



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
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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: _____



1068265

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
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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
<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 <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> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Mark Sievers, Chairman
Ward Loyd, Commissioner
Thomas E. Wright, Commissioner

Sam Brownback, Governor

November 18, 2011

TODD ALLAM
Val Energy, Inc.
200 W DOUGLAS AVE STE 520
WICHITA, KS 67202-3005

Re: ACO1
API 15-007-23774-00-00
PYLE 4-3
SW/4 Sec.03-33S-12W
Barber County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,
TODD ALLAM



PAGE 1 of 1	CUST NO 1004409	INVOICE DATE 10/25/2011
INVOICE NUMBER 1718 - 90735518		

Pratt (620) 672-1201

J LEASE NAME Pyle 4-3
O LOCATION Barber
B COUNTY KS
S STATE Cement-New Well Casing/Pi
I JOB DESCRIPTION
T JOB CONTACT
E

B VAL ENERGY
 I 200 W DOUGLAS AVE STE 520
 L WICHITA
 L KS US 67202
 T
 O ATTN: ACCOUNTS PAYABLE

RECEIVED

OCT 27 2011

9208 - SURFACE

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40387185	20920		Net - 30 days	11/24/2011

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
For Service Dates: 10/20/2011 to 10/20/2011				
0040387185				
171805091A Cement-New Well Casing/Pi 10/20/2011				
Cement 8 5/8" Surface				
60/40 POZ	190.00	EA	9.48	1,801.21 T
Cello-flake(POLEFLAKE-C)	48.00	EA	2.92	140.30 T
Calcium Chloride	492.00	EA	0.83	408.11 T
Wooden Cement Plug 8 5/8"	1.00	EA	126.40	126.40
Heavy Equipment Mileage	80.00	MI	5.53	442.40
Proppant and Bulk Delivery Charge	328.00	MI	1.26	414.59
Blending & Mixing Service Charge	190.00	MI	1.11	210.14
Unit Mileage Charge-Pickups, Vans & Cars	40.00	HR	3.36	134.30
Plug Container Utilization Charge	1.00	EA	197.50	197.50
Depth Charge; 0-500'	1.00	HR	790.00	790.00
Service Supervisor	1.00	HR	138.25	138.25

PLEASE REMIT TO: BASIC ENERGY SERVICES, LP PO BOX 841903 DALLAS, TX 75284-1903	SEND OTHER CORRESPONDENCE TO: BASIC ENERGY SERVICES, LP PO BOX 10460 MIDLAND, TX 79702	SUB TOTAL TAX INVOICE TOTAL	4,803.20 171.52 4,974.72
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BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

10244 NE Hwy. 61
P.O. Box 8613
Pratt, Kansas 67124
Phone 620-672-1201

FIELD SERVICE TICKET

1718 05091 A

DATE _____ TICKET NO. _____

DATE OF JOB: 10-20-11		DISTRICT: PRATT KS		NEW WELL <input checked="" type="checkbox"/> OLD WELL <input type="checkbox"/>		PROD <input type="checkbox"/> INJ <input type="checkbox"/> WDW <input type="checkbox"/>		CUSTOMER ORDER NO.:	
CUSTOMER: VAL-ENERGY				LEASE: PYLE		4-3		WELL NO.:	
ADDRESS:				COUNTY: BARBER		STATE: KS			
CITY:				STATE:		SERVICE CREW: Sullivan, Meko, Pyle			
AUTHORIZED BY:				JOB TYPE: CNW 8 5/8 Surface					
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
33708-20920	25 mi						10-20-11		12:30
19960-19918	25 m					ARRIVED AT JOB		AM	2:45
37900						START OPERATION		AM	5:10
						FINISH OPERATION		AM	5:30
						RELEASED	10-20-11	AM	6:00
						MILES FROM STATION TO WELL			70

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP.

SIGNED: Jim Stevenson
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP 103	60/46 per cent	SK	190		2,280 00
CC 102	Cellfave	lb	48		177 60
CC 109	Calcium chloride	lb	492		516 60
CF 153	wooden Plug 8 5/8	9A	1		160 00
E 100	pickup milage	mi	40		170 00
E 101	Heavy 99 gal. mi	mi	80		560 00
E 113	Bulk Delivery	TM	328		524 80
CE 200	Depth charge 0-500'	9A	1		1,000 00
CE 240	Blending - water	SK	190		266 00
CE 504	Plug Container	9A	1		250 00
S 003	Schwend Supermix	9A	1		175 00

CHEMICAL / ACID DATA:			

SUB TOTAL		NS	4,803.20
SERVICE & EQUIPMENT	%TAX ON \$		
MATERIALS	%TAX ON \$		
TOTAL			

Thank you

SERVICE REPRESENTATIVE: <u>Robert [Signature]</u>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <u>Jim Stevenson</u> (WELL OWNER OPERATOR CONTRACTOR OR AGENT)
FIELD SERVICE ORDER NO.	



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

10244 NE Hwy. 61
P.O. Box 8613
Pratt, Kansas 67124
Phone 620-672-1201

FIELD SERVICE TICKET

1718 05091 A

DATE _____ TICKET NO. _____

DATE OF JOB: 10-20-11		DISTRICT: PRATT		NEW WELL <input type="checkbox"/>		OLD WELL <input type="checkbox"/>		PROD <input type="checkbox"/>		INJ <input type="checkbox"/>		WDW <input type="checkbox"/>		CUSTOMER ORDER NO.:	
CUSTOMER: VAL 20294				LEASE: PYLE				WELL NO.:							
ADDRESS:				COUNTY: DRISK				STATE: KS							
CITY:				STATE:				SERVICE CREW: S-1192, MING, PHIL							
AUTHORIZED BY:				JOB TYPE: COW 2201 SURFACE											
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME					
						ARRIVED AT JOB				AM PM					
						START OPERATION				AM PM					
						FINISH OPERATION				AM PM					
						RELEASED				AM PM					
						MILES FROM STATION TO WELL									

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP.

SIGNED: _____
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CF 103	60/100 gal. oil	sk	17		2,250.00
CF 102	60/100 gal. oil	sk	48		197.60
CF 107	60/100 gal. oil	sk	450		316.60
CF 153	Wash. Sol. 8/1	gal	1		160.00
CF 109	Wash. Sol. 8/1	gal	70		170.00
CF 101	Wash. Sol. 8/1	gal	20		560.00
CF 103	Wash. Sol. 8/1	gal	325		524.80
CF 200	Debit charge		1		1,000.00
CF 240	Wash. Sol. 8/1	sk	180		266.00
CF 214	Wash. Sol. 8/1	sk	1		250.00
S 013	Surface Supplies		1		175.00

SUB TOTAL

25,420.00

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		

SERVICE REPRESENTATIVE: <i>[Signature]</i>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <i>[Signature]</i>
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(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.

Customer <i>VAL-ENERGY</i>	Lease No.	Date <i>10-20-11</i>			
Lease <i>PYLE</i>	Well # <i>4-3</i>				
Field Order # <i>5091</i>	Station <i>PRATT KS</i>	Casing <i>8 7/8</i>	Depth <i>225'</i>	County <i>BARBER</i>	State <i>KS</i>
Type Job <i>CNW 876 Sulfon-L</i>	Formation			Legal Description <i>3-33-12</i>	

PIPE DATA		PERFORATING DATA		FLUID USED	TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP
<i>8 7/8</i>							
Depth <i>225'</i>	Depth	From	To	Pre Pad	Max		5 Min.
Volume <i>13</i>	Volume	From	To	Pad	Min		10 Min.
Max Press <i>300</i>	Max Press	From	To	Frac	Avg		15 Min.
Well Connection <i>PC</i>	Annulus Vol.	From	To		HHP Used		Annulus Pressure
Plug Depth <i>210</i>	Packer Depth	From	To	Flush	Gas Volume		Total Load

Customer Representative				Station Manager <i>DAVE SCOTT</i>		Treater <i>Robert Sullivan</i>			
Service Units	<i>37900</i>	<i>33708</i>	<i>20920</i>	<i>19960</i>	<i>19918</i>				
Driver Names	<i>Sullivan</i>	<i>Melson</i>	<i>Phye</i>						

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>2:45 Am</i>					<i>on loc 8 7/8 mcs</i>
<i>4:50</i>					<i>CASING ON BOTTOM</i>
<i>5:00</i>					<i>Hook by circ.</i>
<i>5:10</i>			<i>3</i>	<i>2</i>	<i>at frac</i>
<i>5:15</i>				<i>5</i>	<i>mix cont 170 sk 60/40 per cont</i>
<i>5:20</i>			<i>41</i>		<i>cont mixt.</i>
<i>5:30</i>	<i>200</i>		<i>13</i>	<i>3</i>	<i>Release Plug AND START DIRP</i>
					<i>plug down</i>
					<i>chac @ 150 cont to Pit</i>
					<i>JOB Complete</i>
					<i>Thank you</i>



PAGE	CUST NO	INVOICE DATE
1 of 1	1004409	10/28/2011
INVOICE NUMBER		
1718 - 90740035		

Pratt (620) 672-1201

LEASE NAME Pyle 4-3

B VAL ENERGY
I 200 W DOUGLAS AVE STE 520
L WICHITA

RECEIVED

OCT 31 2011

LOCATION
COUNTY Barber
STATE KS 5/2
JOB DESCRIPTION Cement-New Well Casing/Pi #
JOB CONTACT 4-3

KS US 67202
ATTN: ACCOUNTS PAYABLE

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40388960	20920	9308	Net - 30 days	11/27/2011
For Service Dates: 10/26/2011 to 10/26/2011				
0040388960				
171805098A Cement-New Well Casing/Pi 10/26/2011 Cement 5 1/2" Longstring				
AA2 Cement		125.00	EA	13.43
60/40 POZ		50.00	EA	9.48
De-foamer(Powder)		30.00	EA	3.16
Salt(Fine)		571.00	EA	0.39
Gas-Blok		118.00	EA	4.07
FLA-322		95.00	EA	5.92
Gilsonite		625.00	EA	0.53
Super Flush II		500.00	EA	1.21
Top Rubber Cement Plug 5 1/2'		1.00	EA	82.95
Guide Shoe Regular 5 1/2"(Blue)		1.00	EA	197.50
Flapper Type Insert Float Valve 5 1/2"		1.00	EA	169.85
Turbolizer 5 1/2"(Blue)		5.00	EA	86.90
5 1/2" Basket(Blue)		1.00	EA	229.10
Heavy Equipment Mileage		80.00	MI	5.53
Proppant and Bulk Delivery Charge		322.00	MI	1.26
Blending & Mixing Service Charge		175.00	MI	1.11
Unit Mileage Charge-Pickups, Vans & Cars		40.00	HR	3.36
Depth Charge; 4001-5000'		1.00	HR	1,990.81
Plug Container Utilization Charge		1.00	EA	197.50
Service Supervisor		1.00	HR	138.25
PLEASE REMIT TO:				
BASIC ENERGY SERVICES, LP				
PO BOX 841903				
DALLAS, TX 75284-1903				
SEND OTHER CORRESPONDENCE TO:				
BASIC ENERGY SERVICES, LP				
PO BOX 10460				
MIDLAND, TX 79702				
			SUB TOTAL	9,068.92
			TAX	324.94
			INVOICE TOTAL	9,393.86



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

10244 NE Hwy. 61
P.O. Box 8613
Pratt, Kansas 67124
Phone 620-672-1201

FIELD SERVICE TICKET

1718 05098 A

DATE _____ TICKET NO. _____

DATE OF JOB 10-26-11		DISTRICT Pratt		NEW WELL <input checked="" type="checkbox"/>		OLD WELL <input type="checkbox"/>		PROD <input type="checkbox"/>		INJ <input type="checkbox"/>		WDW <input type="checkbox"/>		CUSTOMER ORDER NO.:	
CUSTOMER V&L Energy, Inc.				LEASE PYLE				4-3 WELL NO.							
ADDRESS				COUNTY Barber				STATE KS							
CITY				STATE KS				SERVICE CREW melson Gibson young Sullivan							
AUTHORIZED BY				JOB TYPE: cnw 5 1/2 LS											
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME					
33708 20920	45 min						10-26			3:00					
19832 21010	45 min						10-26			6:00					
37900							10-26			9:45					
							10-26			10:30					
							10-26			11:15					
						MILES FROM STATION TO WELL				40					

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP.

SIGNED: Randy Smith
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
EP 105	AA2 cement	SK	125		2,125.00
EP 103	60/40 POZ	SK	50		600.00
CC 105	De-foamer	lb	30		120.00
CC 111	SALT	lb	571		285.50
CC 115	Gas-Blok	lb	118		607.70
CC 129	FLA-322	lb	95		712.50
CC 201	Gilsonite	lb	625		418.75
CF 103	TOP Rubber Plug	eg	1		105.00
CF 251	Guide shoe	eg	1		250.00
CF 1451	FLAPPER INSERT	eg	1		215.00
CF 1651	Turbolizer	eg	5		550.00
CF 1901	5 1/2 Basket	eg	1		290.00
CC 155	Super Flush TL	gal	500		765.00
E 100	Pickup mileage	mi	40		170.00
E 101	Heavy mileage	mi	80		360.00
E 113	Bulk Delivery	TM	322		515.70
CE 205	Depth Charge	4hr	1		2,520.00
CE 240	Mixing Charge	SK	175		245.00
CE 504	Plug con Tainer	JOB	1		250.00
S 003	Supervisor	eg	1		175.00
SUB TOTAL					175.00
DLS					9,068.92

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		

THANK YOU

SERVICE REPRESENTATIVE: Robert J. [Signature]
 THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: Randy Smith
 (WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO. _____

Customer <i>VAL-ENERGY</i>	Lease No.	Date <i>10-26-11</i>			
Lease <i>PYLE</i>	Well # <i>4-3</i>				
Field Order # <i>5098</i>	Station <i>PRATT KS</i>	Casing <i>5 1/2</i>	Depth	County <i>BARBER</i>	State <i>KS</i>
Type Job <i>CNW 5 1/2 Compstn</i>	Formation			Legal Description <i>3-33-12</i>	

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP	
<i>5 1/2</i>								
Depth <i>4900'</i>	Depth	From	To	Pre Pad	Max		5 Min.	
Volume <i>116</i>	Volume	From	To	Pad	Min		10 Min.	
Max Press <i>1500</i>	Max Press	From	To	Frac	Avg		15 Min.	
Well Connection <i>P.C</i>	Annulus Vol.	From	To		HHP Used		Annulus Pressure	
Plug Depth <i>4841</i>	Packer Depth	From	To	Flush	Gas Volume		Total Load	

Customer Representative	Station Manager <i>DAVE SCOTT</i>	Treater <i>Robert Sullivan</i>
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Service Units	<i>37900</i>	<i>33708</i>	<i>20920</i>	<i>19832</i>	<i>2021010</i>				
Driver Names	<i>Sullivan</i>	<i>Melson</i>	<i>Yung</i>	<i>Gibson</i>					

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>6:00</i>					<i>on loc safety mat</i>
					<i>Run 116 57.5 5 1/2 15.5 csg</i>
					<i>cont 1, 3, 5, 7, 10 - BAdct 10</i>
<i>8:55</i>					<i>CASING ON BOTTOM</i>
<i>9:05</i>					<i>Hook Up to circ</i>
<i>9:45</i>	<i>200</i>		<i>12</i>	<i>3</i>	<i>St Super Flush</i>
			<i>3</i>		<i>Spacer</i>
				<i>5.5</i>	<i>mix cont 125 sk AA-2 cont</i>
			<i>30</i>		<i>shut down cont mixed.</i>
					<i>wash, pump, filter</i>
				<i>6</i>	<i>Release Plug ADD Drip</i>
	<i>300</i>		<i>89</i>		<i>Lift Psi</i>
	<i>500</i>			<i>4</i>	<i>Show Rate</i>
<i>10:30</i>			<i>116</i>		<i>Plug down</i>
			<i>5</i>		<i>plug R.H 30 sk 60/100 Puz</i>
			<i>7</i>		<i>plug W.H 20 sk Puz</i>
					<i>SOB Complete</i>
					<i>Thank you</i>

