



KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

1062964

Form ACO-1

June 2009

Form Must Be Typed

Form must be Signed

All blanks must be Filled

**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: \_\_\_\_\_



1062964

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 <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span><br><i>(Attach Additional Sheets)</i><br><br>Samples Sent to Geological Survey <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span><br><br>Cores Taken <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span><br>Electric Log Run <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span><br>Electric Log Submitted Electronically <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span><br><i>(If no, Submit Copy)</i><br><br>List All E. Logs Run: | <div style="display: flex; justify-content: space-between;"> <span><input type="checkbox"/> Log</span> <span>Formation (Top), Depth and Datum</span> <span><input type="checkbox"/> Sample</span> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <span>Name</span> <span>Top</span> <span>Datum</span> </div> |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

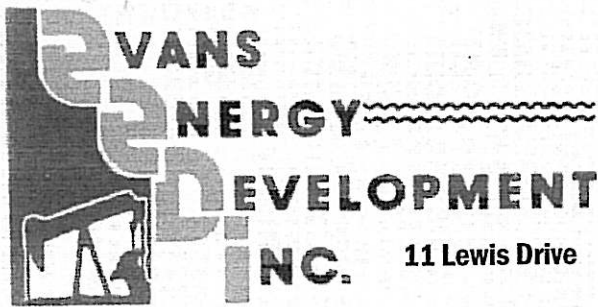
| CASING RECORD <span style="float: right;"><input type="checkbox"/> New <input type="checkbox"/> Used</span><br>Report all strings set-conductor, surface, intermediate, production, etc. |                   |                           |                   |               |                |              |                            |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|---------------------------|-------------------|---------------|----------------|--------------|----------------------------|
| 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<br>_____ Protect Casing<br>_____ Plug Back TD<br>_____ Plug Off Zone |                  |                |              |                            |
|                                                                                      |                  |                |              |                            |

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

|                                                 |             |           |                                                                                                                                                                                |               |                                                                                                        |
|-------------------------------------------------|-------------|-----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--------------------------------------------------------------------------------------------------------|
| TUBING RECORD:                                  |             | Size:     | Set At:                                                                                                                                                                        | Packer At:    | Liner Run: <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span> |
| Date of First, Resumed Production, SWD or ENHR. |             |           | Producing Method:<br><input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____ |               |                                                                                                        |
| Estimated Production Per 24 Hours               | Oil   Bbls. | Gas   Mcf | Water   Bbls.                                                                                                                                                                  | Gas-Oil Ratio | Gravity                                                                                                |

|                                                                                                                                                                          |                                                                                                                                                                                                                                                                                     |                                               |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|
| <b>DISPOSITION OF GAS:</b><br><input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease<br><i>(If vented, Submit ACO-18.)</i> | <b>METHOD OF COMPLETION:</b><br><input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled<br><i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i><br><input type="checkbox"/> Other <i>(Specify)</i> _____ | <b>PRODUCTION INTERVAL:</b><br>_____<br>_____ |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|



11 Lewis Drive

Paola, KS 66071

**Oil & Gas Well Drilling  
Water Wells  
Geo-Loop Installation**

Phone: 913-557-9083

Fax: 913-557-9084

**WELL LOG**

Altavista Energy, Inc.

Marjorie Crotts #I-4

API#15-031-22,674

December 15, 2010 - December 17, 2010

| <u>Thickness of Strata</u> | <u>Formation</u> | <u>Total</u>                |
|----------------------------|------------------|-----------------------------|
| 35                         | soil & clay      | 35                          |
| 5                          | gravel           | 40                          |
| 2                          | clay             | 42                          |
| 172                        | shale            | 214                         |
| 64                         | lime             | 278                         |
| 77                         | shale            | 355                         |
| 14                         | lime             | 369                         |
| 4                          | shale            | 373                         |
| 3                          | lime             | 376                         |
| 39                         | shale            | 415                         |
| 9                          | lime             | 424                         |
| 3                          | shale            | 427                         |
| 5                          | lime             | 432                         |
| 2                          | shale            | 434                         |
| 40                         | lime             | 474                         |
| 15                         | shale            | 489                         |
| 3                          | lime             | 492                         |
| 41                         | shale            | 533                         |
| 60                         | lime             | 593                         |
| 11                         | shale            | 604                         |
| 4                          | lime             | 608                         |
| 3                          | shale            | 611                         |
| 38                         | lime             | 649 base of the Kansas City |
| 157                        | shale            | 806                         |
| 4                          | lime             | 810                         |
| 13                         | shale            | 823                         |
| 8                          | lime             | 831                         |
| 2                          | shale            | 833                         |
| 7                          | lime             | 840                         |
| 25                         | shale            | 865                         |
| 3                          | lime             | 868                         |
| 22                         | shale            | 890                         |
| 10                         | lime             | 900                         |
| 16                         | shale            | 916                         |
| 9                          | lime             | 925                         |
| 11                         | shale            | 936                         |

|    |               |         |
|----|---------------|---------|
| 14 | lime          | 950     |
| 10 | shale         | 960     |
| 5  | lime          | 965     |
| 6  | shale         | 971     |
| 3  | lime          | 974     |
| 31 | shale         | 1005    |
| 1  | lime & shells | 1006    |
| 1  | shale         | 1007    |
| 1  | lime & shells | 1008    |
| 4  | broken sand   | 1012    |
| 3  | oil sand      | 1015    |
| 2  | broken sand   | 1017    |
| 9  | silty shale   | 1026    |
| 74 | shale         | 1100 TD |

Drilled a 9 7/8" hole to 46'.

Drilled a 5 5/8" hole to 1100'.

Set 46' of 7" surface casing cemented with 10 sacks gel, cemented by Consolidated Oil Service .

Set 1078.3' of 2 7/8" threaded and coupled 8 round upset tubing with 3 centralizers, 1 float shoe, 1 clamp, and 1 baffle.



**CONSOLIDATED**  
Oil Well Services, LLC

**REMIT TO**  
Consolidated Oil Well Services, LLC  
Dept. 970  
P.O. Box 4346  
Houston, TX 77210-4346

MAIN OFFICE  
P.O. Box 884  
Chanute, KS 66720  
620/431-9210 • 1-800/467-8676  
FAX 620/431-0012

**INVOICE**

Invoice # 238701

Invoice Date: 12/17/2010 Terms: 0/0/30,n/30

Page 1

ALTAVISTA ENERGY INC  
4595 K-33 HIGHWAY  
P.O. BOX 128  
WELLSVILLE KS 66092  
(785) 883-4057

M. CROTTS I-4  
27299  
SW 14-22-16 CF  
12/15/2010  
KS

| Part Number | Description             | Qty    | Unit Price | Total  |
|-------------|-------------------------|--------|------------|--------|
| 1124        | 50/50 POZ CEMENT MIX    | 32.00  | 9.8400     | 314.88 |
| 1118B       | PREMIUM GEL / BENTONITE | 59.00  | .2000      | 11.80  |
| 1111        | GRANULATED SALT (50 #)  | 74.00  | .3300      | 24.42  |
| 1110A       | KOL SEAL (50# BAG)      | 175.00 | .4200      | 73.50  |

| Description                     | Hours | Unit Price | Total  |
|---------------------------------|-------|------------|--------|
| 495 CEMENT PUMP (SURFACE)       | 1.00  | 725.00     | 725.00 |
| 495 EQUIPMENT MILEAGE (ONE WAY) | .00   | 3.65       | .00    |
| 495 CASING FOOTAGE              | 46.00 | .00        | .00    |
| T-106 WATER TRANSPORT (CEMENT)  | 2.00  | 112.00     | 224.00 |
| 510 TON MILEAGE DELIVERY        | 73.50 | 1.20       | 88.20  |

|        |        |           |     |         |         |    |         |
|--------|--------|-----------|-----|---------|---------|----|---------|
| Parts: | 424.60 | Freight:  | .00 | Tax:    | 26.75   | AR | 1488.55 |
| Labor: | .00    | Misc:     | .00 | Total:  | 1488.55 |    |         |
| Sublt: | .00    | Supplies: | .00 | Change: | .00     |    |         |

Signed \_\_\_\_\_ Date \_\_\_\_\_





# FIELD TICKET & TREATMENT REPORT CEMENT

TICKET NUMBER 27299  
LOCATION Ottawa KS  
FOREMAN Fred Mader

| DATE              | CUSTOMER # | WELL NAME & NUMBER | SECTION  | TOWNSHIP | RANGE   | COUNTY |
|-------------------|------------|--------------------|----------|----------|---------|--------|
| 12/15/10          | 3244       | M. Crofts # I-4    | SW 14    | 22       | 16      | CF     |
| CUSTOMER          |            |                    |          |          |         |        |
| Alta Vista Energy |            |                    |          |          |         |        |
| MAILING ADDRESS   |            |                    |          |          |         |        |
| P.O. Box 128      |            |                    |          |          |         |        |
| CITY              | STATE      | ZIP CODE           | TRUCK #  | DRIVER   | TRUCK # | DRIVER |
| Wellsville        | KS         | 64092              | 506      | Fred     | Safar   | MKS    |
|                   |            |                    | 455      | Harold   | HJB     |        |
|                   |            |                    | 510      | Derek    | DM      |        |
|                   |            |                    | 505/T106 | Casey    | CLC     |        |

|                            |                        |                       |                                    |
|----------------------------|------------------------|-----------------------|------------------------------------|
| JOB TYPE <u>Surface</u>    | HOLE SIZE <u>9 1/2</u> | HOLE DEPTH <u>46'</u> | CASING SIZE & WEIGHT <u>7'</u>     |
| CASING DEPTH <u>46'</u>    | DRILL PIPE             | TUBING                | OTHER                              |
| SLURRY WEIGHT              | SLURRY VOL             | WATER gal/sk          | CEMENT LEFT in CASING <u>10' +</u> |
| DISPLACEMENT <u>1.7384</u> | DISPLACEMENT PSI       | MIX PSI               | RATE <u>480pm</u>                  |

REMARKS: Establish Circulation thru 7" casing Mix Pump ~~1~~<sup>35</sup> sks  
50/50 Por Mix Cement 2% Gel 5% Salt 5# Kol Seal per sack  
Cement to surface. Displace 7" casing clean w/ 0.7 BBL  
Fresh water. Shut in casing.

Evans Energy Dev. Lnc.

Fred Maden

[illegible]

**Ravin 3737**

AUTHORIZATION [Signature] TITLE 4 DATE           

**I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.**



**CONSOLIDATED**  
Oil Well Services, LLC

**REMIT TO**  
Consolidated Oil Well Services, LLC  
Dept. 970  
P.O. Box 4346  
Houston, TX 77210-4346

MAIN OFFICE  
P.O. Box 884  
Chanute, KS 66720  
620/431-9210 • 1-800/467-8676  
FAX 620/431-0012

**INVOICE**

Invoice # 238781

Invoice Date: 12/20/2010 Terms: 0/0/30,n/30

Page 1

ALTAVISTA ENERGY INC  
4595 K-33 HIGHWAY  
P.O. BOX 128  
WELLSVILLE KS 66092  
(785) 883-4057

M. CROTTS I-4  
27301  
SW 14-22-16 CF  
12/17/2010  
KS

| Part Number | Description              | Qty    | Unit Price | Total   |
|-------------|--------------------------|--------|------------|---------|
| 1124        | 50/50 POZ CEMENT MIX     | 140.00 | 9.8400     | 1377.60 |
| 1118B       | PREMIUM GEL / BENTONITE  | 262.00 | .2000      | 52.40   |
| 1111        | GRANULATED SALT (50 #)   | 328.00 | .3300      | 108.24  |
| 1110A       | KOL SEAL (50# BAG)       | 780.00 | .4200      | 327.60  |
| 4402        | 2 1/2" RUBBER PLUG       | 1.00   | 23.0000    | 23.00   |
| 1143        | SILT SUSPENDER SS-630,ES | .50    | 38.5000    | 19.25   |
| 1401        | HE 100 POLYMER           | .50    | 47.2500    | 23.63   |

| Description                     | Hours   | Unit Price | Total  |
|---------------------------------|---------|------------|--------|
| 495 CEMENT PUMP                 | 1.00    | 925.00     | 925.00 |
| 495 EQUIPMENT MILEAGE (ONE WAY) | 45.00   | 3.65       | 164.25 |
| 495 CASING FOOTAGE              | 1078.00 | .00        | .00    |
| T-106 WATER TRANSPORT (CEMENT)  | 2.50    | 112.00     | 280.00 |
| 510 TON MILEAGE DELIVERY        | 294.84  | 1.20       | 353.81 |

Parts: 1931.72 Freight: .00 Tax: 121.70 AR 3776.48  
Labor: .00 Misc: .00 Total: 3776.48  
Sublt: .00 Supplies: .00 Change: .00

Signed \_\_\_\_\_ Date \_\_\_\_\_



**CONSOLIDATED**  
Oil Well Services, LLC

PO Box 884, Chanute, KS 66720  
620-431-9210 or 800-467-8676

# FIELD TICKET & TREATMENT REPORT

## CEMENT

TICKET NUMBER **27301**  
LOCATION Ottawa KS  
FOREMAN Fred Mader

| DATE                                   | CUSTOMER #         | WELL NAME & NUMBER       | SECTION  | TOWNSHIP | RANGE   | COUNTY |
|----------------------------------------|--------------------|--------------------------|----------|----------|---------|--------|
| 12/17/10                               | 3244               | M Croatts # I.4          | SW 14    | 22       | 16      | CF     |
| CUSTOMER<br><u>Alta Vista Energy</u>   |                    |                          |          |          |         |        |
| MAILING ADDRESS<br><u>P.O. Box 128</u> |                    |                          |          |          |         |        |
| CITY<br><u>Wellsville</u>              | STATE<br><u>KS</u> | ZIP CODE<br><u>66092</u> |          |          |         |        |
|                                        |                    |                          | TRUCK #  | DRIVER   | TRUCK # | DRIVER |
|                                        |                    |                          | 506      | Fred     | Safety  | MTG    |
|                                        |                    |                          | 495      | Casey    | LIS     |        |
|                                        |                    |                          | 510      | LeCil    | CHP     |        |
|                                        |                    |                          | 505/T106 | Arken    | ARM     |        |

JOB TYPE Long string HOLE SIZE 5 7/8 HOLE DEPTH 1100 CASING SIZE & WEIGHT 2 7/8 EUE  
CASING DEPTH 1078 DRILL PIPE 2 7/8 RPBIN @ 1048' OTHER \_\_\_\_\_  
SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 2 1/2 Pkg + 30'  
DISPLACEMENT 6.1 BBL DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 5 BPM

REMARKS: Establish circulation. Mix & Pump 1/2 Gal ESA-41 & 1/2 Gal HE-100  
Polymer Flush. Circulate from pit to condition hole. Mix & Pump  
156 Gals 50/50 Poz Mix Cement 2% Gel 5% Salt 5# Kol Seal per SK.  
Flow Cement to surface. Flush pump & lines clean. Displace  
2 1/2" Rubber Plug to baffle in casing w/ 6.1 BBL Fresh water.  
Pressure to 800 PSI.

| ACCOUNT CODE | QUANTITY or UNITS | DESCRIPTION of SERVICES or PRODUCT | UNIT PRICE      | TOTAL              |
|--------------|-------------------|------------------------------------|-----------------|--------------------|
| 5401         | 1                 | PUMP CHARGE                        |                 | 925 <sup>00</sup>  |
| 5406         | 45                | MILEAGE                            |                 | 1642 <sup>50</sup> |
| 5402         | 1078              | Casing Footage                     |                 | N/C                |
| 5407A        | 294.84            | Ton Miles                          |                 | 353 <sup>80</sup>  |
| 5501C        | 2 1/2             | Transport                          |                 | 280 <sup>00</sup>  |
| 1124         | 140 SKS           | 50/50 Poz Mix Cement               |                 | 1377 <sup>60</sup> |
| 1118B        | 262 <sup>4</sup>  | Premium Gel                        |                 | 52 <sup>40</sup>   |
| 1111         | 328 <sup>4</sup>  | Granulated Salt                    |                 | 108 <sup>24</sup>  |
| 1110A        | 780 <sup>4</sup>  | Kol Seal                           |                 | 327 <sup>60</sup>  |
| 4402         | 1                 | 2 1/2" Rubber Plug                 |                 | 28 <sup>00</sup>   |
| 1143         | 1/2 Gal           | ESA-41                             |                 | 192 <sup>50</sup>  |
| 1401         | 1/2 Gal           | HE-100 Polymer                     |                 | 23 <sup>60</sup>   |
|              |                   | WD # 238781                        |                 |                    |
|              |                   | 6.3%                               | SALES TAX       | 121 <sup>70</sup>  |
|              |                   |                                    | ESTIMATED TOTAL | 3776 <sup>48</sup> |

Ravin 3737

AUTHORIZATION [Signature] TITLE \_\_\_\_\_ DATE \_\_\_\_\_

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.