

Mike's Testing & Salvage Inc.

P.O. Box 467
Chase, KS 67524

Invoice

Date	Invoice #
10/17/2012	13574

Bill To
Trek AEC, LLC 155 N. Market, Suite 710 Wichita, Kansas 67202

P.O. No.	Lease	County
	M. Yost 1	Marion

Qty	Description	Rate	Amount
21	Hrs	195.00	4,095.00T
	Sand	40.00	40.00T
5	Sx Cement	12.50	62.50T
	Casing Knife	250.00	250.00T
2	Nights out of Town	210.00	420.00T
	9/26/12 Came out. Had trouble backing ring into location due to rain. Seals carried into location. Ran to Galva, loaded 2bbls of sand. Couldn't get truck into location, still raining. Shut down. 4hrs		
	9/27/12 Came out, pulled tubing out. Had trouble with packer setting. Ran down with bailer. Tagged bottom @ 3073'. Had trouble getting water truck in. Dumped sand. Waited on backhoe to dig cellar out. Tagged sand @ 2843'. Dumped 5sx cement with bailer. Set floor. Took backhoe over to P.J. Jost #2 to dig cellar out. Cleaned location. Shut down. 10hrs		
	9/28/12 Came out. Got 13" of stretch. Cut casing @ 1804' and @ 1563'. Laid casing out. Couldn't get rig out. Shut down. 7hrs		
	10/2/12 Rigged up Copeland. Ran poly to 280'. Spotted 50sx hot plug. Pulled poly out. Waited. Ran poly. Tagged cement @ 165'. Circulated cement to surface with 70sx 60/40poz 4% gel. Pulled poly out. Job Done.		
	KCC: Hunt Sales Tax	7.80%	379.67

Total			\$5,247.17
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FIELD ORDER N° C 38090

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

DATE Oct 2 20 12

IS AUTHORIZED BY: American Energy Corp (NAME OF CUSTOMER)
Address _____ City _____ State _____
To Treat Well _____ As Follows: Lease Sost Well No. M 1 Customer Order No. _____
Sec. Twp. _____ Range _____ County Marion 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

Well Owner or Operator

By

Agent

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
	1	Pump chg for plug Job		650 ⁰⁰
	1	Poly pipe basket		850 ⁰⁰
	50 sack	Slack A com @ 11.25 / for Hot plug		562 ⁵⁰
	3 sack	Calcium Chloride @ 40 ⁰⁰ / bag		120 ⁰⁰
	70 sack	60-40-4% Poz @ 9 ⁰⁰ / sack.		630 ⁰⁰
	65 mile	Yrth luvy milky for pump track @ 4 ⁰⁰ / mile		262 ⁵⁰
	65 mile	Yrth round trip milky for pick up @ 2 ⁰⁰ / mile		130 ⁰⁰
	120 ⁰⁰	Bulk Charge @ 1.25 / sack		150 ⁰⁰
	352 ⁷⁵	Bulk Truck Miles @ 1.10 / 1000 mils		388 ⁰⁰
		Process License Fee on _____ Gallons		
		TOTAL BILLING		2929.05

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 Bullet

Well Owner, Operator or Agent

Remarks Physed out 4:00

NET 30 DAYS

