



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



1069758

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
_____ 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> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	American Warrior, Inc.
Well Name	LaDonna 3-29
Doc ID	1069758

Tops

Name	Top	Datum
Anhydrite	1366	759
Heebner	3596	-1471
Lansing	3642	-1517
Base KC	3959	-1834
Pawnee	4042	-1917
Ft. Scott	4117	-1992
Cherokee	4135	-2010
Mississippian	4209	-2084
RTD	4225	-2100

# **Geological Report**

American Warrior, Inc.

**LaDonna #3-29**

1800' FSL & 2296' FWL

Sec. 29 T18s R21w

Ness County, Kansas



**American Warrior, Inc.**

## General Data

Well Data: American Warrior, Inc.  
LaDonna #3-29  
1800' FSL & 2296' FWL  
Sec. 29 T18s R21w  
Ness County, Kansas  
API # 15-135-25220-0000

Drilling Contractor: Petromark Drilling, LLC Rig # 1

Geologist: Jason Alm

Spud Date: April 5, 2011

Completion Date: April 13, 2011

Elevation: 2119' Ground Level  
2125' Kelly Bushing

Directions: Bazine KS, ½ mi. East on Hwy 96, North 1/2 mi. on  
EE rd. East and South into location.

Casing: 1375' 8 5/8" surface casing  
4224' 5 1/2" production casing

Samples: 10' wet and dry, 3500' to RTD

Drilling Time: 3500' to RTD

Electric Logs: None

Drillstem Tests: One, Trilobite Testing, Inc. "Cody Bloedorn"

Problems: None

Remarks: None

## Formation Tops

	American Warrior, Inc.
	LaDonna #3-29
	Sec. 29 T18s R21w
	1800' FSL & 2296' FWL
<b>Formation</b>	
Anhydrite	1366', +759
Base	1402', +723
Heebner	3596', -1471
Lansing	3642', -1517
BKc	3959', -1934
Pawnee	4042', -1917
Fort Scott	4117', -1992
Cherokee	4135', -2010
Mississippian	4209', -2084
Osage	4215', -2090
RTD	4225', -2100

## Sample Zone Descriptions

### Mississippian Osage (4215', -2090): Covered in DST #1

Dolo – Δ – Fine sucrosic crystalline with fair to good inter-crystalline and vuggy porosity, heavy trip chert, heavily weathered with good vuggy porosity, light to heavy oil stain and saturation, good show of free oil, good odor, good yellow cut fluorescents, 45 units hotwire.

**Drill Stem Tests**  
Trilobite Testing, Inc.  
“Cody Bloedorn”

**DST #1**

**Mississippian Osage**

Interval (4215' – 4222') Anchor Length 7'

IHP	– 2134 #	
IFP	– 45" – B.O.B. 26 min.	19-92 #
ISI	– 45" – W.S.B.	1248 #
FFP	– 45" – B.O.B. 23 min.	108-157 #
FSI	– 45" – W.S.B.	1240 #
FHP	– 2050 #	
BHT	– 119°F	

Recovery:	310' GIP		
	186' GCO	50% Oil	Gravity: 40°API
	201' GCO	70% Oil	

**Structural Comparison**

	<b>American Warrior, Inc.</b> <b>LaDonna #3-29</b> <b>Sec. 29 T18s R21w</b> <b>1800' FSL &amp; 2296' FWL</b>	<b>American Warrior, Inc.</b> <b>LaDonna #2-29</b> <b>Sec. 29 T18s R21w</b> <b>1400' FSL &amp; 1880' FWL</b>		<b>American Warrior, Inc.</b> <b>LaDonna #1-29</b> <b>Sec. 29 T18s R21w</b> <b>380' FSL &amp; 1300' FWL</b>	
<b>Formation</b>					
Anhydrite	<b>1366', +759</b>	1368', +757	<b>(+2)</b>	1363', +763	<b>(-4)</b>
Base	<b>1402', +723</b>	1399', +726	<b>(-3)</b>	1399', +727	<b>(-4)</b>
Heebner	<b>3596', -1471</b>	3588', -1463	<b>(-8)</b>	3594', -1468	<b>(-3)</b>
Lansing	<b>3642', -1517</b>	3636', -1511	<b>(-6)</b>	3640', -1514	<b>(-3)</b>
BKc	<b>3959', -1934</b>	3954', -1829	<b>(-5)</b>	3955', -1829	<b>(-5)</b>
Pawnee	<b>4042', -1917</b>	4037', -1912	<b>(-5)</b>	4038', -1912	<b>(-5)</b>
Fort Scott	<b>4117', -1992</b>	4114', -1989	<b>(-3)</b>	4118', -1992	<b>FL</b>
Cherokee	<b>4135', -2010</b>	4132', -2007	<b>(-3)</b>	4134', -2008	<b>(-2)</b>
Mississippian	<b>4209', -2084</b>	4196', -2071	<b>(-13)</b>	4201', -2075	<b>(-9)</b>
Osage	<b>4215', -2090</b>	4202', -2077	<b>(-13)</b>	4207', -2081	<b>(-9)</b>

## **Summary**

The location for the LaDonna #3-29 was found via 3-D seismic survey. The new well ran structurally as expected via the survey. One drill stem test was conducted which recovered commercial amounts of oil from the Mississippian Osage Formation. After all gathered data had been examined the decision was made to run 5 1/2 inch production casing to further evaluate the LaDonna #3-29 well.

## **Recommended Perforations**

**Primary:**

**Mississippian Osage:           (4215' – 4224')                           DST #1**

Respectfully Submitted,

Jason Alm  
Hard Rock Consulting, Inc.











**TRILOBITE  
TESTING, INC**

# DRILL STEM TEST REPORT

## FLUID SUMMARY

American Warrior Inc,  
PO Box 399  
Garden City KS 67846  
ATTN: Jason Alm

**Ladonna #3-29**  
**29-18s-21w- Ness KS**  
Job Ticket: 42578      **DST#: 1**  
Test Start: 2011.04.12 @ 13:05:47

### Mud and Cushion Information

Mud Type: Gel Chem	Cushion Type:	Oil API: 41 deg API
Mud Weight: 9.00 lb/gal	Cushion Length: ft	Water Salinity: ppm
Viscosity: 50.00 sec/qt	Cushion Volume: bbl	
Water Loss: 11.19 in <sup>3</sup>	Gas Cushion Type:	
Resistivity: ohm.m	Gas Cushion Pressure: psig	
Salinity: 8100.00 ppm		
Filter Cake: inches		

### Recovery Information

Recovery Table

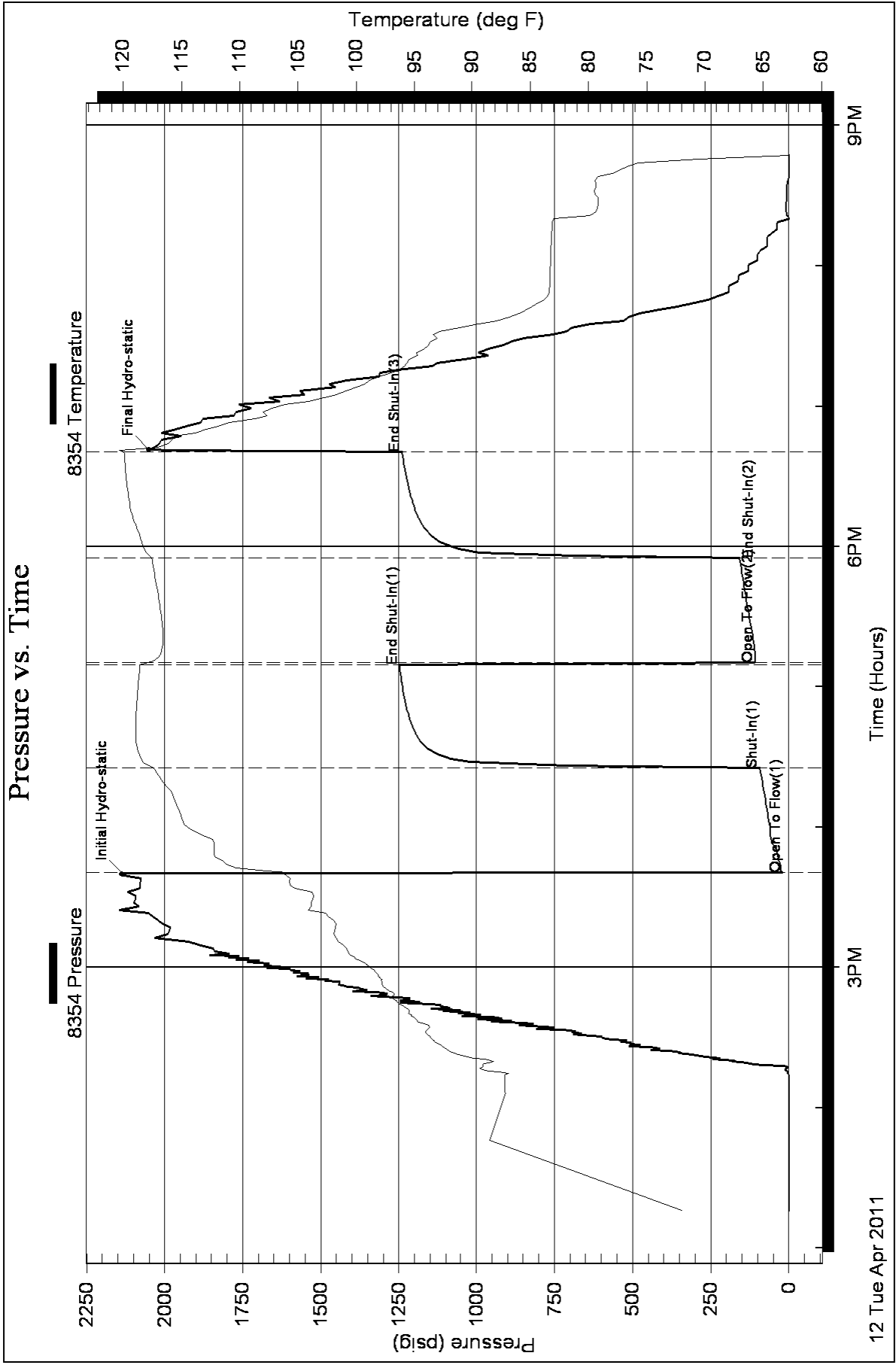
Length ft	Description	Volume bbl
0.00	gas,310 FEET	0.000
186.00	50%O, 50%G	1.781
201.00	70%O,30%G	2.820

Total Length: 387.00 ft      Total Volume: 4.601 bbl

Num Fluid Samples: 0      Num Gas Bombs: 0      Serial #:

Laboratory Name:      Laboratory Location:

Recovery Comments:





Services, Inc.

CHARGE TO: American Warrior  
ADDRESS  
CITY, STATE, ZIP CODE

TICKET 20566

PAGE 1 OF 1

1. SERVICE LOCATIONS: **MOORE CITY, KS** WELL/PROJECT NO.: **3-29** LEASE: **LADOWNA** COUNTY/PARISH: **MOORE** STATE: **KS** CITY: **Bartonia** DATE: **7 APR 11** OWNER: **79-185-21W**

2. TICKET TYPE:  SERVICE CONTRACTOR: **Development** RIG NAME/NO.: **1** SHIPPED TO: **location** DELIVERED TO: **location** ORDER NO.: **79-185-21W**

3. WELL TYPE: **0.1** WELL CATEGORY: **Development** JOB PURPOSE: **CONCRETE SURFACE PIPE** WELL PERMIT NO.: **79-185-21W**

4. REFERRAL LOCATION: **INVOICE INSTRUCTIONS**

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.	UM	QTY.	UM	UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575					MILEAGE	20	mi			5.00	100.00
575					TER 114						
575					PUMP Charge	1	ea			100.00	100.00
402					Control valves	4	ea			70.00	280.00
401					insert Flat w/p AUTOFILL	1	ea			200.00	200.00
330					SMD cement	450	sk			15.00	6750.00
276					Fluoride	125	lb			1.50	187.50
221					KCL liquid	2	gal			25.00	50.00
281					MUD FISH	500	gal			1.00	500.00
290					D-Air	3	gal			35.00	105.00
581					Service charge	450	sk			1.50	675.00
583					Drillage	447.8	TM			1.00	447.80

**LEGAL TERMS:** Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

**MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS**

**REMIT PAYMENT TO:**  
**SWIFT SERVICES, INC.**  
**P.O. BOX 466**  
**NESS CITY, KS 67560**  
**785-798-2300**

DATE SIGNED: **11/30** TIME SIGNED:  A.M.  P.M.

SWIFT OPERATOR: **McB** APPROVAL: **McB**

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES

**SURVEY**  
 OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?  
 WE UNDERSTOOD AND MET YOUR NEEDS?  
 OUR SERVICE WAS PERFORMED WITHOUT DELAY?  
 WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?  
 ARE YOU SATISFIED WITH OUR SERVICE?  
 CUSTOMER DID NOT WISH TO RESPOND

PAGE TOTAL: **10445.30**

TAX: **10445.30**

TOTAL: **10445.30**

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE 7 APR 11 PAGE NO.

CUSTOMER American Warrior WELL NO. 3-29 LEASE La Donna JOB TYPE cement surface pipe TICKET NO. 20566

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
								450 sks SMD w/ 1/4" fibre 8" casing / 23" 1376' pipe 42' shoe jt
	1330							on loc TRK 114
	1400							hook up to circ pipe drum
	1435							circulate
	1450	6 3/4					300	start flush
		6 3/4	12				300	500 gal mud flush
		6 3/4	20				300	20 bbl KCL flush
	1455	4 3/4					300	skit SMD 6 3/4 @ 200 425 sks
		4 3/4	153				200	stop cement
	1525	6 3/4					250	release plug
	1533							connect to surface
	1545	6 3/4	84				300	plug drum
								{ 425 sks mixed 30 sks to pit }
	1549						300	shut in casing
								wash truck
	1615							job complete
								Thanks! Blair Dave David



Services, Inc.

CHANGE TO: ADDRESS American Warrior  
CITY, STATE, ZIP CODE

TICKET 20571

PAGE 1 OF 2

1. SERVICE LOCATIONS: Well/PROJECT NO. 3-29 LEASE LA Donna COUNTY/PARISH Madison STATE KS CITY Bazine DATE 13 APR 11 OWNER  
 2. TICKET TYPE:  SERVICE CONTRACTOR Perimeter RIG NAME/NO. location ORDER NO.  
 SALES WELL TYPE oil WELL CATEGORY development JOB PURPOSE cement long string WELL PERMIT NO.  
 3. REFERRAL LOCATION INVOICE INSTRUCTIONS

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.	UM	QTY.	UM	UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575		1			MILEAGE TRK 114	20	mi			5.00	100.00
578		1			Pump Charge	1	ea			1400.00	1400.00
402		1			Centralizers	5 1/2	in		5 ea	65.00	325.00
403		1			Conent Basket	5 1/2	in		1 ea	230.00	230.00
406		1			latch down plug & nipple	5 1/2	in		1 ea	225.00	225.00
407		1			insert & flat shoe	5 1/2	in		1 ea	300.00	300.00
449		1			Rotating head seal	1	ea		1 ea	150.00	150.00

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 MUST BE SIGNED BY CUSTOMER OR POSTMASTER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS  
 DATE SIGNED: [Signature] TIME SIGNED:  AM  PM

**REMIT PAYMENT TO:**  
 SWIFT SERVICES, INC.  
 P.O. BOX 466  
 NESS CITY, KS 67560  
 785-798-2300

**SURVEY**

OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?	AGREE	UN-DECIDED	DIS-AGREE
WE UNDERSTOOD AND MET YOUR NEEDS?			
OUR SERVICE WAS PERFORMED WITHOUT DELAY?			
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?			
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	

CUSTOMER DID NOT WISH TO RESPOND

JOB LOG

SWIFT Services, Inc.

DATE 13 APR 11 PAGE NO. 1

CUSTOMER American Warrior WELL NO. 3-29 LEASE LA DONNA JOB TYPE cement long string TICKET NO. 20571

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
								175 sls EA 2 15.5" 5 1/2 casing 101 joints shoejt - 42' Cmt - 1, 2, 3, 4, 80 Basket - 5 TD - 4225
	0530							on loc TRK 114
	0610							start 5 1/2" 15.5" casing in well
	0800							Dropball circulate - <del>rotate</del>
	0820	6 3/4	12				300	Pump 500gal mud flush
		6 3/4	20				300	Pump 20 bbl KCL flush
	0830		7					Plug RH - 30sls
	0832	1 1/4	42				300	Mix 145sls EA-2 @ 15.4 lpp
	0840							Drop latchdown plug unroll out pump lines
	0845	6 3/4					200	Displace plug
		6 3/4	95				700	
	0900						1500	Land plug
	0905							Release pressure to truck - dried up wash truck Rack up
	0930							Job complete Thanks Bruce Dave & Joe





PO Box 466  
Ness City, KS 67560  
Off: 785-798-2300

TICKET CONTINUATION

TICKET No. 20571

CUSTOMER American Warrior WELLS (A) Vanna 3-29 DATE 13 APR 11 PAGE 21 OF 2

QTY	DESCRIPTION	UNIT	WELL	DATE	PRICE	TOTAL
1	STANDARD cement (For #1-2)	175 yk			1200	2100.00
1	Calseal	8 yk			3000	2400.00
1	seal	900 lb			015	1350.00
1	hobl-322	125 lb			750	937.50
1	flake	50 lb			150	75.00
1	D-AIR	2 gal			3500	70.00
1	MUDFLUSH	50 gal			100	520.00
1	KCL liquid	2 gal			2500	50.00
582						
581						
582	Drillage (A.H. MUD)	100			25000	25000
581	SERVICE CHARGE	175 yk			150	26250
	TOTAL WEIGHT					4620
	LOADED MILES					2

4620 2



CHARGE TO: Amesbury  
 ADDRESS: \_\_\_\_\_  
 CITY, STATE, ZIP CODE: \_\_\_\_\_

TICKET  
**19418**

PAGE 1 OF 1

SERVICE LOCATIONS  
 1. Amesbury, KS WELLPROJECT NO. \_\_\_\_\_ LEASE Lebanon COUNTY/PARISH Mo STATE KS CITY \_\_\_\_\_ DATE 4-19-11 OWNER Steve  
 2. \_\_\_\_\_ TICKET TYPE  SERVICE CONTRACTOR Amesbury RIG NAME NO. \_\_\_\_\_ SHIPPED  DELIVERED TO \_\_\_\_\_ ORDER NO. \_\_\_\_\_  
 3. \_\_\_\_\_ WELLPURPOSE Lebanon WELL CATEGORY Lebanon JOB PURPOSE Lebanon WELL PERMIT NO. \_\_\_\_\_ WELL LOCATION W/E Amesbury, KS  
 4. \_\_\_\_\_ REFERRAL LOCATION \_\_\_\_\_ INVOICE INSTRUCTIONS \_\_\_\_\_

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.	UM	QTY.	UM	UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
595					MILEAGE	30	mi			5.00	1.50
599					Pump Service	1	pc			800.00	800.00
591					Service Charge	1	hr			137.00	137.00
592					Drays	135	hr			2.00	270.00
330					500 Coats	1	ea			1390.00	1390.00
396					Flare	34	ea			1.50	51.00

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DATE SIGNED: X Scott TIME SIGNED:  A.M.  P.M.

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**SURVEY**  
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 WE UNDERSTOOD AND MET YOUR NEEDS?  
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 WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?  
 ARE YOU SATISFIED WITH OUR SERVICE?  
 CUSTOMER DID NOT WISH TO RESPOND

PAGE TOTAL: 3313  
 TAX: 7.25%  
 TOTAL: 3434.84

SWIFT OPERATOR: A. B. [Signature] APPROVAL: \_\_\_\_\_  
 CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES  
 Thank You!

**JOB LOG**

**SWIFT Services, Inc.**

DATE 4/19/11

PAGE NO. 1

CUSTOMER *Am... ..* WELL NO. LEASE *Ludovica* JOB TYPE *Spud* TICKET NO. *17412*

CHART NO.	TIME	RATE (BPM)	VOLUME (BBB) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1500							On Loc. Set up track hook up to 5 1/2" csg.
	1510						500	Press to sample
		2					500	Hook up to 8" R, Inj. Rate
								Start the 125 lbs SMD 123" H
			49					Finish mixing
			1					Run 1" 112
							300	Start in 200psi
								Release Press on 1/2 csg
								hook up track
	16:00							Job Complete

*1/10*

*By: [Signature]*