



WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # \_\_\_\_\_

Name: \_\_\_\_\_

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

CONTRACTOR: License # \_\_\_\_\_

Name: \_\_\_\_\_

Wellsite Geologist: \_\_\_\_\_

Purchaser: \_\_\_\_\_

Designate Type of Completion:

- New Well       Re-Entry       Workover
- Oil       WSW       SWD       SIOW
- Gas       D&A       ENHR       SIGW
- OG       GSW       Temp. Abd.
- CM (Coal Bed Methane)
- Cathodic       Other (Core, Expl., etc.): \_\_\_\_\_

If Workover/Re-entry: Old Well Info as follows:

Operator: \_\_\_\_\_

Well Name: \_\_\_\_\_

Original Comp. Date: \_\_\_\_\_ Original Total Depth: \_\_\_\_\_

- Deepening       Re-perf.       Conv. to ENHR       Conv. to SWD
- Conv. to GSW
- Plug Back: \_\_\_\_\_ Plug Back Total Depth \_\_\_\_\_
- Commingled      Permit #: \_\_\_\_\_
- Dual Completion      Permit #: \_\_\_\_\_
- SWD      Permit #: \_\_\_\_\_
- ENHR      Permit #: \_\_\_\_\_
- GSW      Permit #: \_\_\_\_\_

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
-----------------------------------	-----------------	---

API No. 15 - \_\_\_\_\_

Spot Description: \_\_\_\_\_

\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West

\_\_\_\_\_ Feet from  North /  South Line of Section

\_\_\_\_\_ Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE       NW       SE       SW

County: \_\_\_\_\_

Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Field Name: \_\_\_\_\_

Producing Formation: \_\_\_\_\_

Elevation: Ground: \_\_\_\_\_ Kelly Bushing: \_\_\_\_\_

Total Depth: \_\_\_\_\_ Plug Back Total Depth: \_\_\_\_\_

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: \_\_\_\_\_

feet depth to: \_\_\_\_\_ w/ \_\_\_\_\_ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: \_\_\_\_\_ ppm Fluid volume: \_\_\_\_\_ bbls

Dewatering method used: \_\_\_\_\_

Location of fluid disposal if hauled offsite: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Lease Name: \_\_\_\_\_ License #: \_\_\_\_\_

Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West

County: \_\_\_\_\_ Permit #: \_\_\_\_\_

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: \_\_\_\_\_



Operator Name: \_\_\_\_\_ Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West 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 Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No  Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i>  List All E. Logs Run: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Top Datum
---	---

CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
_____ Perforate _____ Protect Casing _____ Plug Back TD _____ Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD:      Size: \_\_\_\_\_ Set At: \_\_\_\_\_ Packer At: \_\_\_\_\_ Liner Run:  Yes  No

Date of First, Resumed Production, SWD or ENHR. \_\_\_\_\_ Producing Method:  Flowing  Pumping  Gas Lift  Other *(Explain)* \_\_\_\_\_

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
-----------------------------------	-----------	---------	-------------	---------------	---------

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
---	--	--

Form	ACO1 - Well Completion
Operator	Palomino Petroleum, Inc.
Well Name	4J Trust 1
Doc ID	1129239

Tops

Name	Top	Datum
Krider	2280	(- 73)
Winfield	2335	(- 128)
Towanda	2404	(- 197)
Topeka	3271	(-1064)
Heebner	3674	(-1467)
Toronto	3694	(-1487)
Douglass Sh.	3707	(-1500)
Lansing	3726	(-1519)
BKC	4019	(-1812)
Pawnee	4107	(-1900)
Ft. Scott	4136	(-1929)
Cherokee Sh.	4157	(-1950)
Cherokee Sd.	4170	(-1963)
LTD	4334	(-2127)



RECEIVED  
NOV 21 2012

PAGE 1 of 1	C NO 1008319	INVOICE DATE 11/19/2012
<b>INVOICE NUMBER</b> <b>1718 - 91053715</b>		

**Pratt** (620) 672-1201  
 B PALOMINO PETROLEUM INC  
 I 4924 SE 84ST  
 L NEWTON  
 L KS US 67114  
 T  
 O **ATTN:** ACCOUNTS PAYABLE

J **LEASE NAME** 4J Trust 1  
 O **LOCATION**  
 B **COUNTY** Pawnee  
 S **STATE** KS  
 I **JOB DESCRIPTION** Cement-New Well Casing/Pi  
 T  
 E **JOB CONTACT**

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40536093	27463		Net - 30 days	12/19/2012

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<i>For Service Dates: 11/16/2012 to 11/16/2012</i>				
0040536093				
171807161A Cement-New Well Casing/Pi 11/16/2012 Cement P.T.A.				
60/40 POZ	170.00	EA	9.00	1,529.91 T
Cement Gel	294.00	EA	0.19	55.12 T
"Unit Mileage Chg (PU, cars one way)"	85.00	MI	3.19	270.92
Heavy Equipment Mileage	170.00	MI	5.25	892.45
"Proppant & Bulk Del. Chgs., per ton mil	625.00	EA	1.20	749.95
Depth Charge; 1001'-2000'	1.00	EA	1,124.93	1,124.93
Blending & Mixing Service Charge	170.00	BAG	1.05	178.49
"Service Supervisor, first 8 hrs on loc.	1.00	EA	131.24	131.24

<b>PLEASE REMIT TO:</b>	<b>SEND OTHER CORRESPONDENCE TO:</b>	<b>SUB TOTAL</b>	4,933.01
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	<b>TAX</b>	131.56
PO BOX 841903	801 CHERRY ST, STE 2100	<b>INVOICE TOTAL</b>	5,064.57
DALLAS, TX 75284-1903	FORT WORTH, TX 76102		





Customer <u>PALOMINO PET.</u>	Lease No.	Date <u>11-16-2012</u>			
Lease <u>45 TRUST</u>	Well # <u>1</u>				
Field Order # <u>07161</u>	Station <u>PRATT, KS.</u>	Casing "D.P." <u>4 1/2 D.P.</u>	Depth	County <u>PAWNEE</u>	State <u>Ks.</u>
Type Job <u>CNW - P.T.A.</u>	Formation <u>"4334"</u>	Legal Description <u>11-20-19</u>			

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP	
			<u>CMT -</u>	<u>50 SKS. 600/40 P2</u>			Max	5 Min.
Depth	Depth	From	To	Pre Pad			Min	10 Min.
Volume	Volume	From	To	Pad			Avg	15 Min.
Max Press	Max Press	From	To	Frac			HHP Used	Annulus Pressure
Well Connection	Annulus Vol.	From	To	Flush			Gas Volume	Total Load
Plug Depth	Packer Depth	From	To					

Customer Representative <u>EBALDO</u>	Station Manager <u>D. SCOTT</u>	Treater <u>K. LESLEY</u>
---------------------------------------	---------------------------------	--------------------------

Service Units	<u>37586</u>	<u>27463</u>	<u>19826</u>	<u>19860</u>					
Driver Names	<u>LESLEY</u>	<u>MCGRAW</u>	<u>LAWRENCE</u>	<u>---</u>					

Time	Casing Pressure	Tubing Pressure	Bbbs. Pumped	Rate	Service Log
<u>12:00AM</u>					<u>ON LOCATION - SAFETY MEETING</u>
<u>6:30AM</u>					<u>*1ST PLUG @ 1350' w/50SKS.</u>
<u>6:46AM</u>	<u>300</u>		<u>15</u>	<u>6</u>	<u>H2O AHEAD</u>
<u>6:42AM</u>	<u>200</u>		<u>12.</u>	<u>6</u>	<u>MIX 50SKS. CMT. @ 13.8PPG</u>
<u>6:43AM</u>	<u>200</u>		<u>4</u>	<u>6</u>	<u>H2O BEHIND CMT.</u>
<u>6:45AM</u>	<u>0</u>		<u>12</u>	<u>6</u>	<u>MUD DISPLACEMENT</u>
<u>7:25AM</u>					<u>*2ND PLUG @ 570' w/50SKS.</u>
<u>7:27AM</u>	<u>100</u>		<u>5</u>	<u>4</u>	<u>H2O AHEAD</u>
<u>7:29AM</u>	<u>100</u>		<u>12.73</u>	<u>4</u>	<u>MIX 50SKS. CMT. @ 13.8PPG</u>
<u>7:30AM</u>	<u>0</u>		<u>3</u>	<u>4</u>	<u>H2O DISPLACEMENT</u>
<u>7:45AM</u>					<u>*3RD PLUG @ 60' w/20SKS.</u>
<u>7:47AM</u>			<u>5</u>	<u>3</u>	<u>MIX 20SKS. CMT. - CMT. TO SURFACE</u>
<u>8:15AM</u>	<u>0</u>		<u>6</u>	<u>2</u>	<u>PLUG R.H.</u>
<u>8:20AM</u>	<u>0</u>		<u>4</u>	<u>2</u>	<u>PLUG M.H.</u>

JOB COMPLETE,  
THANKS -  
KEVEN LESLEY



RECEIVED  
NOV 16 2012

PAGE 1 of 1	CUST NO 1008319	INVOICE DATE 11/14/2012
INVOICE NUMBER <b>1718 - 91050391</b>		

Pratt (620) 672-1201  
 B PALOMINO PETROLEUM INC  
 I 4924 SE 84ST  
 L NEWTON  
 L KS US 67114  
 T  
 O ATTN: ACCOUNTS PAYABLE

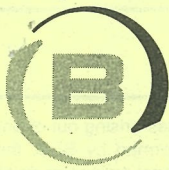
J LEASE NAME 4 J Trust 1  
 O LOCATION  
 B COUNTY Pawnee  
 S STATE KS  
 I JOB DESCRIPTION Cement-New Well Casing/Pi  
 T  
 E JOB CONTACT

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40534079	20920		Net - 30 days	12/14/2012

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<i>For Service Dates: 11/09/2012 to 11/09/2012</i>				
0040534079				
171807402A Cement-New Well Casing/Pi 11/09/2012				
Cement 8 5/8" Surface				
60/40 POZ	350.00	EA	9.00	3,150.11 T
Celloflake	88.00	EA	2.78	244.21 T
Calcium Chloride	903.00	EA	0.79	711.14 T
"Top Rubber Cmt Plug, 8 5/8" ""	1.00	EA	168.76	168.76
"Unit Mileage Chg (PU, cars one way)"	85.00	MI	3.19	270.95
Heavy Equipment Mileage	170.00	MI	5.25	892.53
"Proppant & Bulk Del. Chgs., per ton mil	1,279.00	EA	1.20	1,534.85
Depth Charge; 0-500'	1.00	EA	750.03	750.03
Blending & Mixing Service Charge	350.00	BAG	1.05	367.51
Plug Container Util. Chg.	1.00	EA	187.51	187.51
"Service Supervisor, first 8 hrs on loc.	1.00	EA	131.25	131.25

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	8,408.85
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	340.75
PO BOX 841903	PO BOX 10460	INVOICE TOTAL	8,749.60
DALLAS, TX 75284-1903	MIDLAND, TX 79702		





**BASIC**<sup>SM</sup>  
ENERGY SERVICES  
PRESSURE PUMPING & WIRELINE

10244 NE Hwy. 61  
P.O. Box 8613  
Pratt, Kansas 67124  
Phone 620-672-1201

**FIELD SERVICE TICKET**  
1718 07402 A

DATE \_\_\_\_\_ TICKET NO. \_\_\_\_\_

DATE OF JOB <i>11-09-12</i> DISTRICT <i>PRATT KS</i>		NEW WELL <input checked="" type="checkbox"/> OLD WELL <input type="checkbox"/> PROD <input type="checkbox"/> INJ <input type="checkbox"/> WDW <input type="checkbox"/> CUSTOMER ORDER NO.:							
CUSTOMER <i>PALOMINO - PETRO</i>		LEASE <i>4 J TRUST</i> WELL NO. <i>1</i>							
ADDRESS		COUNTY <i>PAWNEE</i> STATE <i>KS</i>							
CITY STATE		SERVICE CREW <i>Sullivan, Wright, Phyc</i>							
AUTHORIZED BY		JOB TYPE: <i>CNW 8 5/8 surface</i>							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM PM	TIME
<i>23708-20920</i>	<i>30</i>					<i>11-9-12</i>	<i>11-9-12</i>		<i>4:00</i>
<i>70959-19918</i>	<i>30</i>					ARRIVED AT JOB			<i>6:45</i>
<i>37900</i>						START OPERATION			<i>9:05</i>
						FINISH OPERATION			<i>9:30</i>
						RELEASED			<i>10:15</i>
						MILES FROM STATION TO WELL			<i>85</i>

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP.

SIGNED: \_\_\_\_\_  
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
<i>CP 103</i>	<i>600/40 pot cont</i>	<i>SK</i>	<i>350</i>		<i>4,200.00</i>
<i>CC 102</i>	<i>cellulose</i>	<i>lb</i>	<i>88</i>		<i>325.60</i>
<i>CC 109</i>	<i>Calcium chloride</i>	<i>lb</i>	<i>903</i>		<i>948.15</i>
<i>CF 105</i>	<i>Top 3 Pulv. Plug 8 5/8</i>	<i>SA</i>	<i>1</i>		<i>225.00</i>
<i>C 100</i>	<i>pump mi</i>	<i>mi</i>	<i>85</i>		<i>361.25</i>
<i>E 101</i>	<i>Heavy Equat mi</i>	<i>mi</i>	<i>170</i>		<i>1,190.00</i>
<i>E 113</i>	<i>Ball Valve</i>	<i>TM</i>	<i>1279</i>		<i>2,046.80</i>
<i>CE 200</i>	<i>Depth device 0-500'</i>	<i>SA</i>	<i>1</i>		<i>1,000.00</i>
<i>CE 240</i>	<i>Blending - mixing</i>	<i>SK</i>	<i>350</i>		<i>490.00</i>
<i>CE 504</i>	<i>Plug Counter Rental</i>	<i>SA</i>	<i>1</i>		<i>250.00</i>
<i>S 003</i>	<i>Solution Separator</i>	<i>SA</i>	<i>1</i>		<i>175.00</i>

CHEMICAL / ACID DATA:			

SUB TOTAL		<i>DLS</i>	<i>8,408.95</i>
SERVICE & EQUIPMENT	%TAX ON \$		
MATERIALS	%TAX ON \$		
TOTAL			

SERVICE REPRESENTATIVE *Robert Sullivan* THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: \_\_\_\_\_  
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO. \_\_\_\_\_



**BASIC**<sup>SM</sup>  
ENERGY SERVICES  
PRESSURE PUMPING & WIRELINE

10244 NE Hwy. 61  
P.O. Box 8613  
Pratt, Kansas 67124  
Phone 620-672-1201

FIELD SERVICE TICKET  
1718 07402 A

DATE \_\_\_\_\_ TICKET NO. \_\_\_\_\_

DATE OF JOB		DISTRICT		NEW WELL <input type="checkbox"/>		OLD WELL <input type="checkbox"/>		PROD <input type="checkbox"/>		INJ <input type="checkbox"/>		WDW <input type="checkbox"/>		CUSTOMER ORDER NO.:	
CUSTOMER				LEASE				WELL NO.							
ADDRESS				COUNTY				STATE							
CITY				STATE				SERVICE CREW							
AUTHORIZED BY				JOB TYPE:											
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME					
						ARRIVED AT JOB									
						START OPERATION									
						FINISH OPERATION									
						RELEASED									
						MILES FROM STATION TO WELL									

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP.

SIGNED: \_\_\_\_\_  
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
					4 200 00
					325 60
					948 15
					225 00
					361 25
					1,190 00
					2,046 80
					1,000 00
					490 00
					250 00
					175 00

CHEMICAL / ACID DATA:			

SUB TOTAL		
SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		

SERVICE REPRESENTATIVE	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY:
------------------------	---

FIELD SERVICE ORDER NO.

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

Customer <i>PAID MINO - PRATT</i>	Lease No.	Date <i>11-09-12</i>	
Lease <i>43 TRUST</i>	Well #		
Field Order # <i>1406</i>	Station <i>PRATT KS</i>	Casing <i>8 5/8</i>	Depth <i>518</i>
		County <i>PAWNEE</i>	State <i>KS</i>
Type Job <i>CNW 8 5/8 Surface</i>	Formation	Legal Description <i>11-20-19</i>	

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP	
<i>8 5/8</i>				Pre Pad	Max		5 Min.	
Depth <i>518</i>	Depth	From	To	Pad	Min		10 Min.	
Volume <i>32</i>	Volume	From	To	Frac	Avg		15 Min.	
Max Press <i>200</i>	Max Press	From	To		HHP Used		Annulus Pressure	
Well Connection <i>P.C.</i>	Annulus Vol.	From	To	Flush	Gas Volume		Total Load	
Plug Depth <i>300</i>	Packer Depth	From	To					

Customer Representative	Station Manager <i>DAVE SCOTT</i>	Treater <i>Robert J. Smith</i>
Service Units <i>27900 33708 20920 70959 19918</i>		
Driver Names <i>Sullivan Wright Phyllis</i>		

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>6:45</i>					<i>on for softy molly</i>
					<i>run 12 JTS 8 5/8 # 23 csp</i>
<i>8:50</i>					<i>CASING ON BOTTOM</i>
<i>8:55</i>					<i>Hook Rig circ.</i>
<i>9:05</i>	<i>150</i>		<i>3</i>	<i>4</i>	<i>At SPACER</i>
				<i>5</i>	<i>mix cement 350 slk 60/40 part 20 gal 30 cc 1/4 ct</i>
			<i>75</i>		<i>run mix &amp; shut down</i>
					<i>Release Plug</i>
				<i>4</i>	<i>At Ann</i>
<i>9:30</i>	<i>250</i>		<i>32</i>		<i>plug cleared</i>
					<i>circ 15 hrs to pit</i>
					<i>JOB complete</i>
					<i>Thank you</i>