



Cement Surface Pipe

FIELD ORDER N° C 39536

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

DATE 4/27/12 20__

IS AUTHORIZED BY: Beer Petroleum
(NAME OF CUSTOMER)

Address _____ City _____ State _____

To Treat Well As Follows: Lease Armstrong Well No. B-2 Customer Order No. _____

Sec. Twp. Range _____ County Pownee State ks

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 _____
Well Owner or Operator Agent

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
	50	mileage pump truck	4. ⁰⁰ / ₁	200. ⁰⁰
	50	mileage pickup	2. ⁰⁰	100. ⁰⁰
	1	Pump Charge		1,100. ⁰⁰
	175	60% 40 poz - 2% sel.	9. ²⁵	1,618. ⁷⁵
	100	Common	11. ²⁵ / ₁	1,125. ⁰⁰
	12	Calcium Chloride	40. ⁰⁰ / ₁	480. ⁰⁰
	1	8 ⁵ / ₈ " plug		65. ⁰⁰
	1	8 ⁵ / ₈ " baffle		105. ⁰⁰
	287	Bulk Charge	1. ²⁵ / ₁₅	358. ⁷⁵
		Bulk Truck Miles 12.88 T x 50 m = 644 Tm x 1.14	1. ¹⁰ / ₁	708. ⁴⁰
		Process License Fee on _____ Gallons		
TOTAL BILLING				5,860. 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 Nathan W.

Station G.B.

Dick S. RECEIVED
Well Owner, Operator or Agent JUL 09 2012

Remarks _____

NET 30 DAYS

KCC WICHITA



Acid & Cement

TREATMENT REPORT

Acid Stage No.

Date 4/27/12 District G.B. F.O. No. C39536
Company Beer Petroleum
Well Name & No. Armstrongs B-2
Location Field
County Pounce State KS

Type Treatment: Amt. Type Fluid Sand Size Pounds of Sand
Bkdown Bbl./Gal.
Flush Bbl./Gal.
Treated from ft. to ft. No. ft.
Actual Volume of Oil/Water to Load Hole: Bbl./Gal.
Pump Trucks No. Used: Std. 320 Sp. Twin.
Auxiliary Equipment 317/310
Packer: Set at ft.
Auxiliary Tools
Plugging or Sealing Materials: Type

Casing: Size 8 5/8" Type & Wt. Set at ft.
Formation: Perf. to
Liner: Size Type & Wt. Top at ft. Bottom at ft.
Tubing: Size & Wt. Swung at ft.
Perforated from ft. to ft.

Company Representative Dick S. Treater Nathan W.

Table with columns: TIME (A.M./P.M.), PRESSURES (Tubing, Casing), Total Fluid Pumped, and REMARKS. Includes handwritten entries for 7:45 and 11:30 with remarks like 'On location', '8 5/8" @ 411', 'Baffle @ 371', 'Breek circulation w/ pump truck', 'Mix 175 sts 60/40 ... 2% sel, 3% C.C.', 'Displace w/ 23.5' bbls. @ 6 bpm @ 300# Circulated cement to surface', and 'Thank You! Nathan W.'.

RECEIVED
JUL 09 2012
KCC WICHITA