

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

Operator: License # 6039

Name: L. D. Drilling, Inc.

Address R.R. 1 Box 183 B

City/State/Zip Great Bend, Kansas 67530

Purchaser: plugged

Operator Contact Person: L. D. Davis

Phone (316) 793-3051

Contractor: Name: L. D. Drilling, Inc.

License: 6039

Wellsite Geologist: Wash down

Designate Type of Completion
 New Well Re-Entry Workover

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

If Workover/Reentry: Old Well Info as follows:

Operator: L. D. Davis

Well Name: Siefkes #1

Comp. Date 2-13-78 Old Total Depth 3646

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

11-27-96 12-01-96 Plugged
12-16-96
Spud Date OF Date Reached TD Completion Date

REENTRY

API NO. 15- 185-207970001 **ORIGINAL**

County STAFFORD

SE NE NE Sec. 27 Twp. 21 Rge. 12 X ^E/_W

990 Feet from SW (circle one) Line of Section

330 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 SIEFKES Well # 3 OWWD

Field Name Max

Producing Formation Arbuckle

Elevation: Ground 1837 KB 1842

Total Depth 3695 PBTD _____

Amount of Surface Pipe Set and Cemented at 285' 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 D&A 97 8-22-97
(Data must be collected from the Reserve Pit)
UNSUCCESSFUL REENTRY

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used _____

Location of fluid disposal if hauled offsite: _____

Operator Name 4-16-1999

Lease Name _____ License No. _____

Quarter Sec. Twp. Rng. E/W

County _____ Docket No. 27

RECEIVED
KANSAS OGP
1997/PR116
A 10-27

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, 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 Rashell Patten

Title Sec./Treas Date 4-10-97

Subscribed and sworn to before me this 10th day of April, 19 97.

Notary Public Rashell Patten

Date Commission Expires 2-2-99

K.C.C. OFFICE USE ONLY		
F	<input checked="" type="checkbox"/>	Letter of Confidentiality Attached
C	<input checked="" type="checkbox"/>	Wireline Log Received
C	<input type="checkbox"/>	Geologist Report Received
Distribution		
<input checked="" type="checkbox"/>	KCC	<input type="checkbox"/> SWD/Rep
<input type="checkbox"/>	KGS	<input type="checkbox"/> Plug
<input type="checkbox"/>		<input type="checkbox"/> NGPA
<input type="checkbox"/>		<input type="checkbox"/> Other
(Specify)		

NOTARY PUBLIC - State of Kansas
RASHELL PATTEN
My Appt. Exp. 2-2-99

Operator Name L. D. Drilling, Inc. Lease Name Siefkes Well # 3 OWWD
 Sec. 27 Twp. 21 Rge. 12 County Stafford
 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 (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log Formation (Top), Depth and Datums	<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	<u>WASH DOWN</u>	
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
List All E.Logs Run: Guard Sidewall Neutron			

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 in-hole		8 5/8"	28#	285'		225 **w	as already in hole
production	7 7/8"	5 1/2"	14#	3694'	40/60 poz	150	2% gel, .75 CFR3, 5# gilsonite per sk

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
		Amount	Kind of Material Used	
2	3602-3606, 3648-54, 3619-23, 3630-36	750 gal 28% FE 750 gal 15% FE		
2	3508-19, 3482-96, 3436-44, 3352-56	400 Gal. 28% FE, 350 Gal. FE 1900 Gal. NE 15%		15%

TUBING RECORD		Size Dry Hole	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" 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 Bbls. no production	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity	

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

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled NON COMMERCIAL

Production Interval Other (Specify) _____

15-185-20797-0001



HALLIBURTON

HALLIBURTON ENERGY SERVICES

HAL-1906-P

CHARGE TO: **L. D. DRILLING**

ADDRESS:

CITY, STATE, ZIP CODE:

CUSTOMER COPY

TICKET

No.

104744 - 2

25

PAGE 1 OF 2

RECEIVED KANSAS 0000 0000

1. SERVICE LOCATIONS WELL #3 25555	WELL/PROJECT NO. #3 OWWD	LEASE SIEFKES	COUNTY/PARISH STAFFORD, KS.	STATE KS.	CITY/OFFSHORE LOCATION	DATE 12-1-96	OWNER SHINE
2. TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	NITROGEN JOB? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	CONTRACTOR CO. TOOLS	RIG NAME/NO.	SHIPPED VIA R.T.	DELIVERED TO WELL SITE	ORDER NO.	
3. WELL TYPE 01	WELL CATEGORY 01	JOB PURPOSE 035 UNIT PROD. CSO.	WELL PERMIT NO.	WELL LOCATION CHAND 27-215-12W			
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS API # 15185207970001						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
000-117		1			MILEAGE 1 UNIT R.T.	88		miles		2.99	263.12
001-016		1			PUMP CHANGE	6		hrs.	3693	16.17	1617.00
030-016		1			TOP PLUG 5W ALUM.	1		EA	5 1/2 in.	60.00	60.00
018-315		1			MUD FLUSH	500		gal		65	325.00
12H	825.205	1			GUIDE SHOE	1		EA	5 1/2 in.	121.00	121.00
24H	815.19251	1			INSERT FLOAT VALVE	1		EA	5 1/2 in.	131.00	131.00
27	815.19313	1			FILL-UP UNIT 1.25 in.	1		EA	5 1/2 in.	69.00	69.00
40	806.60022	1			CENTRALIZER	4		EA	5 1/2 in.	60.00	240.00

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: **12-1-96** TIME SIGNED: **0115**

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	SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL
TYPE LOCK	DEPTH				2826.12
BEAN SIZE	SPACERS				FROM CONTINUATION PAGE 1 2560.07
TYPE OF EQUALIZING SUB.	CASING PRESSURE				
TUBING SIZE	TUBING PRESSURE	WELL DEPTH			
TREE CONNECTION	TYPE VALVE				
					SUB-TOTAL APPLICABLE TAXES WILL BE ADDED ON INVOICE
					5386.19

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) PAUL ODELL	CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE) <i>[Signature]</i>	HALLIBURTON OPERATOR/ENGINEER KEVIN J. GORDLEY 08500	EMP #	HALLIBURTON APPROVAL <i>[Signature]</i>
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TERMS AND CONDITIONS

(12951)

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 not recovered or is irreparable, Customer shall pay the replacement cost, unless such loss is caused by Halliburton's sole negligence. If a radioactive source becomes lost or lodged in the well, this agreement will constitute Customer's written agreement under 10 CFR Sec. 39.15 (a) that Customer shall be responsible for meeting all requirements of 10 CFR Sec. 39.15 and any other applicable laws or regulations concerning retrieval, monitoring, decontamination and abandonment, and Customer shall permit Halliburton to observe the recovery or abandonment efforts, all without risk or expense 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.



TICKET CONTINUATION CUSTOMER COPY

TICKET No. 106744

HALLIBURTON ENERGY SERVICES

CUSTOMER L D DRILLING	WELL SEIFKES OWWO	DATE 11-30-96	PAGE 2	OF 2
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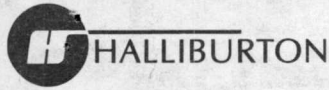
FORM 1911 R-10

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOG	ACCT	DF							
504-136		1			40/60 POZMIX W2% gel	100	SK			8.14	814.00
509-968	516.00158	1			SALT BLENDED 18%	900	LB			15	135.00
507-153	516.00161	1			CFR-5 BLENDED .75%	64	LB			4.85	310.40
LOADED ON TRUCK #52530-FRONT											
504-136		1			40/60 POZMIX W2% GEL	50	SK			8.14	407.00
508-291	516.00337	1			GILSONITE BLENDED 5%	250	LB			0.40	100.00
509-968	516.00158	1			SALT BLENDED 18%	450	LB			15	67.50
507-153	516.00161	1			CFR-3 BLENDED .75%	32	LB			4.85	155.20
LOADED ON TRUCK #52530-BACK											
500-207		1			SERVICE CHARGE	CUBIC FEET 175				1.35	236.25
500-306		1			MILEAGE CHARGE	TOTAL WEIGHT 14,490	LOADED MILES 44	TON MILES 318.78		1.05	334.72

ORIGINAL

No. B 338334

CONTINUATION TOTAL 2560.07



JOB SUMMARY

HALLIBURTON DIVISION MED CONT.
 HALLIBURTON LOCATION PLATT, KS.

BILLED ON TICKET NO. 104744

WELL DATA

FIELD _____ SEC. 27 TWP. 21S RNG. 12W 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	U	14	5 1/2	KB	3693	
LINER						
TUBING						
OPEN HOLE				3693	3694	SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

JOB DATA

CALLER OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE <u>11-30</u>	DATE <u>11-30</u>	DATE <u>12-1</u>	DATE <u>12-1</u>
TIME <u>1630</u>	TIME <u>1830</u>	TIME <u>0030</u>	TIME <u>0200</u>

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
FLOAT COLLAR <u>INSERT FLOAT</u>	<u>1</u>	<u>HOWCO</u>
FLOAT SHOE <u>FILL-UP UNIT</u>	<u>1</u>	
GUIDE SHOE	<u>1</u>	
CENTRALIZERS	<u>4</u>	
BOTTOM PLUG		
TOP PLUG	<u>1</u>	
HEAD <u>MINI-FOLD</u>	<u>1</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 500 gal. MUD FLUSH

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
ORIGINAL		

DEPARTMENT CEMENT
 DESCRIPTION OF JOB CEMENT 5 1/2 PROD. CASING.

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

CUSTOMER REPRESENTATIVE **X**

HALLIBURTON OPERATOR K. GORDLEY COPIES REQUESTED _____

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
	<u>100</u>	<u>40-60 P02</u>		<u>B</u>	<u>2% GCL, 18% SMT, .75% CER-3</u>	<u>1.34</u>	<u>14.38</u>
	<u>50</u>	<u>40-60 P02</u>		<u>B</u>	<u>2% GCL, 18% SMT, .75% CER-3, 5 1/2 BK GELSONITE</u>	<u>1.44</u>	<u>14.60</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 11-60 REASON INSERT FLOAT

PRESLUSH: BBL.-GAL. 12 TYPE MUD FLUSH
 LOAD & BKDN: BBL.-GAL. _____ PAD: BBL.-GAL. _____
 TREATMENT: BBL.-GAL. _____ DISPL. BBL.-GAL. 89.9
 CEMENT SLURRY: BBL.-GAL. 23.8 + 12.8 = 36.6
 TOTAL VOLUME: BBL.-GAL. _____

REMARKS

15 SCS LEAD CEMENT FOR PLUGGING RAT HOLE

CUSTOMER: L. D. DRILLING
 LEASE: SIERLES
 WELL NO.: 030000
 JOB TYPE: CMT. PROD. CSC.
 DATE: 12-1-96

JOB LOG HAL-2013-C

CUSTOMER L.D. DRILLING #30WWD	WELL NO. #30WWD	LEASE SIEFRES	JOB TYPE CMT. PROD. CSG.	TICKET NO. 104744
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CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
1	1630							CALLED OUT 11-30-96
	1830							ON LOCATION w/ TRUCKS 11-30-96
								REC LAY DOWN D.P.
	2200							RUN 3698' 5 1/2" 14" USED CASING.
								TD-3694' SET 1' OFF BOTTOM: 3693'
								RUN GUIDE SHOE, INSERT FLOAT
								IN 1 1/2" COLLAR. SHOE JOINT = 11.60'
								CENTRALIZER - 1, 4, 7, 10
								CHASING ON BOTTOM, DROP BALL,
								BREAK CIRC. WITH MUD PUMP.
								HOOK UP HOWCO TO CHASING.
	0030	6	12			350		PUMP 12 BBL MUDFLUSH
		6	3			350		PUMP 3 BBL H ₂ O SPACER
		6	0			300		START MIX CEMENT
								(85 SUS. LEAD CEMENT)
								(50 SUS. TRAIL CEMENT)
	0045	6	33			150		FINISH MIX CEMENT
								SHUT DOWN
								WASH OUT LINE & RELEASE PUC
	0048	8	0			100		START DISP.
		8	75			350		LIFTING CEMENT
		5	85			500		SLOW RATE
	0100	4	89.9			1000		PUC DOWN
								RELEASE PSI - FLOAT HELD
								15 SUS. LEAD CEMENT → PUC RAT HOLE
								WASH UP - PUC UP
	0200							JOB COMPLETE
								ORIGINAL
								THANKS. KEVIN
								PEDRICK
								COLLAUNCE