



PO BOX 31 Russell, KS 67665

RECEIVED

DEC 08 2010

INVOICE

Invoice Number: 125442

Invoice Date: Nov 25, 2010

Page: 1

Voice: (785) 483-3887

Fax: (785) 483-5566

Bill To:

Lotus Operating Co., LLC
 Lotus Exploration Co.
 100 S. Main, STE 420
 Wichita, KS 67202

Federal Tax I.D.#: 20-5975804

Customer ID	Well Name# or Customer P.O.	Payment Terms	
Lotus	Koppitz #2	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-02	Medicine Lodge	Nov 25, 2010	12/25/10

Quantity	Item	Description	Unit Price	Amount
30.00	MAT	Class A Common	15.45	463.50
20.00	MAT	Pozmix	8.00	160.00
2.00	MAT	Gel	20.80	41.60
225.00	MAT	ASC Class A	18.60	4,185.00
1,125.00	MAT	Kol Seal	0.89	1,001.25
105.75	MAT	FL-160	13.30	1,406.48
58.25	MAT	Flo Seal	2.50	145.63
335.00	SER	Handling	2.40	804.00
20.00	SER	Mileage 335 sx @ .10 per sk per mi	33.50	670.00
1.00	SER	Production Casing	2,185.00	2,185.00
20.00	SER	Pump Truck Mileage	7.00	140.00
1.00	EQP	5.5 Top Rubber Plug	74.00	74.00
1.00	EQP	5.5 Basket	161.00	161.00
1.00	EQP	5.5 AFU Insert	112.00	112.00
1.00	EQP	5.5 Guide Shoe	100.80	100.80
5.00	EQP	5.5 Centralizer	32.20	161.00

ENTERED
 DEC 04 2010

GL# 9308
 DESC. Cement
 prod (sg w) 275 SX
 #2
 Koppitz

ALL PRICES ARE NET, PAYABLE 30 DAYS FOLLOWING DATE OF INVOICE. 1 1/2% CHARGED THEREAFTER. IF ACCOUNT IS CURRENT, TAKE DISCOUNT OF

\$ 2362.24

ONLY IF PAID ON OR BEFORE
 Dec 20, 2010

Subtotal	11,811.26
Sales Tax	584.89
Total Invoice Amount	12,396.15
Payment/Credit Applied	
TOTAL	12,396.15

-2362.24
 10,033.91

ALLIED CEMENTING CO., LLC. 040549

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Medicine Lodge KS

DATE <i>11/25/10</i>	SEC. <i>02</i>	TWP. <i>35s</i>	RANGE <i>12w</i>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH <i>3:15 Am</i>
LEASE <i>Koppitz</i>	WELL # <i>2</i>	LOCATION			COUNTY <i>Barber</i>	STATE <i>KS</i>	
OLD OR NEW (Circle one)							

CONTRACTOR *Maverick #*

TYPE OF JOB *Production Casing*

HOLE SIZE *7 7/8* T.D.

CASING SIZE *5 1/2* DEPTH *5266*

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX *1450* MINIMUM

MEAS. LINE SHOE JOINT *38*

CEMENT LEFT IN CSG. *38'*

OWNER *Lotus Oper.*

CEMENT

AMOUNT ORDERED *50sx60:40:4%gel #*
225sx Class "A" ASC + 5 #/gal seal + 1/4 #
Flo seal + .5% FG/60

PERFS.

DISPLACEMENT *127 1/2 Bbls Fresh H2O*

COMMON	<i>30 5x</i>	@	<i>15.45</i>	<i>463.50</i>
POZMIX	<i>20 5x</i>	@	<i>8.00</i>	<i>160.00</i>
GEL	<i>2 5x</i>	@	<i>20.80</i>	<i>41.60</i>
CHLORIDE		@		
ASC A	<i>225 5x</i>	@	<i>18.60</i>	<i>4185.00</i>
<i>Kolseal</i>	<i>1125 #</i>	@	<i>.89</i>	<i>1001.25</i>
<i>F1-160</i>	<i>105.75 #</i>	@	<i>13.50</i>	<i>1406.47</i>
<i>Flo seal</i>	<i>58.25 #</i>	@	<i>2.50</i>	<i>140.62</i>
		@		
		@		
		@		
		@		
HANDLING	<i>335</i>	@	<i>2.40</i>	<i>804.00</i>
MILEAGE	<i>335/10/20</i>			<i>670.00</i>

EQUIPMENT

PUMP TRUCK CEMENTER *D. Felio*

414-302 HELPER *R. Gilley*

BULK TRUCK

356-250 DRIVER *R. Romans*

BULK TRUCK

DRIVER

REMARKS:

Pipe on Bttm, Break Casing, Plug Rat & Mouse holes w/ 50sx60:40 cement, Mix 225sx tail cement, Stop Pump, Wash Pump & Lines, Release Plug, Start Digging w/ Fresh H2O, See Steady increase in Gift PSI, Slow Rate Bump Plug at 127 1/2 Bbls total Disp. Release PSI, Float Did Hold,

SERVICE

DEPTH OF JOB	<i>5266</i>			
PUMP TRUCK CHARGE			<i>2185.00</i>	
EXTRA FOOTAGE		@		
MILEAGE	<i>20</i>	@	<i>7.00</i>	<i>140.00</i>
MANIFOLD	<i>Head Rental</i>	@		
		@		
		@		

CHARGE TO: *Lotus Oper*

STREET

CITY STATE ZIP

TOTAL *2325.00*

PLUG & FLOAT EQUIPMENT

<i>1-TRP</i>	@	<i>74.00</i>
<i>1-Basket</i>	@	<i>161.00</i>
<i>1-AFP insert</i>	@	<i>112.00</i>
<i>1- Guide Shoe</i>	@	<i>100.80</i>
<i>5-centralizers</i>	@	<i>32.20</i>

TOTAL *608.80*

To Allied Cementing Co., LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

SALES TAX (If Any)

TOTAL CHARGES ~~2325.00~~

DISCOUNT _____ IF PAID IN 30 DAYS

PRINTED NAME *Robin Brown*

SIGNATURE *[Signature]*

~~2325.00~~