

Mike's Testing & Salvage Inc.

P.O. Box 467
Chase, KS 67524

Invoice

Date	Invoice #
11/4/2011	13018

Bill To
American Energies Corportion 155 N. Market, Suite 710 Wichita, Kansas 67202

P.O. No.	Lease	County
Orlando Unruh	B #1	McPherson

Qty	Description	Rate	Amount
17	Hrs. Rig Time	190.00	3,230.00T
4	Sx Cement	12.50	50.00T
	Sand	40.00	40.00T
	Casing Knife	250.00	250.00T
	10-27 Rigged up, laid down rods & tubing. Sanded bottom to 3280'. Dug cellar & pit out. Rigged up casing jacks. Ran in tag sand at 3280', dumped 4sx cement with bailer. Shut down. 9hrs.		
	10-28 Pull stretch, got 8" stretch. Cut casing at 1700', 1500' got cut loose at 1400'. Pulled up to 405', Copelar, pumped 150sx 60/40poz 3% CC with 150# hulls. Cement circulated to surface. Pulled rest of pipe out. Rigged down. 8hrs.		
	Sales Tax	7.30%	260.61
		Total	\$3,830.61

COPELAND

POST OFFICE BOX 438
 HAYSVILLE, KS 67060
 (316) 524-1225
 (316) 524-1027 FAX

Invoice

Acid & Cement

BURRTON, KS GREAT BEND, KS
 (620) 463-5161 (620) 793-3366
 FAX (620) 463-2104 FAX (620) 793-3536

INVOICE NUMBER:
C37824-IN

BILL TO:
AMERICAN ENERGIES CORP.
P.O. BOX 516
CANTON, KS 67428

LEASE: UNRUH B 1

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE ORDER	SPECIAL INSTRUCTIONS	
11/14/2011	C37824		11/07/2011		NET 30	
QUANTITY	U/M	ITEM NO./DESCRIPTION		D/C	PRICE	EXTENSION
1.00	EA	CEMENT PUMP CHARGE		0.00	650.00	650.00
63.00	SAX	60-40 POZ MIX 4%		0.00	9.69	610.47
13.00	MI	CEMENT MILEAGE PUMP TRUCK		0.00	4.00	52.00
1.00	EA	MIN. BULK CHARGE		0.00	150.00	150.00
1.00	MI	MIN. BULK TRUCK - TON MILES 2ND TOP OFF		0.00	150.00	150.00
REMIT TO: P.O. BOX 438 HAYSVILLE, KS 67060		COP-B FUEL SURCHARGE IS NOT TAXABLE AND IS ADDED TO MILEAGE, PUMP AND OR DELIVERY CHARGES ONLY.		Net Invoice: MCPCO Sales Tax: Invoice Total:		1,612.47 47.45 <u>1,659.92</u>
RECEIVED BY		NET 30 DAYS				

There will be a charge of 1.5% "per month" (18% annual rate) on all accounts over 30 days past due.

Copeland Acid & Cement is a subsidiary of Gressel Oil Field Service

Gressel Oil Field Service reserves a security interest in the goods sold until the same are paid for in full and reserve all the rights of a secured party under the Uniform Commercial Code



FIELD ORDER N° C 37824

BOX 438 • HAYSVILLE, KANSAS 67060
316-524-1225

DATE Nov 7 20 11

IS AUTHORIZED BY: Amelia E. ... (NAME OF CUSTOMER)

Address _____ City _____ State _____

To Treat Well As Follows: Lease Union 13 Well No. 1 Customer Order No. _____

Sec. Twp. Range _____ County WPA State K

CONDITIONS: As a part of the consideration hereof it is agreed that Copeland Acid Service is to service or treat at owners risk, the hereinbefore mentioned well and is not to be held liable for any damage that may accrue in connection with said service or treatment. Copeland Acid Service has made no representation, expressed or implied, and no representations have been relied on, as to what may be the results or effect of the servicing or treating said well. The consideration of said service or treatment is payable. There will be no discount allowed subsequent to such date. 6% interest will be charged after 60 days. Total charges are subject to correction by our invoicing department in accordance with latest published price schedules.

The undersigned represents himself to be duly authorized to sign this order for well owner or operator.

THIS ORDER MUST BE SIGNED BEFORE WORK IS COMMENCED

Well Owner or Operator

By _____

Agent

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
	1	Pump Chlorine		6.00
	6250	6250 Gallons of 12.5% solution		610.00
	13	13 units of ...		50.00
		2nd Top of ...		
		Bulk Charge		1.00
		Bulk Truck Miles		1.00
		Process License Fee on _____ Gallons		
TOTAL BILLING				112.00

I certify that the above material has been accepted and used; that the above service was performed in a good and workmanlike manner under the direction, supervision and control of the owner, operator or his agent, whose signature appears below.

Copeland Representative [Signature]

Station [Signature]

Well Owner, Operator or Agent

Remarks Run 65' 1" Pump Chlorine ...

NET 30 DAYS

COPELAND

POST OFFICE BOX 438
 HAYSVILLE, KS 67060
 (316) 524-1225
 (316) 524-1027 FAX

Invoice

Acid & Cement

BURRTON, KS GREAT BEND, KS
 (620) 463-5161 (620) 793-3366
 FAX (620) 463-2104 FAX (620) 793-3536

**INVOICE NUMBER:
 C37814-IN**

BILL TO:
AMERICAN ENERGIES CORP.
P.O. BOX 516
CANTON, KS 67428

LEASE: UNRUH B-1

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE ORDER	SPECIAL INSTRUCTIONS	
10/31/2011	C37814		10/28/2011		NET 30	
QUANTITY	U/M	ITEM NO./DESCRIPTION		D/C	PRICE	EXTENSION
1.00	EA	PUMP CHARGE		0.00	650.00	650.00
150.00	SAX	60-40 POZ MIX 4%		0.00	9.69	1,463.50
3.00	SAX	CALCIUM CHLORIDE - SAX		0.00	40.00	120.00
23.00	MI	MILEAGE PUMP TRUCK		0.00	4.00	92.00
200.00	LB	COTTONSEED HULLS		0.00	0.35	70.00
REMIT TO: P.O. BOX 438 HAYSVILLE, KS 67060		COP-B		Net Invoice: 2,385.50		
RECEIVED BY _____		FUEL SURCHARGE IS NOT TAXABLE AND IS ADDED TO MILEAGE, PUMP AND OR DELIVERY CHARGES ONLY.		MCP CO Sales Tax: 47.45		
				Invoice Total: 2,432.95		
				NET 30 DAYS		

There will be a charge of 1.5% "per month" (18% annual rate) on all accounts over 30 days past due.

Copeland Acid & Cement is a subsidiary of Gravel Oil Field Service
 Gravel Oil Field Service reserves a security interest in the goods sold until the same are paid for in full and reserve all the rights of a secured party under the Uniform Commercial Code



FIELD ORDER № C 37814

BOX 438 • HAYSVILLE, KANSAS 67060
316-524-1225

DATE Oct 25 20 11

IS AUTHORIZED BY: American Energy Corp (NAME OF CUSTOMER)
Address _____ City _____ State _____
To Treat Well As Follows: Lease Urbah Well No. B1 Customer Order No. _____
Sec. Twp. Range _____ County DSP State K

CONDITIONS: As a part of the consideration hereof it is agreed that Copeland Acid Service is to service or treat at owners risk, the hereinbefore mentioned well and is not to be held liable for any damage that may accrue in connection with said service or treatment. Copeland Acid Service has made no representation, expressed or implied, and no representations have been relied on, as to what may be the results or effect of the servicing or treating said well. The consideration of said service or treatment is payable. There will be no discount allowed subsequent to such date. 8% interest will be charged after 60 days. Total charges are subject to correction by our invoicing department in accordance with latest published price schedules.

The undersigned represents himself to be duly authorized to sign this order for well owner or operator.

THIS ORDER MUST BE SIGNED BEFORE WORK IS COMMENCED

Well Owner or Operator _____ By _____ Agent

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
	1	Pump down for pt...		60.00
	150	60-40-40 Poz...		1455.00
	3	3rd Cement - Chl...		120.00
	23	Bulk Cement up C...		92.50
	200	Cement Bulk H...		70.00
		Bulk Charge		
		Bulk Truck Miles		
		Process License Fee on _____ Gallons		
		TOTAL BILLING		<u>1897.50</u>

I certify that the above material has been accepted and used; that the above service was performed in a good and workmanlike manner under the direction, supervision and control of the owner, operator or his agent, whose signature appears below.

Copeland Representative [Signature]

Station Bick

Remarks _____

Well Owner, Operator or Agent _____

NET 30 DAYS



TREATMENT REPORT

Acid Stage No. 15

Date 10-28-11 District Burrton F. O. No. _____
 Company American Energy Corp
 Well Name & No. UNRH B 1
 Location _____ Field La
 County McPherson State Ka
 Casing: Size 4 1/2 Type & Wt. _____ Set at _____ ft.
 Formation: _____ Perf. _____ to _____ ft.
 Formation: _____ Perf. _____ to _____ ft.
 Formation: _____ Perf. _____ to _____ ft.
 Liner: Size _____ Type & Wt. _____ Top at _____ ft. Bottom at _____ ft.
 Cemented: Yes/No. Perforated from _____ ft. to _____ ft.
 Tubing: Size & Wt. _____ Spung at _____ ft.
 Perforated from _____ ft. to _____ ft.
 Open Hole Size _____ T.D. _____ ft. P.D. to _____ ft.

Type Treatment: Amt. _____ Type Fluid _____ Sand Size _____ Pounds of Sand _____
 Bkdown: _____ Bbl./Gal. _____
 _____ Bbl./Gal. _____
 _____ Bbl./Gal. _____
 _____ Bbl./Gal. _____
 Flush _____ Bbl./Gal. _____
 Treated from _____ ft. to _____ ft. No. ft. _____
 from _____ ft. to _____ ft. No. ft. _____
 from _____ ft. to _____ ft. No. ft. _____
 Actual Volume of Oil/Water to Load Hole: 16 Bbl./Gal.
 Pump Trucks: No. Used: 2 Bbl. _____ Sp. _____ Twin _____
 Auxiliary Equipment Bulk tank 922 JT 133
 Packer: _____ Set at _____ ft.
 Auxiliary Tools _____
 Plugging or Sealing Materials: Type _____

Company Representative _____ Treater Greg Ryd

TIME A.M. <u>10:30</u>	PRESSURES		Total Fluid Pumped	REMARKS
	Tubing	Casing		
<u>2:00</u>				<u>On location TSA Rig up</u>
<u>2:10</u>			<u>0</u>	<u>4 1/2" 400' Jct on 4 1/2" to pack</u>
<u>:</u>			<u>11 BBL</u>	<u>Back circulation start mixing CG @ 10 BBL</u>
<u>:</u>			<u>0</u>	<u>Stem mix going down hole. Add 500# Brown stuff</u>
<u>:</u>			<u>12 BBL</u>	<u>4 BPM rate start pumping pipe out of hole. Clean pipe down</u>
<u>:</u>			<u>13 BBL</u>	<u>2 1/2 BPM rate to keep pipe down</u>
<u>:</u>			<u>32 BBL</u>	<u>150 sacks away last cement fall.</u>
<u>3:00</u>				<u>Wash up take down last location</u>

COPELAND

Acid & Cement

POST OFFICE BOX 438
 HAYSVILLE, KS 67060
 (316) 524-1225
 (316) 524-1027 FAX

Invoice

BURRTON, KS (620) 463-5161
 GREAT BEND, KS (620) 793-3366
 FAX (620) 463-2104 FAX (620) 793-3536

INVOICE NUMBER:
C37818-IN

BILL TO:
 AMERICAN ENERGIES CORP.
 P.O. BOX 516
 CANTON, KS 67428

LEASE: UNRUH B 1 & 2

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE ORDER	SPECIAL INSTRUCTIONS	
11/14/2011	C37818		11/01/2011		NET 30	
QUANTITY	U/M	ITEM NO./DESCRIPTION		D/C	PRICE	EXTENSION
		B#1				
1.00	EA	CEMENT PUMP CHARGE		0.00	650.00	650.00
1.00	EA	POLY RENTAL MULTI WELLS		0.00	200.00	200.00
70.00	SAX	60-40 POZ MIX 4%		0.00	9.69	678.30
7.00	MI	1/3 MILEAGE PUMP TRUCK		0.00	4.00	28.00
14.00	MI	PICKUP MILES ROUND TRIP UNRUH B#2		0.00	2.00	28.00
1.00	EA	CEMENT PUMP CHARGE		0.00	650.00	650.00
1.00	EA	POLY RENTAL		0.00	200.00	200.00
90.00	SAX	60-40 POZ MIX 4%		0.00	9.69	872.10
7.00	MI	1/3 MILEAGE PUMP TRUCK		0.00	4.00	28.00
14.00	MI	PICKUP MILES ROUND TRIP		0.00	2.00	28.00
REMIT TO: P.O. BOX 438 HAYSVILLE, KS 67060		COP-B FUEL SURCHARGE IS NOT TAXABLE AND IS ADDED TO MILEAGE, PUMP AND OR DELIVERY CHARGES ONLY.		Net Invoice: 3,362.40 MCPCO Sales Tax: 124.10 Invoice Total: <u>3,486.50</u>		
RECEIVED BY _____		NET 30 DAYS				

There will be a charge of 1.5% "per month" (18% annual rate) on all accounts over 30 days past due.

Copeland Acid & Cement is a subsidiary of Gresel Oil Field Service
 Gresel Oil Field Service reserves a security interest in the goods sold until the same are paid for in full and reserve all the rights of a secured party under the Uniform Commercial Code



TREATMENT REPORT

Acid Stage No.

Date 11-11 District Barren F. O. No.
 Company American Energy Corp
 Well Name & No. Uweah B 142
 Location Field
 County State

Casing: Size Type & Wt. Set at ft.
 Formation: Perf. to ft.
 Formation: Perf. to ft.
 Liner: Size Type & Wt. Top at ft. Bottom at ft.
 Cemented: Yes/No. Perforated from ft. to ft.
 Tubing: Size & Wt. Spung at ft.
 Perforated from ft. to ft.
 Open Hole Size T.I. ft. P.H. to ft.

Type Treatment: Amt. Type Fluid
 Bkdown Bbl./Gal.
 Bbl./Gal.
 Bbl./Gal.
 Bbl./Gal.
 Flush Bbl./Gal.
 Treated from ft. to ft. No. ft.
 from ft. to ft. No. ft.
 from ft. to ft. No. ft.
 Actual Volume of Oil/Water to Load Hole: Bbl./Gal.
 Pump Trucks, No. Used: Std. 323 HP Twin
 Auxiliary Equipment Bulk tank 323 Tank Tank 133
 Packer: Set at ft.
 Auxiliary Tools
 Plugging or Sealing Materials: Type #1 90 sack #2 90 sack
60-40-470

Company Representative

Treater Ray B

REMARKS

TIME a.m./p.m.	PRESSURES		Total Fluid Pumped	REMARKS
	Tubing	Casing		
3:00				Uweah B 1 Run location Rig up T&A see all three locations Rig up low poly lat. hit @ 75' washed pipe on down to 100' cleanout cement to surface.
3:45			14 Bbl	Slurry 90 sacks Rig down
4:00				Uweah B 2
4:05			2	Rig up Run Poly to Solid hit @ 150' Start mixing going down hole
			18 Bbl	90 sacks cement added cement to surface Wash up trace down

RECEIVE:

NO. 6438

11/14/2011/MON 05:20PM



FIELD ORDER No C 37818

BOX 438 • HAYSVILLE, KANSAS 67060
316-524-1225

DATE Nov 1 2011

IS AUTHORIZED BY: American Energy Services (NAME OF CUSTOMER)

Address _____ City _____ State _____

To Treat Well As Follows: Lease Madison B Well No. 142 Customer Order No. _____

Sec. Twp. Range _____ County Woods State MO

CONDITIONS: As a part of the consideration hereof it is agreed that Copeland Acid Service is to service or treat at owners risk, the hereinbefore mentioned well and is not to be held liable for any damage that may accrue in connection with said service or treatment. Copeland Acid Service has made no representation, expressed or implied, and no representations have been relied on, as to what may be the results or effect of the servicing or treating said well. The consideration of said service or treatment is payable. There will be no discount allowed subsequent to such date. 6% interest will be charged after 60 days. Total charges are subject to correction by our invoicing department in accordance with latest published price schedules.
The undersigned represents himself to be duly authorized to sign this order for well owner or operator.

THIS ORDER MUST BE SIGNED BEFORE WORK IS COMMENCED _____ By _____ Agent

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
		<u>B# 1</u>		
	1	<u>Propyl Glycol</u>		60.00
	1	<u>Big Red Antifreeze</u>		60.00
	700	<u>Water - 100 PPM 90%</u>		630.00
	28	<u>Yard mix & 7000 4-1</u>		30.00
	70	<u>Water - 100 PPM 90%</u>		30.00
		<u>Madison B#2</u>		
	1	<u>Propyl Glycol</u>		60.00
	1	<u>Big Red Antifreeze</u>		60.00
	700	<u>Water - 100 PPM 90%</u>		630.00
	70	<u>Yard mix & 7000 4-1</u>		30.00
	70	<u>Water - 100 PPM 90%</u>		30.00
		<u>Bulk Charge</u>		
		<u>Bulk Truck Miles</u>		
		<u>Process License Fee on</u> _____ <u>Gallons</u>		
TOTAL BILLING				330.00

I certify that the above material has been accepted and used: that the above service was performed in a good and workmanlike manner under the direction, supervision and control of the owner, operator or his agent, whose signature appears below.

Copeland Representative [Signature]

Station _____ Well Owner, Operator or Agent _____

Remarks _____ **NET 30 DAYS**