |       | B           | 10% Salt 1.75 Halad 322           | 1.38             | 141.3          |
|       | 100             | 100/20 |       | B           | 10% Salt 1.75 Halad 322 5% Isante | 1.43             | 141.3          |

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 91.6

SHUT-IN INSTANT \_\_\_\_\_ 5-MIN. \_\_\_\_\_ 15-MIN. \_\_\_\_\_ CEMENT SLURRY: BBL-GAL 32.5

HYDRAULIC HORSEPOWER \_\_\_\_\_ TOTAL VOLUME: BBL-GAL \_\_\_\_\_

ORDERED \_\_\_\_\_ AVAILABLE \_\_\_\_\_ USED \_\_\_\_\_ REMARKS \_\_\_\_\_

AVERAGE RATES IN BPM \_\_\_\_\_

TREATING \_\_\_\_\_ DISPL. \_\_\_\_\_ OVERALL \_\_\_\_\_

CEMENT LEFT IN PIPE \_\_\_\_\_

FEET 34.7 REASON Shoe

CUSTOMER: J...  
LEASE: O...  
WELL NO: ...  
JOB TYPE: long string  
DATE: 11-20-71

FORM 1906 R-11

|   |                            |                                    |   |                          |   |
|---|----------------------------|------------------------------------|---|--------------------------|---|
| WELL NO. - FARM OR LEASE NAME<br><i>1 Clay Moor #</i> |                            | COUNTY<br><i>Stafford</i>          | STATE<br><i>Ki</i>  | CITY / OFFSHORE LOCATION | DATE<br><i>11-20-91</i>   |
| CHARGE TO<br><i>Clay Moor #</i>                       |                            | OWNER<br><i>Sam</i>                | TICKET TYPE (CHECK ONE)<br>SERVICE <input checked="" type="checkbox"/> SALES <input type="checkbox"/> |                          | NITROGEN JOB<br>YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |
| ADDRESS   |                            | CONTRACTOR<br><i>P.H.</i>          | 1 LOCATION<br><i>1st Bar</i>  |                          | COUL<br><i>5500</i>   |
| CITY, STATE, ZIP                                      |                            | SHIPPED VIA<br><i>Harco</i>        | 2 LOCATION  |                          | CODE  |
| WELL TYPE<br><i>01</i>                                | WELL CATEGORY<br><i>01</i> | WELL PERMIT NO.<br><i>B-979360</i> | 3 LOCATION  |                          | CODE  |
| TYPE AND PURPOSE OF JOB<br><i>01</i>                  |                            | DELIVERED TO<br><i>Location</i>    | REFERRAL LOCATION   |                          |   |
|   |                            | ORDER NO.                          |   |                          |   |

As consideration, the above-named Customer agrees to pay Halliburton in accordance with the rates and terms stated in Halliburton's current price list, business payable NET by the 20th of the following month after date of invoice. Upon receipt of invoice, payment of Customer's account by the last day of the month following the month in which the invoice is dated. Customer agrees to pay amount due on or before the highest lawful contract rate of 10% per annum. The terms and conditions shall be governed by the law of the state where work is performed or equipment or materials are furnished.

| PRICE REFERENCE | SECONDARY REF OR PART NO. | L D C. | ACCOUNT | DESCRIPTION     | UNITS 1 |       | UNITS 2 |       | UNIT PRICE | AMOUNT  |
|-----------------|---------------------------|--------|---------|-----------------|---------|-------|---------|-------|------------|---------|
|                 |                           |        |         |                 | QTY     | PRICE | QTY     | PRICE |            |         |
|                 |                           |        |         | MILEAGE         | 20      | 1     |         |       | 210        | 5.00    |
|                 |                           |        |         | Pump            | 297     | 1     |         |       |            | 1240.00 |
|                 |                           |        |         | Plug 3/4" 9/16" | 1       |       |         |       |            | 60.00   |
|                 |                           |        |         | Super float     | 12      |       |         |       | 9700       | 1040.00 |
|                 |                           |        |         | Low to slow     | 1       |       |         |       |            | 185.00  |
|                 |                           |        |         | Insert float    | 1       |       |         |       |            | 83.00   |
|                 |                           |        |         | Fill up         | 1       |       |         |       |            | 300.00  |
|                 |                           |        |         | Electrode S-11  | 8       | 149   |         |       | 5800       | 1140.00 |
|                 |                           |        |         | Gate valve      | 15      |       |         |       | 1200       | 530.00  |
|                 |                           |        |         | Electrode       | 20      |       |         |       | 11.30      | 226.00  |

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

197260-2

AS PER ATTACHED BULK MATERIAL DELIVERY TICKET NO.

B-979360

197260-2

WAS JOB SATISFACTORILY COMPLETED? \_\_\_\_\_

WAS DELIVERY OF EQUIPMENT SATISFACTORY? \_\_\_\_\_

WAS DELIVERY OF SERVICE SATISFACTORY? \_\_\_\_\_

CUSTOMER OR HIS AGENT (PLEASE PRINT)  
*Sam*

CUSTOMER OR HIS AGENT (SIGNATURE)  
*[Signature]*

WE CERTIFY THAT THE FAIR LABOR STANDARDS ACT OF 1938 AS AMENDED HAS BEEN COMPLIED WITH IN THE PRODUCTION OF GOODS AND OR SERVICES SPECIFIED TO SERVICES FURNISHED UNDER THIS CONTRACT.

HALLIBURTON OPERATOR  
*[Signature]*

HALLIBURTON APPROVAL

CUSTOMER

SUB TOTAL

APPLICABLE TAXES WILL BE ADDED ON INVOICE.



JOB LOG

ORIGINAL

WELL NO. 1 LEASE Decker TITLE NO. 1472612

CUSTOMER clay more PAGE NO.

JOB TYPE Long string DATE 11-20-91

FORM 2013 R-2

| CHART NO | TIME  | RATE (BPM) | VOLUME (BBL) (GAL) | PUMPS |   | PRESSURE (PSI) |        | DESCRIPTION OF OPERATION AND MATERIALS     |
|----------|-------|------------|--------------------|-------|---|----------------|--------|--|
|          |       |            |                    | T     | C | TUBING         | CASING |  |
|          | 10:15 |            |                    |       |   |                |        | on location 11 19 91                       |
|          | 2:15  |            |                    |       |   |                |        | Break C.M                                  |
|          | 2:32  | 5          | 0                  |       | 1 |                | 400    | Pump 20 BPM Salt Slush                     |
|          | 2:36  | 5          | 50                 |       | 1 |                | 400    | 5 BBL water                                |
|          | 2:37  | 5          | 25                 |       | 1 |                | 400    | Pump Super Slush                           |
|          | 2:37  | 5          | 37                 |       | 1 |                | 400    | Pump 3 BBL water                           |
|          | 2:44  | 5          | 42                 |       |   |                | 400    | mix cement                                 |
|          | 2:51  |            | 78                 |       | 1 |                | 400    | common mix<br>wash out line Pull Plug plug |
|          | 2:56  | 6          | 78                 |       | 1 |                | 300    | Start Disp                                 |
|          | 3:11  |            | 107                |       | 1 |                | 400    | land Plug<br>3751 M-6                      |
|          | 3:17  |            |                    |       |   |                |        | check float at<br>Plug for Hole            |
|          | 4:30  |            |                    |       |   |                |        | wash up Pull up<br>MAR 16 1992             |
|          |       |            |                    |       |   |                |        | Thank you<br>3471                          |

DISTRICT Spill

DATE 11-2-91

TO: HALLIBURTON SERVICES YOU ARE HEREBY REQUESTED TO FURNISH EQUIPMENT AND SERVICEMEN TO DELIVER AND OPERATE

THE SAME AS AN INDEPENDENT CONTRACTOR TO: Clay Moore (CUSTOMER) AND DELIVER AND SELL PRODUCTS, SUPPLIES, AND MATERIALS FOR THE PURPOSE OF SERVICING

WELL NO. 1 LEASE Denkin SEC. 9 TWP. 27 RANGE 1

FIELD \_\_\_\_\_ COUNTY Ward STATE KS OWNED BY Clay Moore

THE FOLLOWING INFORMATION WAS FURNISHED BY THE CUSTOMER OR HIS AGENT

FORMATION NAME \_\_\_\_\_ TYPE \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_ Packer: TYPE \_\_\_\_\_ SET AT \_\_\_\_\_ TOTAL DEPTH \_\_\_\_\_ MUD WEIGHT \_\_\_\_\_ BORE HOLE \_\_\_\_\_ INITIAL PROD: OIL \_\_\_\_\_ BPD, H2O \_\_\_\_\_ BPD, GAS \_\_\_\_\_ MCF PRESENT PROD: OIL \_\_\_\_\_ BPD, H2O \_\_\_\_\_ BPD, GAS \_\_\_\_\_ MCF

Table with columns: NEW USED, WEEKS, SIZE, FROM, TO, MAX ALLOW. P.S.L. Rows include CASING, LINER, TUBING, OPEN HOLE, PERFORATIONS.

PREVIOUS TREATMENT: DATE \_\_\_\_\_ TYPE \_\_\_\_\_ MATERIALS \_\_\_\_\_

TREATMENT INSTRUCTIONS: TREAT THRU TUBING  ANNULUS  CASING  TUBING/ANNULUS  HYDRAULIC HORSEPOWER ORDERED \_\_\_\_\_

CUSTOMER OR HIS AGENT WARRANTS THE WELL IS IN PROPER CONDITION TO RECEIVE THE PRODUCTS, SUPPLIES, MATERIALS AND SERVICES.

As consideration, the above named Customer agrees THIS CONTRACT MUST BE SIGNED BEFORE WORK IS COMMENCED

- a) To pay Halliburton in accord with the rates and terms stated in Halliburton's current price list. Invoices are payable NET by the 20th of the following month after date of invoice.
b) To defend, indemnify, release and hold harmless Halliburton, its divisions, subsidiaries, parent and affiliated companies and the officers, directors, employees, agents and servants of all of them from and against any claims, liability, expenses, attorneys fees and costs of defense to the extent permitted by law.

The defense, indemnity, release and hold harmless obligations of Customer provided for in this Section b) and Section c) below shall apply to claims of liability even if caused or contributed to by Halliburton's negligence, active liability, or the unreasonableness of any vessel owned, operated, or furnished by Halliburton or any defect in the products, supplies, materials, or equipment of Halliburton...

- c) That because of the uncertainty of variable well conditions and the necessity of relying on facts and supporting services furnished by others, Halliburton does not warrant the effectiveness of the products, supplies or other results of any treatment or service, nor the accuracy of any chart interpretation, research analysis, log interpretation or other data furnished by Halliburton...
d) That Halliburton warrants only title to the products, supplies and materials and that the same are free from defects in workmanship or materials. THERE ARE NO WARRANTIES, EXPRESS OR IMPLIED, OF MERCHANTABILITY, FITNESS OR OTHERWISE, WHICH EXTEND BEYOND THOSE STATED IN THE IMMEDIATELY PRECEDING SENTENCE.
e) That Customer shall, at its risk and expense, be liable to recover any Halliburton equipment, tools or instruments which are lost in the well and if such equipment, tools or instruments are not recovered Customer shall pay Halliburton the replacement cost...
f) To waive the provisions of the Deceptive Trade Practices - Consumer Protection Act, to the extent permitted by law.
g) That this contract shall be governed by the law of the state where services are performed or materials are furnished.
h) That Halliburton shall not be bound by any changes or modifications in this contract, except where such change or modification is made in writing by a duly authorized executive officer of Halliburton.

I HAVE READ AND UNDERSTAND THIS CONTRACT AND REPRESENT THAT I AM AUTHORIZED TO SIGN IT IN THE NAME OF CUSTOMER'S AGENT

SIGNED \_\_\_\_\_ CUSTOMER

DATE 11-20-91

TIME 12:30 AM P.M.

We certify that the Fair Labor Standards Act of 1938, as amended, has been complied with in the production of goods and/or with respect to services furnished under this contract.

CUSTOMER