

ALLIED CEMENTING CO., LLC. 035183

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:

RUSSELL

DATE <u>12-8-11</u>	SEC <u>11</u>	TWP. <u>15 S</u>	RANGE <u>15 W</u>	CALLED OUT	ON LOCATION	JOB START <u>11:30 Am</u>	JOB FINISH <u>12:01 Am</u>
LEASE <u>DIETZ</u>	WELL # <u>2-11</u>	LOCATION <u>V.E.C. Russell, KS, SOUTH-WEST</u>			COUNTY <u>RUSSELL</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)				<u>SOUTH-EAST INTO</u>			

CONTRACTOR
TYPE OF JOB PTA
HOLE SIZE 7 7/8 T.D. 3210
CASING SIZE 8 5/8 DEPTH 820
TUBING SIZE DEPTH
DRILL PIPE 4 1/2 DEPTH 3205
TOOL DEPTH
PRES. MAX MINIMUM
MEAS. LINE SHOE JOINT
CEMENT LEFT IN CSG.
PERFS.
DISPLACEMENT

OWNER

CEMENT
AMOUNT ORDERED 190-60/40/4
+ 1/4# FLO-SEAL

EQUIPMENT
PUMP TRUCK CEMENTER Bob Smith
409 HELPER Todd
BULK TRUCK
378 DRIVER TONY
BULK TRUCK
DRIVER

COMMON	@		
POZMIX	@		
GEL	<u>6.5</u>	@ <u>21.25</u>	<u>138.13</u>
CHLORIDE	@		
ASC	@		
<u>60/40</u>	<u>190</u>	@ <u>14.50</u>	<u>2755.00</u>
<u>FLO-SEAL</u>	<u>48#</u>	@ <u>2.70</u>	<u>129.60</u>
	@		
	@		
	@		
	@		
	@		
HANDLING	<u>198.5</u>	@ <u>2.25</u>	<u>446.63</u>
MILEAGE <u>15x198x.11</u>			<u>327.45</u>
			TOTAL <u>3796.81</u>

REMARKS:

SERVICE

DEPTH OF JOB	<u>3205</u>		
PUMP TRUCK CHARGE			<u>1250.00</u>
EXTRA FOOTAGE	@		
MILEAGE	<u>15</u>	@ <u>7.00</u>	<u>105.00</u>
MANIFOLD	@		
<u>Lotv mileage</u>	<u>15</u>	@ <u>4.00</u>	<u>60.00</u>
	@		
			TOTAL <u>1415.00</u>

Abercrombie Energy

CHARGE TO: ~~VAL ENERGY~~
STREET _____
CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

<u>8 5/8 wooden plug</u>	<u>1</u>	@ <u>112.00</u>	<u>112.00</u>
	@		
	@		
	@		
	@		
			TOTAL <u>112.00</u>

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.

SALES TAX (If Any) _____
TOTAL CHARGES 5323.81
DISCOUNT _____ IF PAID IN 30 DAYS

PRINTED NAME Randy D Martin
SIGNATURE Randy D Martin