

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

CONFIDENTIAL

API NO. 15- 097-21358-0000
County Kiowa
80'S & 10'W
C - NW - NE - SW Soc. 13 Twp. 28S Rge. 19 X E

ORIGINAL

Operator: License # 5118
Name: TGT Petroleum Corp.
Address 155 N. Market
Suite 820
City/State/Zip Wichita, Ks. 67202

410' Feet from (SW) (circle one) Line of Section
1640' Feet from (E) (circle one) Line of Section

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

Purchaser: _____
Operator Contact Person: B. Lynn Herrington

Lease Name Pauly Well # 1
Field Name Johansen

Phone (316) 262-6489
Contractor: Name: Brandt Drilling Co.

Producing Formation None Yet

License: 5840
Wellsite Geologist: Ernie Morrison

Elevation: Ground 2233 KB 2244

Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD SOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

Total Depth 4910' PBDT _____

Amount of Surface Pipe Set and Cemented at 498' Feet

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

Multiple Stage Cementing Collar Used? _____ Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

foot depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan ALT 1 & H 7-8-94
(Data must be collected from the Reserve Ppt)

Operator: _____

Chloride content _____ ppm Fluid volume _____ bbls

Well Name: _____

Deaerating method used _____

Comp. Date _____

Location of fluid disposal if hauled offsite: KCC

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

Operator Name _____

Lease No. _____

Quarter _____ Soc. _____ Twp. _____ S Rng. _____ E/W

Docket No. _____

12/11/93 12/30/93 Delay Completion Date
Spud Date Date Reached TD Completion Date

RELEASED

MAY 6 1996

FROM CONFIDENTIAL

RECEIVED
STATE CORPORATION COMMISSION
APR 04 1994

CONFIDENTIAL

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 B. Lynn Herrington
Title Executive Vice-President Date 4/1/94

Subscribed and sworn to before me this 1st day of April, 1994.

Notary Public Judith K. Moser

Date Commission Expires May 17, 1997

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

JUDITH K. MOSER
NOTARY PUBLIC
STATE OF KANSAS
My Appl. Exp. 5-12-97

Operator Name TGT Petroleum Corp. Lease Name Pauly Well # 1
 Sec. 13 28S 19 East
 West County Kiowa

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input checked="" type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Anhydrite	1175	+1069
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Topeka	3727	-1483
List All E.Logs Run: <u>Comp. Den. Neu. FF & Dual Lat.</u>		Heebner	4080	-1836
		Brn Lime	4241	-1997
		Lansing	4250	-2006
		B/KC	4646	-2402
		Cherokee	4774	-2530
		Mississippi	4838	-2594
		TD	4910	-2666

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"	24#	498'	Halco Lt 60/40 Poz	175	2% cc
Production	7 7/8"	5 1/2"	14#	4898'	Halco Lt 50/50, Poz	85	15# Gil
						170	2% gel, 10% salt 5% CFR3

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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	Depth

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

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

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)

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

Production Interval _____

ORIGINAL

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

API NO. 15- 097-213580001
County Kiowa
80'S & 10' W
C NW-NE SW Sec. 13 Twp. 28S Rge. 19 X E

Operator: License # 5118

CONFIDENTIAL

Name: TGT Petroleum Corp.

Address 155 N. Market

Suite 820

City/State/Zip Wichita, Ks. 67202

Purchaser: NCRA

Operator Contact Person: B. Lynn Herrington

Phone (316) 262-6489

Contractor: Name: Ludwick Well Service

License: 8234

Wellsite Geologist: _____

Designate Type of Completion
 New Well Re-Entry Workover

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

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

Operator: TGT Petroleum Corp.

Well Name: Pauly #1

WAS TA'D
Comp. Date NA Old Total Depth 4910'

Deepening Re-perf; Conv. to Inj/SWD
 Plug Back 4620' PBDT
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

9/20/94 10/1/94
Date OF START Date Reached TD Completion Date OF
OF WORKOVER WORKOVER

2230' Feet from X (circle one) Line of Section
1640' Feet from U (circle one) Line of Section

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

Lease Name Pauly Well # 1

Field Name Johansen

Producing Formation Lansing

Elevation: Ground 2233' KB 2244'

Total Depth 4910' PBDT 4867'

Amount of Surface Pipe Set and Cemented at 498' 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 cat.

Drilling Fluid Management Plan REWORK JH 11-22-95
(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 RELEASED NCRA

Lease Name MAR 4 1996 JAN 1 1996

Quarter Sec. _____ Docket No. _____

FROM CONFIDENTIAL CONFIDENTIAL E/V

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 reports shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugs and 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 B. Lynn Herrington
Title Executive Vice-President Date 1-12-95

Subscribed and sworn to before me this 12th day of January, 19 95.

Notary Public Judith K. Moser
Date Commission Expires May 17, 1997

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

JUDITH K. MOSER
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 5-17-97

Operator Name TGT Petroleum Corp.

Lease Name Pauly

Well # 1

Sec. 13 Twp. 28S Rge. 19

East

County Kiowa

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.)

Log Formation (Top), Depth and Datum Sample

Name Top Datum

List All E.Logs Run:

CASING RECORD

New Used

Report all strings set-conductor, surface, intermediates, 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

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
Four	4490'-94'	200 gal. 10% NE acid	
	Bridge plug @ 4620'	500 gal. 15% dbl. str. FE acid & 20 hbl Lansing oil	
	4836'-40'	Frac/w/3300# 20/40 sand, 3800# 12/40 sand & 11,000 gal gelled water	
		250 gal 10% FE acid	

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2"	4603'		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumed Production, SWD or Inj. 12/30/94 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Water	Bbls.	Gas-Oil Ratio	Gravity
		65		20		55	308-1	42°

Disposition of Gas:

METHOD OF COMPLETION

Vented Sold Used on Lease
 (If vented, submit ACO-18.)

Open Hole Perf. Dually comp. Commingled
 Other (Specify)

Production Interval 4490-94

RELEASED

CONFIDENTIAL

MAY 6 1996

PAULY #1 API #15-097-21358
80'S & 10'W C NW NE SW Sec. 13-28S-19W
Kiowa County, Ks.

FROM CONFIDENTIAL

DRILL STEM TESTS

ORIGINAL

DST #1 - 4490'-4512' 60-60-60-60 GTS in 4 min. Rec. 1800' gassy oil & 120' salt water. IF 164-482, FF 472-616. ISIP 674, FSIP 674.

DST #2 - 4785'-4818' 60-60-60-60 Strong blow both opens. Rec. 1800' gas in pipe, 75' GCM, & 75' O&GCM. IF 48-77, FF 67-77. ISIP 289, FSIP 125.

DST #3 - Misrun.

DST #4 - Misrun.

DST #5 - 4767'-4843' 60-60-60-60 Weak blow. Rec. 330' mud. IF 221-221, FF 221-221. ISIP 433, FSIP 404.

DST #6 - 4842'-4848' 60-60-60-60 GTS in 15 min. Rec. 60' GCM, 60' thin GCM & 60' GCWM. IF 29-59, FF 48-96. ISIP 1468, FSIP 1411.

KCC

APR 1

CONFIDENTIAL

RECEIVED
STATE CORPORATION COMMISSION
APR 04 1994
CONSERVATION DIVISION
Wichita, Kansas



CHARGE TO:
T.G.T. Petroleum Inc
 ADDRESS
 CITY, STATE, ZIP CODE

COPY

TICKET

No. **568245 - 7**

PAGE **1** OF **2**

FORM 1906 R-12

SERVICE LOCATIONS 1. Hays, Ks 25525	WELL/PROJECT NO. 1	LEASE Pauly	COUNTY/PARISH Kiowa	STATE Ks	CITY/OFFSHORE LOCATION Greensburg, Ks	DATE 12-11-93	OWNER JGT
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE	NITROGEN JOB? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	CONTRACTOR	RIG NAME/NO.	SHIPPED VIA Slits	DELIVERED TO	ORDER NO.
3.	<input type="checkbox"/> SALES	WELL TYPE OR	WELL CATEGORY 01	JOB PURPOSE 010	WELLSITE	WELL PERMIT NO.	WELL LOCATION Sec 13-28-19
4.	REFERRAL LOCATION	INVOICE INSTRUCTIONS					

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LOC	ACCT	DF			UM	UM	PRICE		
001-117						MILEAGE	45	Mi.	2.75		123.75
001-016						Pump Service	501	ft	825.00		825.00
030-503	401, 4203					Top Plug	1	EA	85.00		95.00
40	807, 93059					Centralizer	2	EA	72.00		144.00
597	825, 1269					Baffle-plate	1	EA	45.00		45.00

KCC
 APR 1
 CONFIDENTIAL

ORIGINAL

RELEASED
 MAY 6 1994
 FROM CONFIDENTIAL

RECEIVED
 STATE CORPORATION COMMISSION
 JUL 08 1994
 CONSERVATION DIVISION
 Wichita, Kansas

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.

CUSTOMER OR CUSTOMER'S AGENT SIGNATURE
X [Signature]

DATE SIGNED **12-11-93** TIME SIGNED A.M. P.M.

TUBING SIZE _____ TUBING PRESSURE _____ WELL DEPTH _____

TREE CONNECTION _____ TYPE VALVE _____

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 _____	OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				
BEAN SIZE _____ SPACERS _____	WE UNDERSTOOD AND MET YOUR NEEDS?				SUB-TOTAL APPLICABLE TAXES WILL BE ADDED ON INVOICE
TYPE OF EQUALIZING SUB. _____ CASING PRESSURE _____	OUR SERVICE WAS PERFORMED WITHOUT DELAY?				
	WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				
	ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO				
	<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				

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) **X [Signature]** CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE) **[Signature]** HALLIBURTON OPERATOR/ENGINEER **B. Palmberg 41489** EMP # _____ HALLIBURTON APPROVAL _____

WELL DATA

FIELD _____ SEC 13 TWP. 28 RNG. 19 COUNTY Knowe 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	N	24	8 5/8	10	501	
LINER						
TUBING						
OPEN HOLE			12 1/4			SHO" 9/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

JOB DATA

CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE 12-11	DATE 12-11	DATE 12-11	DATE 12-11
TIME 0200	TIME 0520	TIME 1215	TIME 1350

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
FLOAT COLLAR		
FLOAT SHOE		
GUIDE SHOE		
CENTRALIZERS 5-9 8 5/8"	2	Howo
BOTTOM PLUG		
TOP PLUG 1-11 8 5/8"	1	Howo
HEAD		
PACKER		
OTHER Baffle Plate 8 5/8"	1	Howo

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
G. Palmberg 41489	40529	HAYS
D. Ash 61609		
A. Gabel 88686	51143 7612 3703	HAYS

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 _____

RELEASED
 MAY 6 1996
 FROM CONFIDENTIAL

DEPARTMENT CEMENT
 DESCRIPTION OF JOB Cement Surface Casing

ORIGINAL

JOB DONE THRU: TUBING CASING ANNULUS TBG. ANN.
 CUSTOMER REPRESENTATIVE X. Walter Zimmerman
 HALLIBURTON OPERATOR G. Palmberg COPIES REQUESTED _____

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
	175	HLC Standard	B	24%CC	14% Floccle KCC	1.54	13.6
	100	40/60 Pozmix A'	B	27%GCL	3%CC	1.29	14.1

APR 1

CONFIDENTIAL

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 38 REASON Shoe Joint

SUMMARY

VOLUMES
 PRESFLUSH: BBL. GAL. _____ TYPE _____
 LOAD & BKDN: BBL. GAL. _____ PAD: BBL. GAL. _____
 TREATMENT: BBL. GAL. _____ DISPL: BBL. GAL. 29.5
 CEMENT SLURRY: BBL. GAL. _____
 TOTAL VOLUME: BBL. GAL. 300.5

REMARKS
SEE Job Log
Thankyou,
CEMENT CIRCULATED
Lead, Due Follow

AMER T. Petroleum Inc. LEASE Partially
 WELL NO. 1
 JOB TYPE Surface Csg
 DATE 12-11-93

DATE
 12-11-93

JOB LOG FORM 2013 R-4

 CUSTOMER: *T.G.T. Petrobranca* WELL NO.: *1* LEASE: *Paul...* JOB TYPE: *Surface Casing* TICKET NO.: *568245*

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS T. C.	PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
					TUBING	CASING	
	0800						Called out
	0820						On location
							Rig drilling @ 345
							Set up equipment
	0900						Start 8 7/8" 24" Csg in hole 498
							Baffle plate in 1st collar
							Centralizers on 1st & 3rd jt
	1200						Casing on bottom
							Rig up Plug container
	1210						Break Circulation w/ Rig pump
	1217	4					Start mixing cement
							175 sks HLC 2%CC 1/4" Flaccle
							100 sks 40lb foamix A 2% G 3%CC
	1223						Cement mixed
	1224						Release Plug
	1224						Start displacement
	1240						Plug down
							Close in @ well head
							Cement did circulate
							Wash up & Rock up
							Job completed
							APR 1
							CONFIDENTIAL
							Thank you
							Hair, Dave & Alan

 RELEASED
 MAY 6 1996

FROM CONFIDENTIAL

 ORIGINAL
 RECEIVED
 DEC 15 1993



CHARGE TO: TGT
 ADDRESS: 155 N Market # 920
 CITY, STATE, ZIP CODE: Wichita, KS 67202

COPY

TICKET

No. 509993-0

FORM 1906 R-12

PAGE 1 OF 1

1. SERVICE LOCATIONS Prairie	WELL/PROJECT NO. 1	LEASE Pauly	COUNTY/PARISH Kiowa	STATE KS	CITY/OFFSHORE LOCATION	DATE 12-31-93	OWNER Same
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	NITROGEN JOB? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	CONTRACTOR Brant	RIG NAME/NO.	SHIPPED VIA	DELIVERED TO Location	ORDER NO.
3.	WELL TYPE	WELL CATEGORY	JOB PURPOSE 035	WELL PERMIT NO. 097-21358	WELL LOCATION 13-29-19 Kiowa		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS 2.2						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF								
000-117		1			CONFIDENTIAL	MILEAGE	45	mi			2.75	123.75
001-016		1			CONFIDENTIAL	Pump	4916	ft				1635.00
018-317		1	KCO	APR 1	CONFIDENTIAL	Super flush	7	bk			100.00	700.00
26	947, 6318	1	KCO	APR 1	CONFIDENTIAL	Insert valve float shoe	1	log				350.00
27	815, 19313	1			CONFIDENTIAL	fill up	1	log				55.00
40	906, 60022	1			CONFIDENTIAL	centralizer	6	log			44.00	264.00
320	906, 70030	1			CONFIDENTIAL	Basket	1	log				110.00
593	801, 0374	1			CONFIDENTIAL	Latch Down Plate	1	log				205.00
594	801, 03743	1			CONFIDENTIAL	Baffle	1	log				114.00
019,241		1			CONFIDENTIAL	Rotating Head						185.00

RELEASED
 MAY 6 1996
 FROM CONFIDENTIAL
 ORIGINAL

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. CUSTOMER OR CUSTOMER'S AGENT SIGNATURE <i>X Walter Zimmerman</i> DATE SIGNED _____ TIME SIGNED _____ <input type="checkbox"/> A.M. <input type="checkbox"/> P.M. <input type="checkbox"/> do <input type="checkbox"/> do not require IPC (Instrument Protection). <input type="checkbox"/> 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 3809 75 FROM CONTINUATION PAGE(S) 3368 44 SUB-TOTAL APPLICABLE TAXES WILL BE ADDED ON INVOICE 7178 19
	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?			
	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) WALTER ZIMMERMAN	CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE) X	HALLIBURTON OPERATOR/ENGINEER M King 26416	EMP # 26416	HALLIBURTON APPROVAL
---	---	---	----------------	----------------------

JOB LOG WELL DATA

FIELD _____ SEC 13 TWP 28 RNG 19 COUNTY KLAWA STATE K

FORMATION NAME	TYPE	NEW USED	WEIGHT	SIZE	FROM	TO	MAXIMUM PSI ALLOWABLE
CASING				5 1/2	0	4916	
LINER							
TUBING							
OPEN HOLE							SHOTS/FT.
PERFORATIONS							
PERFORATIONS							
PERFORATIONS							

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 _____

JOB DATA

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
FLOAT COLLAR		
FLOAT SHOE		
GUIDE SHOE	1	Hawco
CENTRALIZERS	4	"
BOTTOM PLUG	1	"
TOP PLUG	1	"
HEAD	1	"
PACKER		
OTHER		

CALLER OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE 12-31 TIME 3:00	DATE 12-31 TIME 5:30	DATE 12-31 TIME 10:00	DATE 12-31 TIME 11:50

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
Krentzel 26004	111276	Pratt
Bigler C1690	52504	Pratt
GARNER G2723	4124 5621	Pratt

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 _____
 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 _____

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ORIGINAL

DEPARTMENT Cement
 DESCRIPTION OF JOB long string

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

CUSTOMER REPRESENTATIVE X. Water Zimmerman

HALLIBURTON OPERATOR M. K. [Signature] COPIES REQUESTED KCC

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
	95	HLC		B	15% Gilsonite	1.87	12.5
	170	50/50		C	2% total Cel 10% salt 1.5% C.F.R.		12.5

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PRESSURES IN PSI _____ SUMMARY _____ VOLUMES _____

CIRCULATING _____ DISPLACEMENT _____ PRESURUSH: BBL-GAL. 20-7 TYPE Salt - sup fl.
 BREAKDOWN _____ MAXIMUM _____ LOAD & BKDN: BBL-GAL. 10 3/4 PAD: BBL-GAL. _____
 AVERAGE _____ FRACTURE GRADIENT _____ TREATMENT: BBL-GAL. _____ DISPL: BBL-GAL. 117.4
 SHUT-IN: INSTANT _____ 5-MIN. _____ CEMENT SLURRY: BBL-GAL. 66.4
 HYDRAULIC HORSEPOWER _____ TOTAL VOLUME: BBL-GAL. 227.11
 ORDERED _____ AVAILABLE _____ USED _____ RAMARKS _____
 AVERAGE RATES IN BPM _____
 TREATING _____ DISPL. _____ OVERALL _____
 CEMENT LEFT IN PIPE _____
 FEET _____ REASON _____

CUSTOMER		WELL NO.	LEASE	JOB TYPE	TICKET NO.			
TGT		1	Pauly	Long string	509993			
CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	5:30							on location
	7:00							Pump truck on location
	10:15							Break cir Rig
	10:37	5	0		1	700		Pump Salt flush
	10:41	5	20		1	700		Pump 5 BAI water
	10:42		2.5		1	650		Pump Super flush
	10:44		3.2		1	600		Pump 5 BAI water
	10:45		3.7		1	600		max cement Plug at hole
	10:45	5	0		6	600		Start Down pipe with cement
	11:00		66		1	200		Cement mix wash out line Pull pin on plug
	11:09	8	0		1	200		Start Disp KCC
	11:25		11.9		1	1500		Land Plug APR 1
	11:25		ORIGINAL			0		check float OK
								Wash up

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TICKET CONTINUATION

ORIGINAL

TICKET No. 509993

FORM 1911 R-8

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	WELL		DATE	PAGE	OF
		LOC	ACCT	DF			QTY.	U/M			
504-316		1				HALLIBURTON LIGHT CEMENT	85	SK	12-31-93	2	2
504-130		1				50/50 POZMIX CEMENT	170	SK			
509-968	516.00158	1				SALT BLENDED 10% W/170	850	LB			
507-153	516.00161	1				CFR-3 BLENDED 0.5% W/170	69	LB			
508-291	516.00337	1				GILSONITE BLENDED 15LB W/85	1,300	LB			
509-968	516.00158	1				SAT NOT MIXED	250	LB			
						UNIT 4124-5621 LOADED					
						FRONT-170 sx 50/50					
						REAR-- 85 sx LIGHT					
500-207		1				SERVICE CHARGE					
500-#306		1				MILEAGE CHARGE					
						TOTAL WEIGHT	24,163				
						LOADED MILES	45				
						CUBIC FEET		295			
						TON MILES		543.67			

KCC

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CONSERVATION DIVISION
-Winnita, Kansas-

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MAY 7 1994

CONTINUATION TOTAL

378.25

383.50

516.49

