

ALLIED CEMENTING CO., LLC. 043402

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:
Oakley, KS

DATE <u>8-28-11</u>	SEC. <u>7</u>	TWP. <u>29</u>	RANGE <u>40</u>	CALLED OUT	ON LOCATION	JOB START <u>12:00pm</u>	JOB FINISH <u>1:50pm</u>
LEASEE <u>Earl Arnold</u>	WELL # <u>7-2</u>	LOCATION <u>Jehuson City 25 Eudo</u>		COUNTY <u>Stanton</u>	STATE <u>KS</u>		
OLD OR NEW (Circle one)							

CONTRACTOR Beredco #2

TYPE OF JOB production top stage

HOLE SIZE 7 7/8 T.D. 5755

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL DU DEPTH 3216'

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT 76.54

EQUIPMENT

PUMP TRUCK # 431 CEMENTER Lakene

HELPER Darren

BULK TRUCK # 397/287 DRIVER Ethan

BULK TRUCK # 386/310 DRIVER Earl

REMARKS:

plug mouse hole 5sk, plug rat hole
with 5sk mix 5sk debrucasing
Displace with water. hand plug
at #. float held.

Cement did circulate

Thank You

CHARGE TO: Berenco LLC

STREET _____

CITY _____ STATE _____ ZIP _____

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.

PRINTED NAME _____

SIGNATURE [Signature]

OWNER Same

CEMENT

AMOUNT ORDERED 445 sks Lite Ver #
flo-seal 50 sks ASC 28 gal
1070 salt 6 # gilsoite

COMMON _____ @ _____

POZMIX _____ @ _____

GEL _____ @ _____

CHLORIDE _____ @ _____

ASC 50 sks @ _____

Lite 445 sks @ _____

gilsoite 300 # @ _____

Salt 5 sks @ _____

Flo-seal 112 # @ _____

HANDLING 545 sks @ _____

MILEAGE _____

TOTAL _____

SERVICE

DEPTH OF JOB 3216'

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE _____ @ _____

MILEAGE _____ @ nc

MANIFOLD _____ @ nc

TOTAL _____

PLUG & FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS