



PO Box 93999
Southlake, TX 76092

Voice: (817) 546-7282
Fax: (817) 246-3361

INVOICE

Invoice Number: 138603
Invoice Date: Sep 11, 2013
Page: 1

Bill To:
Carrie Exploration & Development LLC 210 West 22nd Street Hays, KS 67601

Now Includes:



Customer ID	Field Ticket #	Payment Terms	
Carrie	61858	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS2-01	Great Bend	Sep 11, 2013	10/11/13

Quantity	Item	Description	Unit Price	Amount
		Doll C #1		
180.00	CEMENT MATERIALS	Class A Common	17.90	3,222.00
3.00	CEMENT MATERIALS	Gel	23.40	70.20
6.00	CEMENT MATERIALS	Chloride	64.00	384.00
194.00	CEMENT SERVICE	Cubic Feet	2.48	481.12
106.36	CEMENT SERVICE	Ton Mileage	2.60	276.54
1.00	CEMENT SERVICE	Surface	1,512.25	1,512.25
12.00	CEMENT SERVICE	Pump Truck Mileage	7.70	92.40
12.00	CEMENT SERVICE	Light Vehicle Mileage	4.40	52.80
1.00	EQUIPMENT OPERATOR	Charles Kinyon		
1.00	EQUIPMENT OPERATOR	Kevin Eddy		
1.00	OPERATOR ASSISTANT	Shawn Kearns		

Subtotal	6,091.31
Sales Tax	262.85
Total Invoice Amount	6,354.16
Payment/Credit Applied	
TOTAL	6,354.16

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

\$ 1,461.91

ONLY IF PAID ON OR BEFORE

Oct 6, 2013

ALLIED OIL & GAS SERVICES, LLC 061858

Federal Tax I.D. # 20-8651475

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

SERVICE POINT:
Great Bend

DATE <u>9-11-13</u>	SEC <u>19</u>	TWP. <u>19</u>	RANGE <u>10</u>	CALLED OUT <u>6:30 PM</u>	ON LOCATION <u>8:00 PM</u>	JOB START <u>10:30 AM</u>	JOB FINISH <u>11:00 PM</u>
LEASE <u>2011 "C"</u>		WELL # <u>1</u>		LOCATION <u>Ellinwood E To Coline</u>		COUNTY <u>Rice</u>	STATE <u>KS</u>
OLD OR <input checked="" type="radio"/> NEW (Circle one)				<u>N TO K RD. 1/2 E N INTO</u>			

CONTRACTOR Southwind

TYPE OF JOB Surface

HOLE SIZE 12 1/2" T.D. 296

CASING SIZE 8 5/8" 24# DEPTH 298

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 15 FT

PERFS. _____

DISPLACEMENT Fresh H2O 18.02 BBV

OWNER CARRIE EXPLORATION

CEMENT AMOUNT ORDERED 180 SKS Class A 3 1/2 CC 2 1/2 gel

COMMON	<u>180</u>	@	<u>17.90</u>	<u>3.222</u>
POZMIX		@		
GEL	<u>3</u>	@	<u>23.40</u>	<u>70.20</u>
CHLORIDE	<u>6</u>	@	<u>64.00</u>	<u>384.00</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>194 x</u>	@	<u>2.48</u>	<u>481.12</u>
MILEAGE	<u>8.86 x 12 x</u>	@	<u>2.60</u>	<u>276.54</u>
				TOTAL <u>4.433.86</u>

EQUIPMENT

PUMP TRUCK CEMENTER CHARLES KINYON

597 HELPER KEVIN EDDY

BULK TRUCK

599 DRIVER SHAWN KEARNS

BULK TRUCK

_____ DRIVER _____

REMARKS:

RUN 298' OF CSG Break Circulation
w/ R15 Mud mix 180 SKS Class A
3 1/2 CC 2 1/2 gel Displace 18.02 BBV
H2O 5 BBV H2O Ahead mix 180 class
A 3 1/2 CC 2 1/2 gel Displace 18.02 BBV
H2O cement did circulate
shut in

SERVICE

DEPTH OF JOB	<u>298</u>		
PUMP TRUCK CHARGE	<u>1512.35</u>		
EXTRA FOOTAGE		@	
MILEAGE	<u>Hum 12</u>	@	<u>7.70</u> <u>92.40</u>
MANIFOLD		@	
	<u>Hum 12</u>	@	<u>4.40</u> <u>52.80</u>
		@	

CHARGE TO: CARRIE EXPLORATION

STREET _____

CITY _____ STATE _____ ZIP _____

TOTAL 1.657.75

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 X William Sanders

SIGNATURE X William Sanders

SALES TAX (If Any) _____

TOTAL CHARGES 6,091.31

DISCOUNT 1,461.91 IF PAID IN 30 DAYS

4,629.39

Thank you!

Invoice

COPELAND

Acid & Cement

POST OFFICE BOX 438
 HAYSVILLE, KS 67060
 (316) 524-1225
 (316) 524-1027 FAX

BURRTON, KS ♦ GREAT BEND, KS
 (620) 463-5161 (620) 793-3366
 FAX (620) 463-2104 FAX (620) 793-3536

INVOICE NUMBER:
C41444-IN

BILL TO:

CARRIE EXPLORATION & DEV., LLC
 210 WEST 22ND STREET
 HAYS, KS 67601

LEASE: DOLL B C-1

*Cement
port
call*

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE ORDER	SPECIAL INSTRUCTIONS	
09/30/2013	C41444		09/26/2013		NET 30	
QUANTITY	U/M	ITEM NO./DESCRIPTION		D/C	PRICE	EXTENSION
15.00	MI	CEMENT MILEAGE PUMP TRUCK		0.00	4.00	60.00
15.00	MI	CEMENT MILEAGE PU TRUCK		0.00	2.00	30.00
1.00	EA	CEMENT PUMP CHARGE		0.00	950.00	950.00
450.00	SAX	65-35 POZ MIX 2% GEL		0.00	9.25	4,162.50
16.00	SAX	4% ADDITIONAL GEL		0.00	22.00	352.00
466.00	EA	BULK CHARGE		0.00	1.25	582.50
307.56	MI	BULK TRUCK - TON MILES		0.00	1.10	338.32
REMIT TO: P.O. BOX 438 HAYSVILLE, KS 67060		COP		Net Invoice:		6,475.32
RECEIVED BY _____		FUEL SURCHARGE IS NOT TAXABLE AND IS ADDED TO MILEAGE, PUMP AND OR DELIVERY CHARGES ONLY.		RICCO Sales Tax:		67.93
		NET 30 DAYS		Invoice Total:		6,543.25

*10-4-13
4068*

There will be a charge of 1.5% "per month" (18% annual rate) on all accounts over 30 days past due.



FIELD ORDER N° C 1114

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

DATE 9 26 80 20

IS AUTHORIZED BY: _____ (NAME OF CUSTOMER)

Address _____ City _____ State _____

To Treat Well As Follows: Lease _____ Well No. _____ Customer Order No. _____

Sec. Twp. Range _____ County _____ State _____

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
2				
2				
2				
2				
2				
2		Bulk Charge		
2		Bulk Truck Miles		
		Process License Fee on _____ Gallons		
		TOTAL BILLING		4

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 _____

COPELAND

Acid & Cement

POST OFFICE BOX 438
 HAYSVILLE, KS 67060
 (316) 524-1225
 (316) 524-1027 FAX

Invoice

BURRTON, KS ♦ GREAT BEND, KS
 (620) 463-5161 (620) 793-3366
 FAX (620) 463-2104 FAX (620) 793-3536

INVOICE NUMBER:
C41466-IN

BILL TO:
CARRIE EXPLORATION & DEV., LLC
210 WEST 22ND STREET
HAYS, KS 67601

LEASE: DOLL BC-1

Ordered

C

Cement to squeeze

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE ORDER	SPECIAL INSTRUCTIONS	
09/30/2013	C41466		09/30/2013		NET 30	
QUANTITY	U/M	ITEM NO./DESCRIPTION		D/C	PRICE	EXTENSION
20.00	MI	CEMENT MILEAGE PUMP TRUCK		0.00	4.00	80.00
20.00	MI	CEMENT MILEAGE PU TRUCK		0.00	2.00	40.00
1.00	EA	CEMENT PUMP CHARGE		0.00	950.00	950.00
75.00	SAX	COMMON CEMENT		0.00	11.25	843.75
50.00	LB	C12		0.00	3.75	187.50
1.00	EA	MIN. BULK CHARGE		0.00	150.00	150.00
1.00	MI	MIN. BULK TRUCK - TON MILES		0.00	150.00	150.00
		<i>10-4-13</i> <i>#4068</i>				
REMIT TO: P.O. BOX 438 HAYSVILLE, KS 67060		COP		Net Invoice:		2,401.25
RECEIVED BY _____		NET 30 DAYS		RICCO Sales Tax:		67.93
				Invoice Total:		2,469.18

There will be a charge of 1.5% "per month" (18% annual rate) on all accounts over 30 days past due.



FIELD ORDER N° C 17400

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

DATE 9/1/13 20

IS AUTHORIZED BY: [Signature]
(NAME OF CUSTOMER)

Address _____ City _____ State _____

To Treat Well As Follows: Lease [Signature] Well No. EC-1 Customer Order No. _____

Sec. Twp. Range _____ County Pice State Mo

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
2		mile a pump truck	4.00	8.00
2	30	miles a pickup	1.50	45.00
2	1	Hourly charge (surge)		75.00
2	70	Common	11.00	770.00
2	50	6-12	3.00	150.00
2	70	Bulk Charge	2.00	140.00
2		Bulk Truck Miles $20 \times 70 = 1400$	1.00	140.00
		Process License Fee on _____ Gallons		
		TOTAL BILLING		1103.00

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 [Signature]

Station [Signature] Well Owner, Operator or Agent

Remarks _____

NET 30 DAYS

TREATMENT REPORT

Acid Stage No.

Date 9/30/13 District G.A. F. O. No. C41466
 Company Conoco Exploration
 Well Name & No. Dall Ac # 2
 Location _____ Field _____
 County Rice State TX
 Casing: Size 5 1/2" Type & Wt. _____ Set at _____ ft.
 Formation: _____ Perf. _____ to _____
 Formation: _____ Perf. _____ to _____
 Formation: _____ Perf. _____ to _____
 Liner: Size _____ Type & Wt. _____ Top at _____ ft. Bottom at _____ ft.
 Cemented: Yes/No. Perforated from _____ ft. to _____ ft.
 Tubing: Size & Wt. 2 7/8" Spung at _____ ft.
 Perforated from _____ ft. to _____ ft.
 Open Hole Size _____ T.D. _____ ft. P.D. to _____ ft.

Type Treatment: Amt. _____ Type Fluid _____ Sand Size _____ Pounds of Sand _____
 Breakdown _____ Bbl./Gal. _____
 _____ Bbl./Gal. _____
 _____ Bbl./Gal. _____
 _____ Bbl./Gal. _____
 Flush _____ Bbl./Gal. _____
 Treated from _____ ft. to _____ ft. No. ft. _____
 from _____ ft. to _____ ft. No. ft. _____
 from _____ ft. to _____ ft. No. ft. _____
 Actual Volume of Oil/Water to Load Hole: _____ Bbl./Gal.
 Pump Trucks: No. Used: Std. 370 Sp. _____ Twin _____
 Auxiliary Equipment 327
 Packer: _____ Set at _____ ft.
 Auxiliary Tools _____
 Plugging or Sealing Materials: Type _____

Company Representative Ron H. Treater Nathan W.

TIME (a.m./p.m.)	PRESSURES		Total Fluid Pumped	REMARKS
	Tubing	Casing		
9:00	2 7/8"	5 1/2"		On location
:				
:				
:				Cement Retainer - 33Ks
:				Perfs - 3310'-12'
:				3322-76'
:				
:				Take in rate @ 2 bpm - 400# Communicated
:				w/ top perfs. Press up Annulus
:				to 500#
:				
:				Mix 50 sts. Common w/ C-12,
:				Mix 25 sts. Common
:				
:				Displace on a vacuum. Pull Stinger.
:				Run packer.
:				
:				Packer - 2450' Press up to 1,000#
:				Pull packer.
:				
:				Thank You!
:				Nathan W.



PAGE	CUST NO	INVOICE DATE
1 of 1	1005952	09/17/2013
INVOICE NUMBER		
1718 - 91286704		

Pratt (620) 672-1201
 B CARRIE EXPLORATION & DEVELOPMENT LLC
 I 210 W 22ND ST
 L HAYS
 L KS US 67601
 T
 O ATTN: HEROLD

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

C pd #4040 9/24/13

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40641209	19843		Net - 30 days	10/17/2013

For Service Dates: 09/16/2013 to 09/16/2013

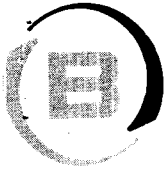
0040641209

Cement 5 1/2 casing

171809109A Cement-New Well Casing/Pi 09/16/2013
 Cement 5 1/2" Longstring

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
60/40 POZ	175.00	EA	7.44	1,302.03 T
C-41P	27.00	EA	2.48	66.96 T
Salt	1,117.00	EA	0.31	346.28 T
FLA-322	87.00	EA	4.65	404.56 T
Mud Flush	500.00	EA	0.53	266.61 T
"Flow-Seal 11 (Sodium Silicate), 12% Sol	330.00	EA	3.72	1,227.63 T
Gilsonite	625.00	EA	0.42	259.63 T
"5 1/2" Port Collar "	1.00	EA	2,170.04	2,170.04
"Latch Down Plug & Baffle, 5 1/2" (Blu	1.00	EA	248.01	248.01
"Auto Fill Float Shoe 5 1/2" (Blue)"	1.00	EA	223.21	223.21
"Turbolizer, 5 1/2" (Blue)"	7.00	EA	77.50	542.51
"5 1/2" Basket (Blue)"	2.00	EA	179.81	359.61
"Unit Mileage Chg (PU, cars one way)"	75.00	MI	2.64	197.63
Heavy Equipment Mileage	150.00	MI	4.34	651.02
"Proppant & Bulk Del. Chgs., per ton mil	566.00	EA	0.99	561.49
Depth Charge; 3001-4000'	1.00	EA	1,339.23	1,339.23
Blending & Mixing Service Charge	175.00	BAG	0.87	151.90
Casing Swivel Rental	1.00	EA	124.00	124.00
Plug Container Util. Chg.	1.00	EA	155.00	155.00
"Service Supervisor, first 8 hrs on loc.	1.00	EA	108.50	108.50

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	10,705.85
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	276.97
PO BOX 841903	801 CHERRY ST, STE 2100	INVOICE TOTAL	10,982.82
DALLAS, TX 75284-1903	FORT WORTH, TX 76102		



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET
1718 00100 A

DATE _____ TICKET NO. _____

DATE OF JOB 01-10-13		DISTRICT R2, 7, 85		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				LEASE DOLL C-1		WELL NO.			
ADDRESS				COUNTY Rice		STATE TX			
CITY				STATE		SERVICE CREW Sullivan, Edwards, 3/10			
AUTHORIZED BY				JOB TYPE: NW Completion					
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
17881-1200	4						9-11		
1796-311	2					ARRIVED AT JOB	9-11	AM	
37100						START OPERATION		AM	
						FINISH OPERATION		AM	
						RELEASED		AM	
						MILES FROM STATION TO WELL			73

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: *[Signature]*
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP 100	CP 100	SK	125		1,500.00
CP 103	CP 103	SK	50		600.00
CC 105	CC 105	lb	27		1,000.00
CC 111	CC 111	lb	1117		2,000.00
CC 119	CC 119	lb	87		6,000.00
CC 201	CC 201	lb	625		7,000.00
CF 400	CF 400	gal	1		3,000.00
CF 600	CF 600	gal	1		4,000.00
CF 105	CF 105	gal	1		3,000.00
CF 107	CF 107	gal	7		8,000.00
CF 1501	CF 1501	gal	2		500.00
CC 151	CC 151	gal	500		4,000.00
PC 159	PC 159	gal	330		1,900.00
E 100	E 100	mi	75		3,000.00
E 101	E 101	mi	150		1,000.00
E 110	E 110	mi	566		9,000.00
SUB TOTAL					

CHEMICAL / ACID DATA:



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET

~~1718-03111A~~
Continuation of
DATE ~~7-18-13~~ 7/19/13
TICKET NO. ~~1718-03111A~~ 7A

DATE OF JOB: 7-16-13		DISTRICT: Pratt, KS		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: [Handwritten]		LEASE: Public - 1		WELL NO.:						
ADDRESS:		COUNTY: Rice		STATE: KS						
CITY:		STATE:		SERVICE CREW:						
AUTHORIZED BY:		JOB TYPE: NW L.S.								
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: [Signature]
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CE 509	Water pump for 4000	PA	1		2,100.00
CE 542	Water pump	SK	175		2,100.00
CE 501	Water pump	SA	1		2,100.00
CE 509	Water pump	SA	1		2,100.00
SOC	Water pump	SA	1		1,750.00

CHEMICAL / ACID DATA:			

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

SERVICE REPRESENTATIVE: [Signature]	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: [Signature]
FIELD SERVICE ORDER NO.:	(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

Customer <i>Carroll Petroleum</i>		Lease No.		Date <i>9-16-13</i>	
Lease <i>Dell</i>		Well # <i>6-1</i>			
Field Order # <i>9109</i>	Station <i>Pratt</i>	Casing <i>5 1/2</i>	Depth <i>3730</i>	County <i>Rice</i>	State <i>KS</i>
Type Job <i>OPU Treat.</i>			Formation	Legal Description <i>17-71-10</i>	

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP	
<i>3 1/2</i>		<i>Perforations</i>		<i>1503'</i>				
Depth <i>3730</i>	Depth	From	To	Pre Pad	Max		5 Min.	
Volume <i>33</i>	Volume	From	To	Pad	Min		10 Min.	
Max Press <i>1500</i>	Max Press	From	To	Frac	Avg		15 Min.	
Well Connection <i>R.C.</i>	Annulus Vol.	From	To		HHP Used		Annulus Pressure	
Plug Depth <i>3403</i>	Packer Depth	From	To	Flush	Gas Volume		Total Load	

Customer Representative				Station Manager <i>Don Scott</i>				Treater <i>Robert Johnson</i>			
Service Units	<i>30900</i>	<i>19840</i>	<i>19843</i>	<i>19860</i>	<i>21010</i>						
Driver Names	<i>Walt</i>	<i>John</i>		<i>Frank</i>	<i>Mike</i>						

Time	Casing Pressure	Tubing Pressure	Bbbs. Pumped	Rate	Service Log
<i>1:30</i>					<i>on loc safety meeting</i>
					<i>Run out 5 1/2" 14 104 ft</i>
					<i>and 1, 2, 5, 8, 11, 13, 51, 52, 53, 54, 55, 56, 57, 58, 59 @ 1503'</i>
<i>3:40</i>					<i>CASING ON BOTTOM</i>
<i>3:50</i>					<i>Hook up in case</i>
<i>4:00</i>	<i>150</i>		<i>10</i>	<i>3</i>	<i>24 acid flush</i>
			<i>5</i>		<i>SPACED</i>
			<i>6</i>		<i>ST FLOW SEAL</i>
			<i>5</i>		<i>SPACED</i>
			<i>3.1</i>	<i>4.5</i>	<i>mix cost 125 lb 60/40 pot</i>
					<i>10% to 40% 25 lb water 10% salt 2% lime</i>
					<i>cut mix (start down) with heavy mix</i>
					<i>Release Plug</i>
				<i>5.5</i>	<i>St Displ</i>
	<i>250</i>		<i>9.1</i>		<i>Wt Plg</i>
	<i>450</i>			<i>3.5</i>	<i>Slow Rate</i>
<i>5:00</i>	<i>1300</i>		<i>8.3</i>		<i>Plug down</i>
			<i>7.5</i>		<i>Plug & HW/30 11/1/20</i>
					<i>30B Complete Thank you</i>