



WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SIOW
- Gas D&A ENHR SIGW
- OG GSW Temp. Abd.
- CM (Coal Bed Methane)
- Cathodic Other (Core, Expl., etc.): _____

If Workover/Re-entry: Old Well Info as follows:

Operator: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

- Deepening Re-perf. Conv. to ENHR Conv. to SWD
- Conv. to GSW
- Plug Back: _____ Plug Back Total Depth _____
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - _____

Spot Description: _____

_____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ 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

(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 #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Permit #: _____

AFFIDAVIT

I am the affiant and I hereby certify that 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.

Submitted Electronically

KCC Office Use ONLY

- Letter of Confidentiality Received
Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____



1055242

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems 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 test, along with final chart(s). Attach extra sheet if more space is needed. Attach complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
---	---

CASING RECORD <input 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

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
_____ Perforate _____ Protect Casing _____ Plug Back TD _____ Plug Off Zone				

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

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR. _____ Producing Method: Flowing Pumping Gas Lift Other *(Explain)* _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Gore Oil Company
Well Name	Ganoung B-1
Doc ID	1055242

All Electric Logs Run

Dual Induction Log
Dual Compensated Porosity Log
Microresistivity Log
Computer Processed Interpretation Log
Dual Receiver Cement Bond Log

Form	ACO1 - Well Completion
Operator	Gore Oil Company
Well Name	Ganoung B-1
Doc ID	1055242

Tops

Name	Top	Datum
Anhydrite	1393	+720
B/Anhydrite	1429	+684
Topeka	3022	-909
Heebner	3240	-1127
Toronto	3254	-1141
Lansing	3282	-1169
B/KC	3510	-1397
Conglomerate	3526	-1413
Arbuckle	3582	-1469

Form	ACO1 - Well Completion
Operator	Gore Oil Company
Well Name	Ganoung B-1
Doc ID	1055242

Perforations

Shots Per Foot	Perforation Record	Material Record	Depth
4	3339-3342		
4	3444-3448		
4	3462-3466		
4	3489-3492	250 gal 15% MCA	3543
4	3504-3507	250 gal 15% MCA	3510
4	3532-3534	1,000 gal 20% SGA	3532-3534
4	3550-3553	750 gal 15% MCA	3413
		1,500 gal 20% SGA	all zones

JOB LOG

SWIFT Services, Inc.

DATE 22 Nov 10 PAGE NO.

CUSTOMER GORE OIL

WELL NO.

LEASE GANONG B #1

JOB TYPE CEMENT PORT COLLAR

TICKET NO. 19858

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1240							ON LOCATION PORT COLLAR @ 1390
	1332	2 1/2			✓		250	OPEN PORT COLLAR TAKE INJ. RATE.
	1235	4 1/4			✓			MIX CEMENT
			28		✓		400	50 SX @ 11.2 PPG.
			39		✓		400	75 SX @ 11.4 PPG.
			12		✓			40 SX @ 13.5 PPG.
		3 1/2	4 1/2		✓		500	DISPLACE CEMENT
	1358							CLOSE PORT COLLAR
	1400						1000	PRESSURE UP HELD
	1405							RUN 5 JTS.
	1412	3	20		✓		300	REVERSE CEMENT OUT
	1425							WASH TRUCK RUN TUBING TO PLUG @ 2590'
	1447	3	30		✓		200	CIRCULATE SAND OFF PLUG.
								RACK TRUCK UP.
	1530							JOB COMPLETE.
								THANKS # 110
								JASON JEFF JOHN

ALLIED CEMENTING CO., LLC. 033928

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:
Russell Ks.

DATE <u>10-25-10</u>	SEG <u>32</u>	TWP <u>9</u>	RANGE <u>17</u>	CALLED OUT	ON LOCATION	JOB START <u>11:00 PM</u>	JOB FINISH <u>11:30 PM</u>
LEASE <u>GANOUNG</u>		WELL # <u>B-1</u>	LOCATION <u>PLAINVILLE 2E 3/4S 1/4 E17E</u>			COUNTY <u>ROOK'S</u>	STATE <u>KANSAS</u>
OLD OR <input checked="" type="radio"/> (Circle one)							

CONTRACTOR MAVERICK DRILLING RIG #108

TYPE OF JOB LONG SURFACE

HOLE SIZE 12 1/4 T.D. 307

CASING SIZE 8 5/8 New DEPTH 307

TUBING SIZE 23# CSG DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX 300# MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. 20'

PERFS.

DISPLACEMENT 18 1/4 BBL

OWNER

CEMENT

AMOUNT ORDERED 180 ex Comm.

240 GEL

390 CC

COMMON	<u>180</u>	@	<u>13.50</u>	<u>2430.00</u>
POZMIX		@		
GEL	<u>3</u>	@	<u>20.25</u>	<u>60.75</u>
CHLORIDE	<u>6</u>	@	<u>51.50</u>	<u>309.00</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>180</u>	@	<u>2.25</u>	<u>405.00</u>
MILEAGE	<u>110/16 mile</u>			<u>414.00</u>
TOTAL				<u>3618.75</u>

EQUIPMENT

PUMP TRUCK CEMENTER GLENN

398 HELPER RICHARD

BULK TRUCK

410 DRIVER ROY

BULK TRUCK

DRIVER

REMARKS:

Ran 7 new ITS 23# 8 5/8 CSG.

Set @ 307

mixed cement displaced 18 1/4 BBL

H₂O shot in @ 300#

Cement did circulate

to surface

HANK'S

CHARGE TO: GORE OIL Co.

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____ 991.00

EXTRA FOOTAGE @ _____

MILEAGE 23 @ 7.00 161.00

MANIFOLD @ _____

@ _____

@ _____

TOTAL 1152.00

PLUG & FLOAT EQUIPMENT

@ _____

@ _____

@ _____

@ _____

@ _____

TOTAL _____

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.

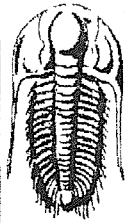
SALES TAX (If Any) _____

TOTAL CHARGES ~~_____~~

DISCOUNT ~~_____~~ IF PAID IN 30 DAYS

PRINTED NAME Mark Depman

SIGNATURE [Signature]



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

Gore
202 S St. Francis
PO Box 2757
Wichita, Ks 67202
ATTN: Don Ryder

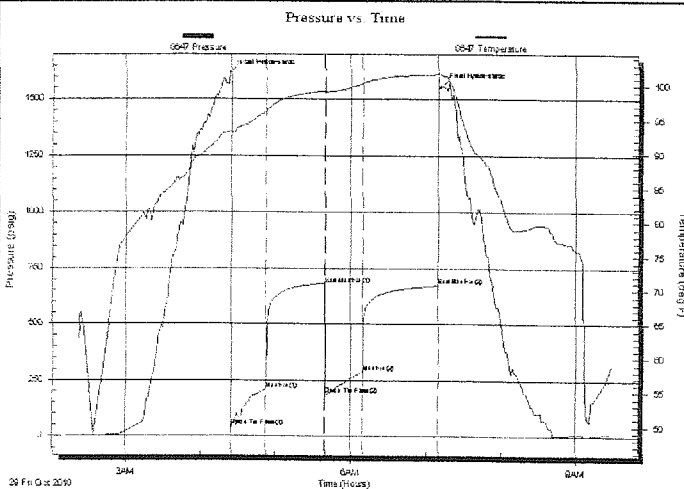
Ganoung B-1
32-9-17/Rooks
Job Ticket: 40320 DST#: 1
Test Start: 2010.10.29 @ 02:22:52

GENERAL INFORMATION:

Formation: LKC
Deviated: No Whipstock: ft (KB)
Time Tool Opened: 04:25:17
Time Test Ended: 09:27:46
Interval: 3268.00 ft (KB) To 3400.00 ft (KB) (TVD)
Total Depth: 3400.00 ft (KB) (TVD)
Hole Diameter: 7.88 inches Hole Condition:
Test Type: Conventional Bottom Hole
Tester: Brian Fairbank
Unit No: 41
Reference Elevations: 2113.00 ft (KB)
2105.00 ft (CF)
KB to GR/CF: 8.00 ft

Serial #: 8647 Inside
Press@RunDepth: 288.35 psig @ 3271.00 ft (KB) Capacity: 8000.00 psig
Start Date: 2010.10.29 End Date: 2010.10.29 Last Calib.: 2010.10.29
Start Time: 02:22:52 End Time: 09:27:46 Time On Btm: 2010.10.29 @ 04:24:17
Time Off Btm: 2010.10.29 @ 07:12:16

TEST COMMENT: IFF - BOB 5 min
ISI - no blow back
FFP - BOB 7 min
FSI - no blow back



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1617.00	93.41	Initial Hydro-static
1	43.48	92.89	Open To Flow (1)
29	208.84	96.31	Shut-In(1)
75	678.83	99.25	End Shut-In(1)
76	187.47	99.15	Open To Flow (2)
105	288.35	100.30	Shut-In(2)
165	672.16	101.65	End Shut-In(2)
168	1555.23	101.54	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
60.00	MW 95%W, 5%M	0.84
125.00	SGOCMW 35%G, 5%O, 50%W, 10%M	1.75
185.00	SGOCWM 30%G, 5%O, 25%W, 40%M	2.60
30.00	DRL MUD 100%	0.42
190.00	SGOCMW 45%G, 5O, 30%W, 20%M	2.67

Gas Rates

	Choke (Inches)	Pressure (psig)	Gas Rate (Mcf/d)

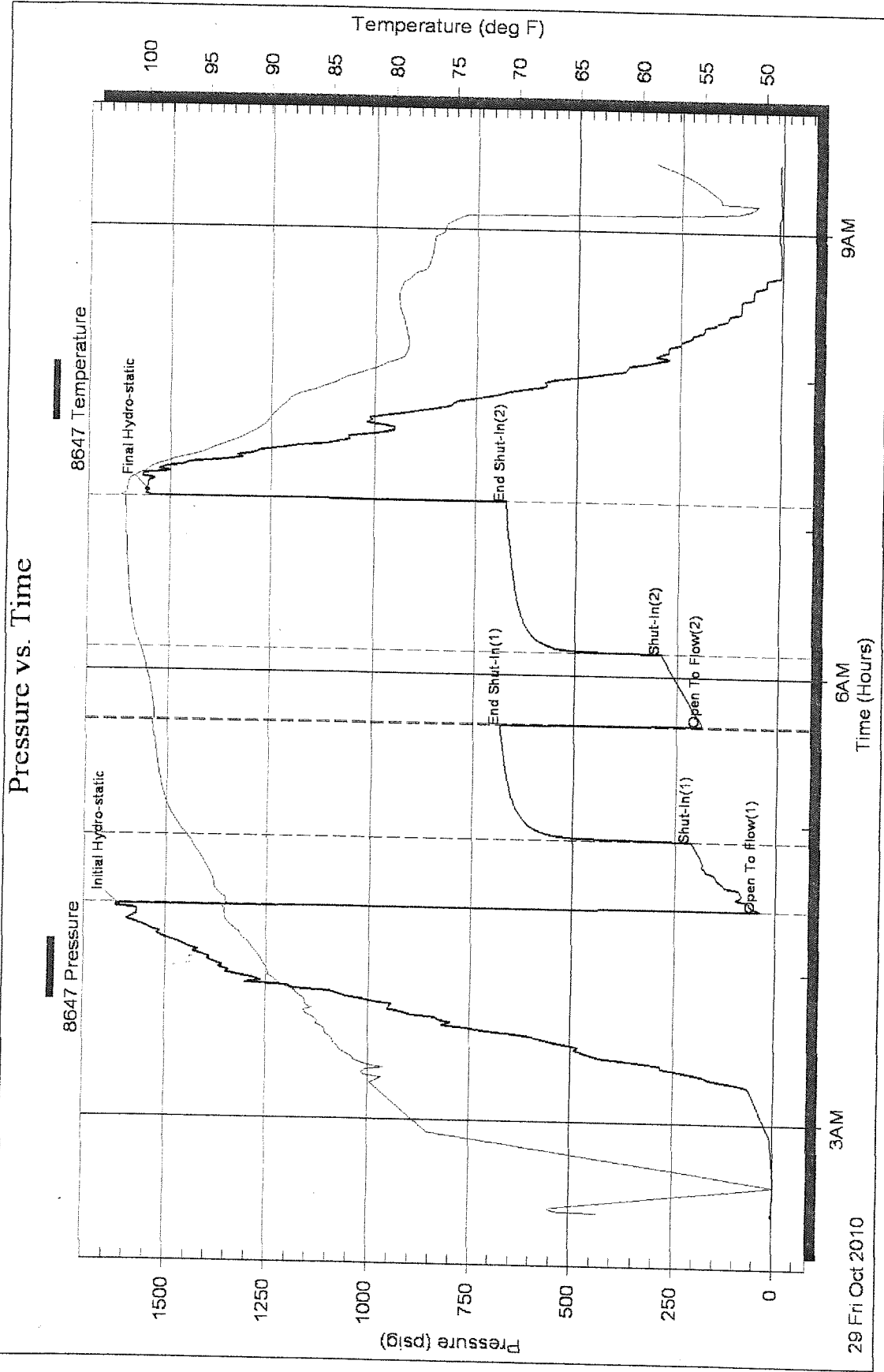
Serial #: 8647

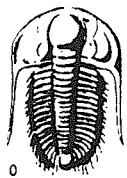
Inside Gore

32-9-17/Rooks

DST Test Number: 1

Pressure vs. Time





TRILOBITE TESTING INC.

P.O. Box 1733 • Hays, Kansas 67601

Test Ticket

NO. 040320

Well Name & No. Gardening B-1 Test No. 1 Date 10-29-16
 Type Core Elevation 2113 KB 2105 GL
 Address 202 S. St. Francis PO Box 2757 Wichita, KS 67202
 Operator / Geo. Don Ryder Rig Maverick 108
 Section 22 Twp. 9 Rge. 17 Co. Rooks State Ks

Interval Tested 3268 - 3400 Zone Tested LKC
 Length 132 Drill Pipe Run 3270 Mud Wt. 8.8
 True Depth 3263 Drill Collars Run — Vis 52
 Casing Depth 3264 Wt. Pipe Run — WL 80
 Depth 3400 Chlorides 1500 ppm System LCM

Description IFP- BOB 5 min
ISI- no blow back
FFP- BOB 7 min
FST- no blow back

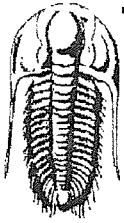
Feet of	%gas	%oil	%water	%mud
<u>30</u> Feet of <u>SGOC MW</u>	<u>45</u>	<u>5</u>	<u>30</u>	<u>20</u>
<u>30</u> Feet of <u>J.I. mud</u>				<u>100</u>
<u>45</u> Feet of <u>SGOC LUM</u>	<u>30</u>	<u>5</u>	<u>25</u>	<u>40</u>
<u>25</u> Feet of <u>SGOC MW</u>	<u>35</u>	<u>5</u>	<u>50</u>	<u>10</u>
<u>60</u> Feet of <u>MW</u>			<u>75</u>	<u>5</u>

S90 BHT 102 Gravity API RW .087 @ 56 °F Chlorides 25,000 ppm

Hydrostatic 1617 Test
 Initial Flow 44 Jars
 Final Flow 209 Safety Joint
 Shut-In 679 Circ Sub
 Initial Flow 188 Hourly Standby
 Final Flow 298 Mileage WRT
 Shut-In 672 Sampler
 Hydrostatic 1555 Straddle
 Shale Packer
 Extra Packer
 Extra Recorder
 Day Standby
 Accessibility

T-On Location 0135
 T-Started 0222
 T-Open 0425
 T-Pulled 0710
 T-Out 0929
 Comments _____
 Ruined Shale Packer
 Ruined Packer
 Extra Copies
 Sub Total _____
 Total _____
 MP/DST Disc't _____

Our Representative Boia Farbak
 Inc. shall not be liable for damaged of any kind of the property or personnel of the one for whom a test is made, or for any loss suffered or sustained, directly or indirectly, through the use of its statements or opinion concerning the results of any test, tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.



TRILOBITE
TESTING, INC

DRILL STEM TEST REPORT

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202 S St. Francis
PO Box 2757
Wichita, Ks 67202
ATTN: Don Ryder

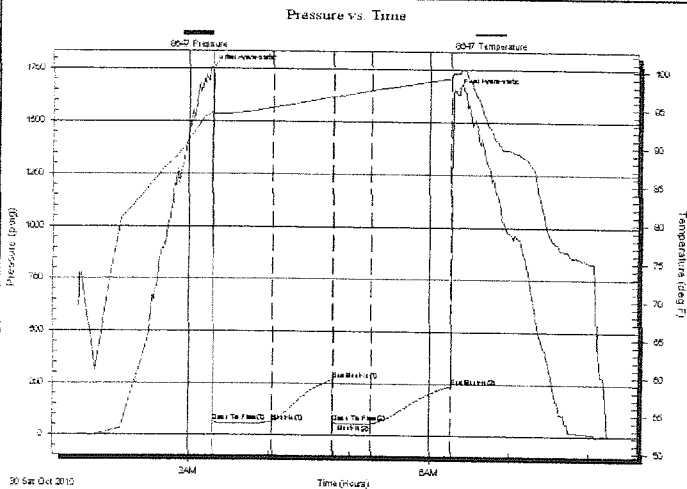
Ganoung B-1
32-9-17/Rooks
Job Ticket: 40321 DST#: 2
Test Start: 2010.10.30 @ 01:36:41

GENERAL INFORMATION:

Formation: **BKC**
Deviated: No Whipstock: ft (KB)
Time Tool Opened: 03:18:36
Time Test Ended: 08:17:05
Interval: **3426.00 ft (KB) To 3510.00 ft (KB) (TVD)**
Total Depth: 3510.00 ft (KB) (TVD)
Hole Diameter: 7.88 inches Hole Condition:
Test Type: Conventional Bottom Hole
Tester: Brian Fairbank
Unit No: 41
Reference Elevations: 2113.00 ft (KB)
2105.00 ft (CF)
KB to GR/CF: 8.00 ft

Serial #: 8647 Inside
Press@RunDepth: 54.69 psig @ 3434.00 ft (KB)
Start Date: 2010.10.30 End Date: 2010.10.30
Start Time: 01:36:41 End Time: 08:17:05
Capacity: 8000.00 psig
Last Calib.: 2010.10.30
Time On Btm: 2010.10.30 @ 03:16:36
Time Off Btm: 2010.10.30 @ 06:19:35

TEST COMMENT: IFF - weak blow throughout 1/4" - 3/4"
ISI - no blow back
FFP - no blow 22 min - sur blow
FSI - no blow back



PRESSURE SUMMARY

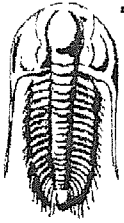
Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1751.75	94.56	Initial Hydro-static
2	63.63	94.34	Open To Flow (1)
46	63.93	95.18	Shut-In(1)
91	267.56	96.63	End Shut-In(1)
92	62.33	96.61	Open To Flow (2)
120	54.69	97.50	Shut-In(2)
180	240.73	99.11	End Shut-In(2)
183	1648.22	99.76	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
4.00	VSOCM 2% O, 98% M	0.06
1.00	FREE OIL TSTM	0.01

Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE
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DRILL STEM TEST REPORT

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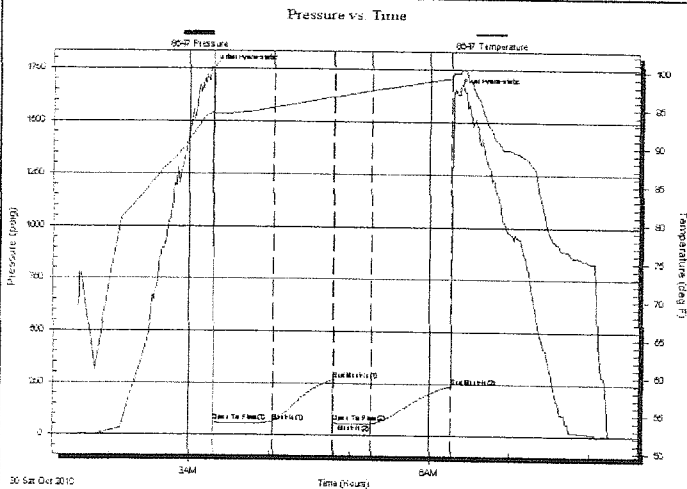
Ganoung B-1
32-9-17/Rooks
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Time Test Ended: 08:17:05
Interval: **3426.00 ft (KB) To 3510.00 ft (KB) (TVD)**
Total Depth: 3510.00 ft (KB) (TVD)
Hole Diameter: 7.88 inches Hole Condition:
Test Type: Conventional Bottom Hole
Tester: Brian Fairbank
Unit No: 41
Reference Elevations: 2113.00 ft (KB)
2105.00 ft (CF)
KB to GR/CF: 8.00 ft

Serial #: 8647 Inside
Press@RunDepth: 54.69 psig @ 3434.00 ft (KB) Capacity: 8000.00 psig
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91	267.56	96.63	End Shut-In(1)
92	62.33	96.61	Open To Flow (2)
120	54.69	97.50	Shut-In(2)
180	240.73	99.11	End Shut-In(2)
183	1648.22	99.76	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
4.00	VSOCM 2% O, 98% M	0.06
1.00	FREE OIL TSTM	0.01

Gas Rates

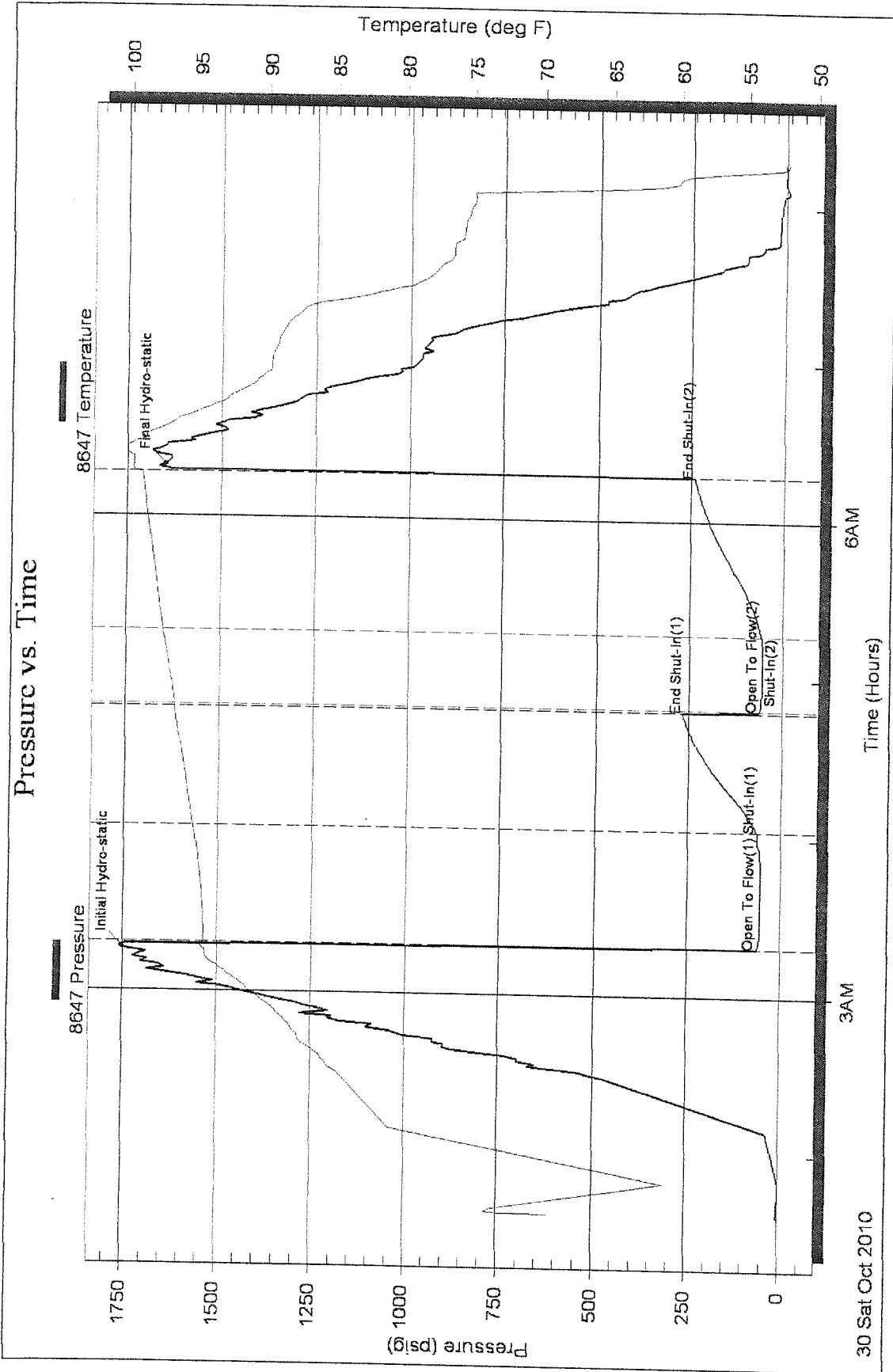
Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)

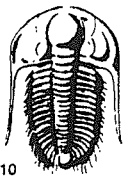
Serial #: 8647

Inside Gore

32-9-17/Rooks

DST Test Number: 2





TRILOBITE TESTING INC.

P.O. Box 1733 • Hays, Kansas 67601

Test Ticket

NO. 040321

Well Name & No. Gannong B-1 Test No. 2 Date 10-30-0
 Company Acere Elevation 2113 KB 2105 GL
 Address _____
 Co. Rep / Geo. Don Rider Rig Maverick 108
 Location: Sec. 32 Twp. 9 Rge. 17 Co. Rocky State KS

Interval Tested 3426-3510 Zone Tested BKC
 Anchor Length 84 Drill Pipe Run 3431 Mud Wt. 9.2
 Top Packer Depth 3421 Drill Collars Run _____ Vis 57
 Bottom Packer Depth 3426 Wt. Pipe Run _____ WL 8.8
 Total Depth 3510 Chlorides 5000 ppm System _____ LCM _____
 Blow Description ITFP- weak blow throughout 1/4" - 3/4"
LSI- no blow back
FFP- no blow 22 min sur blow
FST- no blow back

Rec	Feet of	%gas	TSTM	%oil	%water	%mud
<u>1</u>	<u>Free oil</u>					
<u>4</u>	<u>V30CM</u>		<u>2</u>		<u>98</u>	
Rec	Feet of	%gas	%oil	%water	%mud	
Rec	Feet of	%gas	%oil	%water	%mud	

Rec Total 5 BHT 99 Gravity TSTM API RW _____ @ _____ °F Chlorides _____ ppm

(A) Initial Hydrostatic <u>1752</u>	<input checked="" type="checkbox"/> Test	T-On Location <u>0053</u>
(B) First Initial Flow <u>64</u>	<input type="checkbox"/> Jars	T-Started <u>0136</u>
(C) First Final Flow <u>64</u>	<input checked="" type="checkbox"/> Safety Joint	T-Open <u>0318</u>
(D) Initial Shut-In <u>268</u>	<input type="checkbox"/> Circ Sub	T-Pulled <u>0618</u>
(E) Second Initial Flow <u>62</u>	<input type="checkbox"/> Hourly Standby	T-Out <u>0818</u>
(F) Second Final Flow <u>55</u>	<input checked="" type="checkbox"/> Mileage	Comments _____
(G) Final Shut-In <u>241</u>	<input type="checkbox"/> Sampler	
(H) Final Hydrostatic <u>1648</u>	<input type="checkbox"/> Straddle	<input type="checkbox"/> Ruined Shale Packer
Initial Open <u>45</u>	<input type="checkbox"/> Shale Packer	<input type="checkbox"/> Ruined Packer
Initial Shut-In <u>45</u>	<input type="checkbox"/> Extra Packer	<input type="checkbox"/> Extra Copies
Final Flow <u>30</u>	<input type="checkbox"/> Extra Recorder	Sub Total _____
Final Shut-In <u>60</u>	<input type="checkbox"/> Day Standby	Total _____
	<input type="checkbox"/> Accessibility	MP/DST Disc't _____
	Sub Total _____	

Approved By _____

Our Representative Brian Ferbo

Trilobite Testing Inc. shall not be liable for damaged of any kind of the property or personnel of the one for whom a test is made, or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statements or opinion concerning the results of any test, tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.