## **COPELAND**

Acid & Cement

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

**Invoice** 

HOLT #4

LEASE:

Page: 1

record 8/3/12

BURRTON, KS . GREAT BEND, KS (620) 463-5161 FAX (620) 463-2104

(620) 793-3366 FAX (620) 793-3536

INVOICE NUMBER: C39911-IN

BILL TO:

**LASSO OIL** P.O. BOX 465 **CHASE, KS 67524** 

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE	ORDER	SPECIAL INSTRUCTIONS		
07/31/2012	C39911		07/25/2012			NET 30		
QUANTITY	U/M	ITEM NO./D	ITEM NO./DESCRIPTION		D/C	PRICE	EXTENSION	
35.00	MI	CEMENT MILEA	CEMENT MILEAGE PUMP TRUCK			4.00	140.00	
35.00	МІ	CEMENT MILEAGE PU TRUCK			0.00	2.00	70.00	
1.00	EA	CEMENT PUMP CHARGE			0.00	650.00	650.00	
75.00	SAX	60-40 POZ MIX 2% GEL			0.00	9.25	693.75	
2.00	SAX	2% ADDITIONAL	2% ADDITIONAL GEL			22.00	44.00	
1.00	HR	POLY TRAILER	POLY TRAILER RENTAL			250.00	250.00	
1.00	EA	MIN. BULK CHA	MIN. BULK CHARGE			150.00	150.00	
1.00	МІ	MIN. BULK TRU	MIN. BULK TRUCK - TON MILES		0.00	150.00	150.00	
REMIT TO: P.O. BOX 438 HAYSVILLE, KS 67060		СОР		Net Invoice: COWCO Sales Tax: Invoice Total:		2,147.75		
		FUEL SURCHARGE IS NOT TAXABLE AND IS ADDED TO MILEAGE, PUMP AND OR DELIVERY CHARGES ONLY.				61.20		
						2,208.95		

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



FIELD order № C-39911

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

-		316-524-1225	110	
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S AUTHORIZ	ZED BY:	( O C C C T T T T T T T T T T T T T T T T		
Address		City	State	
To Treat Well As Follows:	Lease	14	Order No	1
Sec. Twp. Range		County Co. 1	State	
not to be held I mplied, and no reatment is pay our invoicing de	iable for any dan representations rable. There will spartment in acco	consideration hereof it is agreed that Copeland Acid Service is to service or treat at owners rish nage that may accrue in connection with said service or treatment. Copeland Acid Service has have been relied on, as to what may be the results or effect of the servicing or treating said we be no discount allowed subsequent to such date. 6% interest will be charged after 60 days. To ordance with latest published price schedules. This himself to be duly authorized to sign this order for well owner or operator.	is made no repre rell. The conside	esentation, expressed of eration of said service of
	JST BE SIGNED IS COMMENCED	Ву		
		Well Owner or Operator	Agent	·
CODE	QUANTITY	DESCRIPTION	UNIT	AMOUNT
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<del></del>	75	Bulk Charge	April P 100	150.7
		Bulk Truck Miles 3 37 x 55 m - 115.5 7 m 2 1.	. Vaina	15/1,17
	-	Process License Fee onGallons	,	24775
		TOTAL BILLING		2002=
manner	under the dire	material has been accepted and used; that the above service was perform ection, supervision and control of the owner, operator or his agent, whose s		
		10 y 10-10: m.	1	
Station	C . Es.	Well Owner, Open	ator or Agent	
Remarks		NET 20 DAVS		



## TREATMENT REPORT

Acid &	Cemer	nt 🖺					Acid Stage ?	Ya,		
				11PPE) NO.	Type Treatment:         Amt.           BkdownBbl. /Gal.	Type Fluid		ounds of Band		
CompanyL	csso E	nersy			Bbl. /Gal			********************		
Well Name & No. Holf Hy  Location Field County Cowky State &  Casing: Size S&"  Casing: Size Formation: Perf. to  Formation: Perf. to				Bbl. /Gal						
				Bbl. /Gal						
				FlushBbl. /Gal						
				Set atft.	Treated from					
				trom						
					Actual Volume of Oil / Water to Load Hole: Bbl. / Gal.					
Liner: Size	Type & W	t	Top atft		Pump Trucks, No. Used: Std. 370 Twin					
Cen	nented: Yes/No.	Perforated from	m	.ft. toft.	Auxiliary Equipment 327		***************************************			
Tubing: Size	* Mr HOLA		Swung at	ft.	Packer:		Set ±1			
Per	rformted from		ft. to	n.	Auxiliary Tools			***************************************		
					Plugging or Bealing Materials: Type		•••••			
Own Hole Si	\$ <b>*</b>	т.р.		۲. to			linis.			
Company	Representativ	e Charlis	telac	٠	Treater Watna V	7.				
TIME		SURES	Total Fluid		REMARK	8				
6.m p.m.	Tubing	Casing	Pumped		REARIA					
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