



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1158367
OIL & GAS CONSERVATION DIVISION

Form ACO-1

August 2013

Form must be Typed
Form must be Signed
All blanks must be Filled

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
- Plug Back Conv. to GSW Conv. to Producer
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

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

GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum: NAD27 NAD83 WGS84

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Vertical 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

- Confidentiality Requested
Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____



1158367

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

INSTRUCTIONS: Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

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

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
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*

Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*

Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? Yes No *(If No, fill out Page Three of the ACO-1)*

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
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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> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Date: 7-12-13 District: AT Band Ticket No: 060997
 Company: Benedix Rig: Benedix
 Lease: Kalbourn 06100 Well No.: 2
 County: Hodgekum State: KS
 Location: Selma 651810 1/2 Field: 155

CEMENT DATA:
 Spacer Type: _____
 Amt: _____ Skys Yield _____ ft³/sk Density _____ PPG

CASING DATA: Conductor PTA Squeeze Misc
 Surface Intermediate Production Liner
 Size: 8 1/2 Type: _____ Weight: _____ Collar: _____

LEAD: Pump Time _____ hrs. Type Open A 35cc
 Excess _____

Amt. 70 Skys Yield 1.17 ft³/sk Density 15.6 PPG

TAIL: Pump Time _____ hrs. Type _____
 Excess _____

Amt. _____ Skys Yield _____ ft³/sk Density _____ PPG

WATER: Lead _____ gals/sk Tail _____ gals/sk Total _____ Bbls.

Casing Depths: Top _____ Bottom _____

Pump Trucks Used 398 - Jack Isaac
 Bulk Equip. 344-12 - Shawn Reese

Drill Pipe: Size _____ Weight _____ Collars _____
 Open Hole: Size _____ T.D. _____ ft. P.B. to _____ ft.

Float Equip: Manufacturer _____

CAPACITY FACTORS:

Casing: Bbls/Lin. ft. -0637 Lin. ft./Bbl. _____
 Open Holes: Bbls/Lin. ft. _____ Lin. ft./Bbl. _____
 Drill Pipe: Bbls/Lin. ft. _____ Lin. ft./Bbl. _____
 Annulus: Bbls/Lin. ft. _____ Lin. ft./Bbl. _____
 Bbls/Lin. ft. _____ Lin. ft./Bbl. _____

Shoe: Type _____ Depth _____

Float: Type _____ Depth _____

Centralizers: Quantity _____ Plugs Top _____ Btm. _____

Stage Collars _____

Special Equip. _____

Perforations: From _____ ft to _____ ft Amt. _____

Disp. Fluid Type H2O Amt. 3/4 Bbls. Weight _____ PPG

Mud Type _____ Weight _____ PPG

COMPANY REPRESENTATIVE _____

CEMENTER Tom Osburn

TIME	PRESSURES PSI		FLUID PUMPED DATA			REMARKS
	DRILL PIPE CASING	ANNULUS	TOTAL FLUID	Pumped Per Time Period	RATE Bbls Min.	
						Annular seal, Rig up
11:20 AM			1 1/2		1	Break Circ
11:27 AM			19.58		3	Start Cement
11:32 AM			3/4			Disp
12:00 AM						Finished

MILLER PRINTERS, INC. - Great Bend, KS

ALLIED OIL & GAS SERVICES, LLC

Federal Tax I.D. # 20-8651475

060497

WELL FILE

KAT

REMIT TO P.O. BOX 93999
SOUTHLAKE, TEXAS 76092

SERVICE POINT:

Great Bend, KS

DATE <u>7-12-13</u>	SEC. <u>29</u>	TWP. <u>23</u>	RANGE <u>23</u>	CALLED OUT <u>8:00 PM</u>	ON LOCATION <u>11:00 PM</u>	JOB START <u>11:30 PM</u>	JOB FINISH <u>12:00 AM</u>
LEASE <u>Katheryn Oldwo</u>		WELL # <u>2</u>		LOCATION <u>Jehonah 1-5 to Rd G, 1 East</u>		COUNTY <u>Hodgeman</u>	STATE <u>Ks</u>
OLD OR NEW (Circle one)			<u>1 Month, 1/2 East, N/into</u>				

CONTRACTOR Rueda
 TYPE OF JOB Re-cement
 HOLE SIZE _____ T.D. _____
 CASING SIZE 8 5/8 DEPTH _____
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG 30'
 PERFS. _____
 DISPLACEMENT 3/4 bbl

OWNER Some
 CEMENT
 AMOUNT ORDERED Prock Class A 35cc
used 70 lbs

COMMON	<u>70</u>	@ <u>17.90</u>	<u>1,253.00</u>
POZMIX		@	
GEL	<u>2</u>	@ <u>64.00</u>	<u>128.00</u>
CHLORIDE		@	
ASC		@	
		@	
		@	
		@	
		@	
		@	
		@	
		@	
HANDLING	<u>72.83</u>	@ <u>2.48</u>	<u>180.61</u>
MILEAGE	<u>3.37 x 30 x</u>	<u>2.60</u>	<u>262.86</u>
TOTAL			<u>1,824.47</u>

EQUIPMENT
 PUMP TRUCK CEMENTER Tom Dushon
 # 398 HELPER Josh Isaac
 BULK TRUCK
 # 344-112 DRIVER Shawn Keam
 BULK TRUCK
 # _____ DRIVER _____

REMARKS:
Surface crew had hole approx 40' down.
Worked to top. Pumped 1 1/2 bbls H2O &
Prock circulated. Mixed 70 lbs class A
35cc & circulated cement to surface.
Displaced 3/4 bbls H2O
Shank
3

SERVICE
 DEPTH OF JOB _____
 PUMP TRUCK CHARGE 1512.35
 EXTRA FOOTAGE @ _____
 MILEAGE Hvm 30 @ 7.70 231.00
 MANIFOLD @ _____
hvm 30 @ 4.40 132.00
 @ _____
 TOTAL 1,875.35

CHARGE TO: Borexco LLC
 STREET _____
 CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT
 @ _____
 @ _____
 @ _____
 @ _____
 @ _____
 TOTAL _____

To: Allied Oil & Gas Services, 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.

PRINTED NAME Ricky Walker
 SIGNATURE Ricky Walker

SALES TAX (If Any) _____
 TOTAL CHARGES 3,699.72
924.93
 DISCOUNT _____ IF PAID IN 30 DAYS
2,774.79

ALLIED OIL & GAS SERVICES, LLC 060581

Federal Tax I.D. # 20-8651475

REMIT TO P.O. BOX 93999
SOUTHLAKE, TEXAS 76092

KATHRYN # 2 OWWO

SERVICE POINT: Great Bend

DATE <u>7-17-13</u>	SEC. <u>29</u>	TWP. <u>23</u>	RANGE <u>23</u>	CALLED OUT	ON LOCATION	JOB START <u>6:30 AM</u>	JOB FINISH <u>7 AM</u>	
LEASE <u>Braxco</u>	WELL # <u>1-29</u>	LOCATION <u>Wellmore</u>			FILE # <u>65 to rd 6</u>	COUNTY <u>Haskell</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one) <u>NEW</u>		East, North & East, Nints						

CONTRACTOR Braxco LLC

TYPE OF JOB Production 2 stage Bottom

HOLE SIZE 7 7/8 T.D. 5389

CASING SIZE 5 1/2 15.5# DEPTH 5300

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL DV DEPTH 1603

PRES. MAX. _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT 84 FT

CEMENT LEFT IN CSG. 84 FT

PERFS. _____

DISPLACEMENT 124.14

OWNER _____

CEMENT

AMOUNT ORDERED 50 sks 60/40 8% gel 1/4 flo
200 sks ASC 2% gel 6% Gye 10% salt
5# GIL 4DF

COMMON <u>B</u>	@		
POZMIX _____	@		
GEL _____	@		
CHLORIDE _____	@		
ASC <u>200</u>	@	<u>20.90</u>	<u>4180.00</u>
<u>Gilsewitz 1000</u>	@	<u>.94</u>	<u>940.00</u>
<u>FI-160 56</u>	@	<u>18.90</u>	<u>1058.40</u>
<u>DF 28</u>	@	<u>9.80</u>	<u>274.40</u>
<u>Lite mix 50</u>	@	<u>15.95</u>	<u>797.50</u>
	@		
	@		
	@		
HANDLING <u>295.87</u>	@	<u>2.48</u>	<u>733.60</u>
MILEAGE <u>12.85 x 30</u>		<u>2.60</u>	<u>1002.84</u>
TOTAL			<u>9026.74</u>

EQUIPMENT

PUMP TRUCK CEMENTER Josh Geac

597 HELPER Charrels Canyon

BULK TRUCK

609/241 DRIVER Shawn Kearns

BULK TRUCK

544 DRIVER Dan Casper

421 / 250

REMARKS:

pump 5 bbl Fresh water Ahead

mix 50 sks 60/40 8% gel 1/4 flo

mix 200 sks ASC 2% gel

Wash up Cement pump & lines

displace plug down

land plug at 1200 psi

lift pressure 400

Float head

Open d/d tool 1100 psi

Circulate for 4 hrs

CHARGE TO: Braxco LLC

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE 2765.75

EXTRA FOOTAGE _____ @ _____

MILEAGE Hwy 30 @ 2.70 231.00

MANIFOLD _____ @ _____

Hwy 30 @ 4.40 132.00

TOTAL 3.128.75

PLUG & FLOAT EQUIPMENT

5 1/2 industrial Roamer

Guide shoe @ 118.75 118.75

latch down plug Assy @ _____

5 turbulizers @ 45.00 225.00

dr tool @ 2.597.00 2.597.00

5 baskets @ 161.25 806.25

1 stock collar 19.75 19.75

TOTAL 3.767.25

To: Allied Oil & Gas Services, 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.

PRINTED NAME X

SIGNATURE Mark DeL

Thank you 8/6

SALES TAX (If Any) _____

TOTAL CHARGES 15922.74

DISCOUNT 3403.53 IF PAID IN 30 DAYS

12.521.21

KATHRYN #2 OWWO

CEMENTING LOG

STAGE NO. **WELL FILE**

Date: 7-17-13 District: Great Bend Ticket No. 60501 60502
 Company: Budco inc Rig: Budco 2
 Lease: Wetmore 65 1A 1N Well No. 1-29
 County: Hodgeman State: KS
 Location: Wetmore 65 1A 1N Field: 29-23-23
2B 10100

CEMENT DATA:
 Spacer Type: 5 bbls Ahead
 Amt. _____ Skys Yield _____ ft³/sk Density _____ PPG

CASING DATA: Conductor PTA Squeeze Misc
 Surface Intermediate Production Liner
 Size 5 1/2 Type NU Weight 15.5 Collar _____

LEAD: Pump Time _____ hrs. Type light cement
with 1/4 flo Excess _____
 Amt. 50 Skys Yield 1.9 ft³/sk Density 12.5 PPG
 TAIL: Pump Time 1000 hrs. Type ASC 10% Sulf
2 1/2 gel 5 1/2 gel Excess _____
 Amt. 200 Skys Yield 1.56 ft³/sk Density 14.66 PPG
 WATER: Lead _____ gals/sk Tail _____ gals/sk Total _____ Bbls.

Casing Depths: Top KB Bottom 3300

Pump Trucks Used 597 Charls K.
 Bulk Equip. 609 Shaver
544 Dan C.

Drill Pipe: Size _____ Weight _____ Collars _____
 Open Hole: Size 7 1/8 T.D. 5352 ft. P.B. to _____ ft.

Float Equip: Manufacturer 5 1/2 Industrial Rubber
 Shoe: Type Guide shoe Depth _____
 Float: Type late down plug A. Depth _____

CAPACITY FACTORS:
 Casing: Bbls/Lin. ft. 10238 Lin. ft./Bbl. _____
 Open Holes: Bbls/Lin. ft. _____ Lin. ft./Bbl. _____
 Drill Pipe: Bbls/Lin. ft. _____ Lin. ft./Bbl. _____
 Annulus: Bbls/Lin. ft. _____ Lin. ft./Bbl. _____
 Bbls/Lin. ft. _____ Lin. ft./Bbl. _____

Centralizers: Quantity 5 Plugs Top _____ Btm. _____
 Stage Collars NU
 Special Equip. 5 Baskets
 Disp. Fluid Type Fresh water Amt. 124.14 Bbls. Weight 8.34 PPG
 Mud Type 70 / 54.14 Weight _____ PPG

Perforations: From _____ ft. to _____ ft. Amt. _____

COMPANY REPRESENTATIVE _____

CEMENTER Shsh Isaac

TIME	PRESSURES PSI		FLUID PUMPED DATA			REMARKS
	DRILL PIPE CASING	ANNULUS	TOTAL FLUID	Pumped Per Time Period	RATE Bbls Min.	
						Production 2 stage Bottom stage
						Rig up - had safety meeting
						pump 5 bbls Ahead
						mix 50 sks 60/40 8% gel by Pm
						mix 200 sks ASC 2% gel
						Wash up pump & lines
						displace plug down
						plug did land 1200 psi
						lift pressure 700 psi
						float did hold
						open dir tool 1100 psi
						Circulator 4 hrs

ALLIED OIL & GAS SERVICES, LLC 060582

Federal Tax I.D. # 20-8651475

REMIT TO P.O. BOX 93999
SOUTHLAKE, TEXAS 76092

KATHRYN #2 OWWO

SERVICE POINT:

Great Bend
WELL FILE

DATE <i>7-17-13</i>	SEC <i>29</i>	TWP <i>23</i>	RANGE <i>23</i>	CALLED OUT	ON LOCATION	JOB START <i>7am</i>	JOB FINISH <i>7:30 Am</i>
LEASE # 8-1-13	WELL # <i>1-29</i>	LOCATION <i>Jessmore, 65, 1E, 1N,</i>			COUNTY <i>Haskell</i>	STATE <i>KS</i>	
OLD OR NEW (Circle one) <u>NEW</u>			<i>1/2 E, N140</i>				

CONTRACTOR *Brexco LLC*
 TYPE OF JOB *production 2 stage - Top*
 HOLE SIZE *7 1/2* T.D. *5389*
 CASING SIZE *5 1/2* DEPTH *5300*
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX MINIMUM
 MEAS. LINE SHOE JOINT
 CEMENT LEFT IN CSG.
 PERFS.
 DISPLACEMENT

OWNER
 CEMENT
 AMOUNT ORDERED *400 sks 60/40*
8% gel 1/4 Flo

EQUIPMENT
 PUMP TRUCK CEMENTER *Josh Ugan*
 # *597* HELPER *Charles Kenyon*
 BULK TRUCK
 # *609/241* DRIVER *Shannon Earns*
 BULK TRUCK
 # *544* DRIVER *Don Cappel*
421/250

COMMON			
POZMIX			
GEL	@		
CHLORIDE	@		
ASC	@		
<i>400sk life</i>	@	<i>15.95</i>	<i>6,380.00</i>
<i>float</i>	<i>100</i>	<i>2.97</i>	<i>297.00</i>
	@		
	@		
	@		
	@		
	@		
	@		
HANDLING	@	<i>2.48</i>	<i>1,122.26</i>
MILEAGE	@	<i>2.60</i>	<i>1,452.82</i>
TOTAL			<i>9,252.08</i>

REMARKS:
30sk 20sk
plug RH + MH - 60/40
5 mix 300 sks down center hole
shut down wash pump and 15m
displace 39.24 bush water
land plug at 1050 psi
lift pressure 450 psi
plug down 7:15
Rig down 7:30

SERVICE
 DEPTH OF JOB
 PUMP TRUCK CHARGE *2406.25*
 EXTRA FOOTAGE @
 MILEAGE @
 MANIFOLD @
 @
 @

CHARGE TO: *Brexco LLC*
 STREET
 CITY STATE ZIP

TOTAL *2406.25*

To: Allied Oil & Gas Services, 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.

PLUG & FLOAT EQUIPMENT
 @
 @
 @
 @
 @
 TOTAL

PRINTED NAME *Maile Del*
 SIGNATURE *[Signature]*

SALES TAX (If Any)
 TOTAL CHARGES *11,658.33*
 DISCOUNT *3,264.33*
 IF PAID IN 30 DAYS
8,393.99

Thank you

Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Mark Sievers, Chairman
Thomas E. Wright, Commissioner
Shari Feist Albrecht, Commissioner

Sam Brownback, Governor

September 24, 2013

Evan Mayhew
BEREXCO LLC
2020 N. BRAMBLEWOOD
WICHITA, KS 67206-1094

Re: ACO1
API 15-083-21172-00-01
Katheryn 2-29
SW/4 Sec.29-23S-23W
Hodgeman County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,
Evan Mayhew