

Kansas Corporation Commission Oil & Gas Conservation Division

1085949

Form ACO-1

June 2009

Form Must Be Typed

Form must be Signed

All blanks must be Filled

WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License #	API No. 15
Name:	Spot Description:
Address 1:	SecTwpS. R
Address 2:	Feet from North / South Line of Section
City: State: Zip:+	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	□NE □NW □SE □SW
CONTRACTOR: License #	County:
Name:	Lease Name: Well #:
Wellsite Geologist:	Field Name:
Purchaser:	Producing Formation:
Designate Type of Completion:	Elevation: Ground: Kelly Bushing:
New Well Re-Entry Workover	Total Depth: Plug Back Total Depth:
Oil WSW SWD SIOW Gas D&A ENHR SIGW OG GSW Temp. Abd. CM (Coal Bed Methane) Cathodic Other (Core, Expl., etc.):	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: sx cmt
Operator:	
Well Name:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth: Deepening Re-perf. Conv. to ENHR Conv. to SWD Conv. to GSW	Chloride content: ppm Fluid volume: bbls Dewatering method used:
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	Operator Name:
Dual Completion Permit #:	Lease Name: License #:
SWD Permit #:	Quarter Sec TwpS. R
ENHR Permit #:	County: Permit #:
GSW Permit #:	. 5
Spud Date or Date Reached TD Completion Date or Recompletion Date Recompletion Date	

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:			

Side Two



Operator Name: _ Lease Name: _ _ Well #: _ 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 Wireline Logs surveyed. Attach final geological well site report. **Drill Stem Tests Taken** Yes No Log Formation (Top), Depth and Datum Sample (Attach Additional Sheets) Name Top Datum Samples Sent to Geological Survey ☐ Yes □ No Cores Taken Yes No Electric Log Run Electric Log Submitted Electronically Yes No (If no, Submit Copy) List All E. Logs Run: CASING RECORD Used New Report all strings set-conductor, surface, intermediate, production, etc. Size Hole Size Casing Weight # Sacks Type and Percent Type of Purpose of String Drilled Set (In O.D.) Lbs. / Ft. Additives Depth Cement Used ADDITIONAL CEMENTING / SQUEEZE RECORD Purpose: Depth Type of Cement # Sacks Used Type and Percent Additives Top Bottom Perforate **Protect Casing** Plug Back TD Plug Off Zone PERFORATION RECORD - Bridge Plugs Set/Type Acid, Fracture, Shot, Cement Squeeze Record Shots Per Foot Specify Footage of Each Interval Perforated (Amount and Kind of Material Used) Depth TUBING RECORD: Size: Set At: Packer At: Liner Run: No Yes Producing Method: Date of First, Resumed Production, SWD or ENHR. Pumping Gas Lift Other (Explain) Flowing **Estimated Production** Bbls. Water Bbls. Gas-Oil Ratio Oil Gas Mcf Gravity Per 24 Hours **DISPOSITION OF GAS:** METHOD OF COMPLETION: PRODUCTION INTERVAL: Open Hole Dually Comp. Perf. Commingled Vented Sold Used on Lease (Submit ACO-5) (Submit ACO-4) (If vented, Submit ACO-18.) Other (Specify)

Form	ACO1 - Well Completion		
Operator	Hembree, Robert F		
Well Name	Parker 7		
Doc ID	1085949		

All Electric Logs Run

Duel Compensated Porosity	
Micro Resisitivity	
Sonic Cement Bond	
Duel Induction	

Form	ACO1 - Well Completion		
Operator	Hembree, Robert F		
Well Name	Parker 7		
Doc ID	1085949		

Tops

Name	Тор	Datum
T/Anhydrite	1503	+752
B/Anhydrite	1534	+721
Heebner	3627	-1372
Toronto	3650	-1395
Lansing	3671	-1416
B/KC	3966	-1711
Marmaton	4010	-1755
Pawnee	4091	-1836
Ft. Scott	4172	-1917
Cherokee	4195	-1940
Mississippi	4265	-2010
RTD	4273	-2018
LTD	4271	-2016



HEMBREE, ROBERT F

25,18S,24W NESS

PARKER #7

Tester:

Unit No:

PO BOX 542

NESS CITY KS 67560 Job Ticket: 46951

ATTN: SCOTT ALBERG

Job Ticket: 46951 **DST#:1**Test Start: 2012.04.17 @ 19:52:00

GENERAL INFORMATION:

Formation: FORT SCOTT

Deviated: No Whipstock: ft (KB) Test Type: Conventional Bottom Hole (Initial)

Time Tool Opened: 22:15:30 Time Test Ended: 03:20:30

Interval:

4162.00 ft (KB) To 4202.00 ft (KB) (TVD)

Total Depth: 4202.00 ft (KB) (TVD)

Hole Diameter: 7.88 inches Hole Condition: Fair

Reference Elevations: 2260.00 ft (KB)

RANDY WILLIAMS

63

KB to GR/CF: 7.00 ft

2253.00 ft (CF)

Serial #: 8790 Inside

Press@RunDepth: 49.89 psig @ 4164.00 ft (KB) Capacity: 8000.00 psig

 Start Date:
 2012.04.17
 End Date:
 2012.04.18
 Last Calib.:
 2012.04.18

 Start Time:
 19:52:05
 End Time:
 03:20:29
 Time On Btm:
 2012.04.17 @ 22:14:30

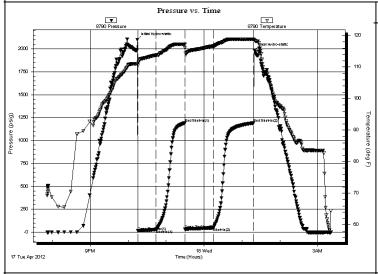
 Time Off Btm:
 2012.04.18 @ 01:19:30

TEST COMMENT: IF- FBB, BUILT BOTTOM BUCKET IN 10 MIN'S INTO OPEN

ISI-NBB

FF-SBB. BOTTOM OF BUCKET IN 30 SEC

FSI-NBB



Time	Pressure	Temp	Annotation
(Min.)	(psig)	(deg F)	
0	2096.83	110.99	Initial Hydro-static
1	14.24	110.47	Open To Flow (1)
29	28.30	113.77	Shut-In(1)
75	1191.96	117.15	End Shut-In(1)
76	32.08	116.09	Open To Flow (2)
121	49.89	116.64	Shut-In(2)
184	1190.25	118.75	End Shut-In(2)
185	1983.20	118.59	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
1.00	CLEAN OIL	0.01
29.00	SGOCM, 5% GAS, 10% OIL, 85% MUD	0.42
60.00	MOG, 10% MUD, 25% OIL, 65% GAS	0.88
0.00	1359 GIP	0.00

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)
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Trilobite Testing, Inc Ref. No: 46951 Printed: 2012.04.18 @ 08:00:02



FLUID SUMMARY

HEMBREE, ROBERT F

25,18S,24W NESS

PO BOX 542

PARKER # 7

NESS CITY KS 67560

Job Ticket: 46951 **DST#:1**

ATTN: SCOTT ALBERG

Test Start: 2012.04.17 @ 19:52:00

Mud and Cushion Information

Mud Type: Gel Chem Cushion Type: Oil API: deg API

Mud Weight: 9.00 lb/gal Cushion Length: ft Water Salinity: 6000 ppm

Viscosity: 48.00 sec/qt Cushion Volume: bbl

Water Loss: 11.17 in³ Gas Cushion Type:

Resistivity: ohm.m Gas Cushion Pressure: psig

Salinity: 6000.00 ppm Filter Cake: 2.00 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
1.00	CLEAN OIL	0.015
29.00	SGOCM, 5% GAS, 10% OIL, 85% MUD	0.424
60.00	MOG, 10% MUD, 25% OIL, 65% GAS	0.877
0.00	1359 GIP	0.000

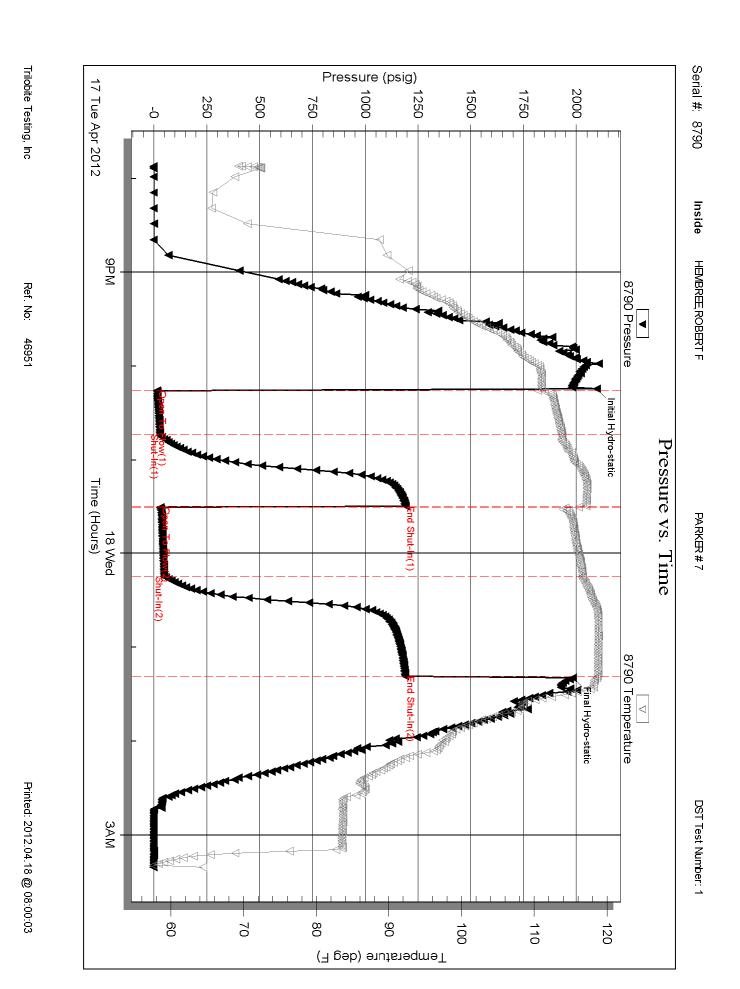
Total Length: 90.00 ft Total Volume: 1.316 bbl

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

Laboratory Name: Laboratory Location:

Recovery Comments:

Trilobite Testing, Inc Ref. No: 46951 Printed: 2012.04.18 @ 08:00:03





HEMBREE, ROBERT F

NESS CITY KS 67560

25,18S,24W NESS

PO BOX 542

PARKER #7

Job Ticket: 46952

Test Start: 2012.04.18 @ 16:40:00

ATTN: SCOTT ALBERG

GENERAL INFORMATION:

Formation: MISS

Deviated: Test Type: Conventional Bottom Hole (Initial) No Whipstock: ft (KB)

Time Tool Opened: 18:55:30 Time Test Ended: 04:34:00

Tester: Unit No:

4218.00 ft (KB) To 4273.00 ft (KB) (TVD)

Reference Elevations: 2260.00 ft (KB)

RANDY WILLIAMS

Total Depth: 4273.00 ft (KB) (TVD) 2253.00 ft (CF)

DST#: 2

7.88 inches Hole Condition: Fair Hole Diameter:

KB to GR/CF: 7.00 ft

Serial #: 8790 Press@RunDepth: Inside

1263.26 psig @

4252.00 ft (KB)

Capacity:

8000.00 psig

Start Date: 2012.04.18 End Date:

Last Calib.: Time On Btm: 2012.04.19

Start Time:

Interval:

16:40:05

End Time: 04:34:00

2012.04.19

Time Off Btm:

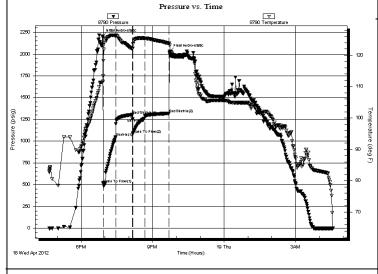
2012.04.18 @ 18:54:00 2012.04.18 @ 21:43:00

TEST COMMENT: IF- SBB, BUILT BOTTOM BUCKET 1 MIN

ISI- BB. BUILT 3 INCH'S

FF- SBB. BUILT BOTTOM BUCKET 30 SEC

FSI- NBB



PRESSURE SUMMARY

1	Time	Pressure	Temp	Annotation
l	(Min.)	(psig)	(deg F)	
l	0	2202.62	111.37	Initial Hydro-static
l	2	512.52	113.36	Open To Flow (1)
l	33	1050.29	126.20	Shut-In(1)
l	75	1304.21	122.07	End Shut-In(1)
l	76	1085.24	122.21	Open To Flow (2)
l	106	1263.26	125.42	Shut-In(2)
l	168	1318.47	123.72	End Shut-In(2)
l	169	2031.58	123.12	Final Hydro-static
l				
l				
l				
l				
l				

Recovery

Length (ft)	Description	Volume (bbl)
1071.00	CLEAN OIL	5.27
2190.00	CLEN OIL REVERSED OUT	10.77
126.00	GWMCO 20% GAS,5% WATER, 20% N	IU0.62;% OIL
0.00	126 GIP	0.00

Gas Rates

Choke (inches) Pressure (psig) Gas Rate (Mcf/d)

Trilobite Testing, Inc. Ref. No: 46952 Printed: 2012.04.21 @ 15:15:37



HEMBREE, ROBERT F

25,18S,24W NESS

PO BOX 542

PARKER # 7

NESS CITY KS 67560

Job Ticket: 46952

ATTN: SCOTT ALBERG

Test Start: 2012.04.18 @ 16:40:00

DST#: 2

GENERAL INFORMATION:

Formation: MISS

Deviated: No Whipstock: ft (KB) Test Type: Conventional Bottom Hole (Initial)

Time Tool Opened: 18:55:30 Tester: RANDY WILLIAMS

Time Test Ended: 04:34:00 Unit No:

Interval: 4218.00 ft (KB) To 4273.00 ft (KB) (TVD) Reference Elevations: 2260.00 ft (KB)

Total Depth: 4273.00 ft (KB) (TVD) 2253.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Fair KB to GR/CF: 7.00 ft

Serial #: 8792

Press@RunDepth: psig @ ft (KB) Capacity: 8000.00 psig

Start Date: 2012.04.18 End Date: 2012.04.19 Last Calib.: 1899.12.30

 Start Time:
 16:40:05
 End Time:
 04:34:00
 Time On Btm:

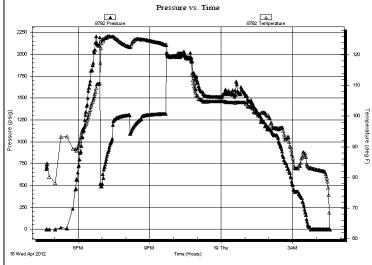
 Time Off Btm:
 Time Off Btm:
 Time Off Btm:

TEST COMMENT: IF- SBB, BUILT BOTTOM BUCKET 1 MIN

ISI- BB, BUILT 3 INCH'S

FF- SBB, BUILT BOTTOM BUCKET 30 SEC

FSI- NBB



MMARY

	Time	Pressure	Temp	Annotation
			(-l: F)	
	(Min.)	(psig)	(deg F)	
⊣				
Temperature (deg F)				
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Recovery

Length (ft)	Description	Volume (bbl)
1071.00	CLEAN OIL	5.27
2190.00	CLEN OIL REVERSED OUT	10.77
126.00	GWMCO 20% GAS,5% WATER, 20% N	IU0.62;% OIL
0.00	126 GIP	0.00

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)
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Trilobite Testing, Inc Ref. No: 46952 Printed: 2012.04.21 @ 15:15:37



FLUID SUMMARY

HEMBREE, ROBERT F

25,18S,24W NESS

PO BOX 542

PARKER # 7

NESS CITY KS 67560

Job Ticket: 46952 **DST#: 2**

ATTN: SCOTT ALBERG

Test Start: 2012.04.18 @ 16:40:00

Mud and Cushion Information

Mud Type:Gel ChemCushion Type:Oil A Pl:32 deg A PlMud Weight:9.00 lb/galCushion Length:ftWater Salinity:8000 ppm

Mud Weight:9.00 lb/galCushion Length:ftViscosity:50.00 sec/qtCushion Volume:bbl

Water Loss: 11.17 in³ Gas Cushion Type:

Resistivity: ohm.m Gas Cushion Pressure: psig

Salinity: 8000.00 ppm Filter Cake: 2.00 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
1071.00	CLEAN OIL	5.267
2190.00	CLEN OIL REVERSED OUT	10.770
126.00	GWMCO 20% GAS,5% WATER, 20% MUD,	5! 0.620
0.00	126 GIP	0.000

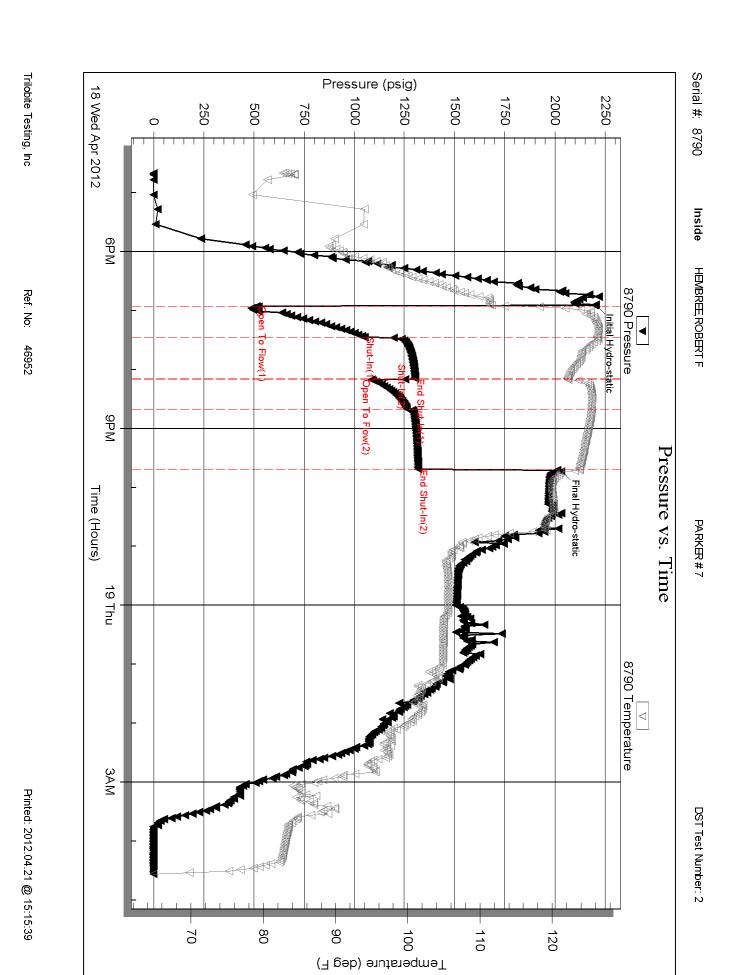
Total Length: 3387.00 ft Total Volume: 16.657 bbl

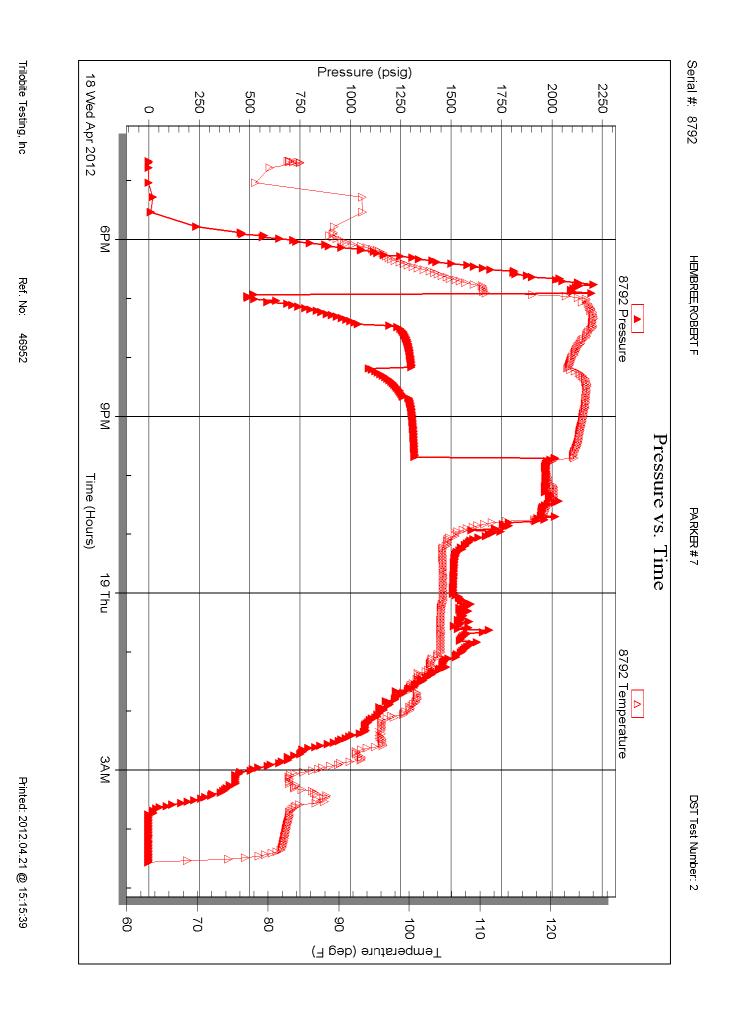
Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:

Laboratory Name: Laboratory Location:

Recovery Comments:

Trilobite Testing, Inc Ref. No: 46952 Printed: 2012.04.21 @ 15:15:38







PO Box 93999 Southlake, TX 76092

Voice:

(817) 546-7282

Fax:

(817) 246-3361

Bill To:

Robert F. Hembree P O Box 542 Ness City, KS 67560



Invoice Number: 130779

Invoice Date: Apr 13, 2012

Page:

1



Customer ID	Well Name# or Customer P.O.	Payment Terms					
Hem	Parker #7	Net 30 Days					
Job Location	Camp Location	Service Date	Due Date				
KS1-01	Great Bend	Apr 12, 2012	5/13/12				

Quantity	Item	Description	Unit Price	Amount
165.00		Class A Common	16.25	2,681.25
3.00		Gel	21.25	63.75
6.00		Chloride	58.20	349.20
178.20		Handling	2.10	374.22
	SER	Ton Miles	19.13	57.38
1.00		Surface	1,125.00	1,125.00
	SER	Heavy Vehicle Mileage	7.00	21.00
	SER	Light Vehicle Mileage	4.00	12.00
	EQUIP OPER	Greg Redetzke		
1.00		Jonathon Ploutz		
1.00	OPER ASSIST	Kevin Weighous		
		A Company of the Comp		
		Subtotal		4,683.80

ALL PRICES ARE NET, PAYABLE 30 DAYS FOLLOWING DATE OF INVOICE. 1 1/2% CHARGED THEREAFTER. IF ACCOUNT IS CURRENT, TAKE DISCOUNT OF

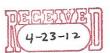
\$ 936.76

ONLY IF PAID ON OR BEFORE
May 8, 2012

Subtotal	4,683.80
Sales Tax	194.93
Total Invoice Amount	4,878.73
Payment/Credit Applied	
TOTAL	4,878.73

_ 936.76

3,941.97



ALLIED OIL & GAS SERVICES, LLC 053511

Federal Tax I.D.# 20-5975804

REMIT TO P.O. B	OX 31 ELL, KAN	SAS 6766	5			SER	VICE POINT;	Bend, \$3
4-12-12	SEC. 25	TWP./S	RANGE 74	CALLED OU	IT	ON LOCATION	JOB START	JOB FINISH
PARKER	100	70	0.7	. A:1	137	1:: 2-	COUNTY	STATE
LEASE	WELL#		LOCATION NE	1 2 1	77	/ WORTH	Ness	1 1
OLD ON NEW C	rcle one)		14 41851	5047	K	into,	1//	
CONTRACTOR TYPE OF JOB		gr Fa		OWNE	R ,	Kobert	He.M.D.	ree
HOLE SIZE	17:14	T.D.	1117	CEME		- 1		-1 1
CASING SIZE	15/80	ラ [#] DEF	6111	AMOL	INT OR	DERED 165	* 1	1/412 A
TUBING SIZE	7	DEF	TH	_ 3%	CC ,	10/4 ge	/	
DRILL PIPE			TH					
TOOL		DEI			40N	115	011.75	2.681.35
PRES. MAX			NIMUM			165	@ 76.20	2.001.
MEAS. LINE CEMENT LEFT II	V CSC	SHC	DE JOINT	POZM GEL	1X	3	@ 21.25	63.75
PERFS.	V C3U.	/	77/2		RIDE	Lo	@ 58-20	349.30
DISPLACEMENT	,	121	9.3 BBZ					
Didi Bi tebindin		IPMENT	0/6/				@	
	EQU	A PICERVE ER					@	-
DI I AD TOLICIA	CEMENT	CD (Treat				@	
PUMP TRUCK # 395	HELPER	EK	7				@	
BULK TRUCK	HELPER		3622		····		@	
# 3º//	DRIVER		Ceris 5				@	
BULK TRUCK	DIGITER		<u> </u>				_@	-
#	DRIVER			TI A NIE	N INC	178.2	@ 	374-33
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1315place a		12,93	BBL free			OB 218		
	2407 1	<u> </u>	11			K CHARGE		12.50
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X19 Cow		C) <	1.00.410			Hum 3		
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STREET								
CITY	ST	ATE	ZIP			PLUG & FLOA	AT EQUIPME	NT
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To: Allied Oil &								
You are hereby	requested	to rent cer	menting equipme	nt ——			e	
and furnish cem	enter and	helper(s)	to assist owner or			***************************************		
			he above work w				TOTA	L
done to satisfact	tion and su	pervision	of owner agent of)T			IOIA	
contractor. I ha	ve read an	d understa	and the "GENERA	AL SALF	STAX	(If Anv)		
TERMS AND C	CONDITIO)NS" liste	d on the reverse s	side.		4// 5	13 80	
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	1920	XX	fou,					



ADDRESS CITY, STATE, ZIP CODE	ROBERT F. HEMBRES	
CITY, STATE, ZIP CODE	ADDRESS	
	CITY, STATE, ZIP CODE	

TICKET

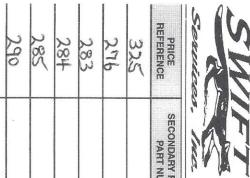
Nº 21685

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.	DATE SIGNED TIME SIGNED 1900 PART. 785-798-2300	IST BE SIGNED BY CUSTOMER, OR CHEFOMER'S AGENT PRIOR TO ART OF WORK OR THE DESCRIPTION OF THE PRIOR TO	LIMITED WARRANTY provisions. SWIFT SERVICES INC	the terms and conditions on the reverse side hereof which include, REMIT PAYMENT TO:	A CO. LANCH BOWN LONG & BALLER		HOST LOWE TOP IT & 66	1 Censul Basilets	HO2 CESTRALIZES	281 1 MUSTLUSH	221 1 Grand Ker	578 Pump Charge	S7S MILEAGE #114	PRICE SECONDARY REFERENCE/ ACCOUNTING DESCRIPTION REFERENCE PART NUMBER LOC ACCT DF	JCTIONS	WELL LYPE WELL CALEGORY JOB PURPOSE	CE PICUZEU DRIG # 10	7 PARKER	WELL NOW IECT NO
mer hereby acknowledges receipt of the materials and services listed on	ARE YOU SATISFIED WITH OUR SERVICE? CUSTOMER DID NOT WISH TO RESPOND	WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?		UIO	TRE EA		R 66	2 (8)	10 [84	500 Car	2/600	1 30% 4265	10 ME	TION QTY. JUM QTY.	2, 3 o al 1 Fight — 40		SHIPPED	JESS KS	The Value of the V
his ticket.	TOTAL 12	101285 18 7 587105 XVII	#2 3992 50	AGREE PAGE TOTAL 7485 00	150 00	1400	2400	250 00	70000 700000	125 62500	25/00 50/00	7 1500 00 1500 00	60,00	U/M PRICE AMOUNT	THE SECTION OF THE SE	WELL LOCATION	ORDER NO.	4-19-12 SAME	

SWIFT OPERATOR WAYNE WASON

APPROVAL

Thank You!



TICKET CONTINUATION

No. 21685

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		2		4	14.		2													SECONDARY REFERENCE/ PART NUMBER	· /ma.	
														_		AND THE PROPERTY OF		_		LOC ACCT DF	Off: 785-798-2300	PO Box 466.
																				TIME		
CHARGE TOTAL WEIGHT LOADED MILES	SERVICE CHARGE		· ·							-		i)	,	D-Aip	CFR-	CALSEAL	SALT		STANDARD CEMENT F	DESCRIPTION	CUSTOMER F. HEMBREE	
TON MILES	CUBIC FEET											1	-	2/GAL	100 (85	SAS SO	900185		5	OTY. UM	WELL PARKED	
2116	175					 		 								800 USS				מדץ. מדא	47	
250 00	2 00													3500	+100	35,00	20	2 00	32/38	PRICE	DATE 4-19-12	No. 21685
250	350 00	Luid Statement III							programme from				1	70 00	400100	280 00	180 00	100100	236250	AMOUNT	PAGE °5	

SWIFT Services, Inc. JOB LOG DATE 1-19-12 PAGE NO. WELL NO. CUSTOMER F. JOB, TYPE LONGSTRENG HEMRRES CHART NO. PUMPS PRESSURE (PSI) DESCRIPTION OF OPERATION AND MATERIALS CASING 1900 ON LOCATION 2330 START 51/2" CASENG IN WELL SET = 4265' TD-4270 5/2# 15,5 TP-4270 ST-42 MARKER JT #8 (10.66) CENTEALDORD-1,3,5,7,9,11,13,15,17,65 CMT BSKIS - 9.66 PORT COURS 1475 TOPOT # 66 1000 Deap Ball - CREWLATE - SET PARKIESHOE 0130 450 PUMP 500 GAL MUSTUSH 0220 12 0222 20 450 PUMP 20 BRS KCL-FLUSH PLUG RH (305KS) 0227 41/2 6230 35 300 Max CEMENT - 145 SKS EA-2 = 15.4 PAG 0242 WASH OUT PUMP - LINES

RELEASE LATCH DOWN PLUG

1500 PLUG DOWN - PSEUP LATTH IN PLUG

THANK YOU

WAWE, DAVE K., WORK TSAAC

DISPLACE PLUG

OK RELEASE PST-HELD

WASH TRUCK

JOB COMPLETE

0242

0245

0300

0302

0400

6'6

100.6



ODRESS	PLOBERT F. HEMBREE

TICKET

Nº 21695

		CODE		PAGE	OF -
CONTROL					
1. NESS CIAT K	S TO THE STATE OF	PRICED	ONE COL	4-26-12 OWNER	SAME
2.	TICKET TYPE CONTRACTOR	RIG NAME/NO.	PPED DELIVERED TO OF	ORDER NO.	
e.	Siers	WELL CATEGORY JOB PURPOSE	WEIL PERMIT NO WEIL	WELL LOCATION	THE REPORT OF THE PERSON OF TH
A .	077	-1		VESC CON SWEET YOU'S	fast I buis
REFERRAL LOCATION	INVOICE INSTRUCTIONS			er de compez de de la compezidad de la c	-
PRICE	SECONDARY REFERENCE/ PART NUMBER LOC ACCT	DESCRIPTION	QTY. UMM QTY. UMM	UNIT	AMOUNT
\$78		MILEAGE # 110	10 ME	8	60,00
5760		Pamp CHARGE	- 48	1250 00	125000
)oS	-	PORT COLUMN OPENDAG TOOL	1 48	350 00	35000
330		SWEET MULTE DESERY STANDED	150 515	16/50	2475/00
276	_	Hoare	30 02	2 00	00 00
290		O-ADR	2 64	3500	708
(85		SERVICE CHARGE CEMPENT	175 50	2 00	35000
K82		Marianum Dearage	1739010s 86.95 mm	25000	250 00
					-
LEGAL TERMS: Cu the terms and condition	LEGAL TERMS : Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include,	REMIT PAYMENT TO:	OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?	PAGE TOTAL	4905100
LIMITED WARRANTY provisions	LIMITED WARRANTY provisions.	SWIFT SERVICES INC	WE ONDERS TOOL AND MET YOUR NEEDS? OUR SERVICE WAS		· annesses shareful
MUST BE SIGNED BY CUSTOMER OR CUST- START OF WORK OR DELIVERY OF GOODS	MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS	•	WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS	7 xx1	0% XX!
×	TIME GOVED	NESS CITY, KS 67560	RVICE?	16.3/0	_
4-26-12		785-798-2300	CUSTOMER DID NOT WISH TO RESPOND	TOTAL	5093 6°

SWIFT OPERATOR WAYNE WILSON

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket

APPROVAL

OKembros

Thank You!

SWIFT Services, Inc. JOB LOG DATE 4-26-12 PAGE NO. WELL NO. ₽7 CUSTOMER ROBERT F. HEMBREE JOB TYPE CEMENT PORT COLINE TICKET NO. PARKER PRESSURE (PSI)
UBING CASING CHART RATE (BPM) VOLUME (BBL) (GAL) PUMPS DESCRIPTION OF OPERATION AND MATERIALS NO. TUBING 0800 CONTAINS LO TUBENG-23/8 CASENG-5/2" PORT Course . 1475' 1000 PSE TEST CASENG - HELD 0835 OPEN PORT COURS - IN RATE 0840 3 2 350 41/4 Max Congue 150 SKS SMD 0850 83 400 DISPLACE CEMENT 0910 4 550 CLOSE PORT COLUMN - PSE TEST HELD 0920 1000 CORCULATED 15 SED CEMENT TO PET RUN 4 JTS - CARCUATE CLEAN 0930 4 20 400 WASH TROCK - PULL TOOK JOB COMPLETE 1000 THANK YOU WAYNE, JEFF, ISAAC

