



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 ~~09385~~ A

continuation

21-345-15

DATE TICKET NO. 9.3.84

DATE OF JOB: 10-24-13	DISTRICT: Pratt, Kansas	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: Mand M Exploration, Inc		LEASE: Z Bar				WELL NO: 21-8	
ADDRESS:		COUNTY: Barber		STATE: Kansas			
CITY: STATE:		SERVICE CREW: C. Messick; M. McGraw; D. Phye					
AUTHORIZED BY:		JOB TYPE: C.N.W. - Longstring					
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE AM PM TIME
						ARRIVED AT JOB	AM PM
						START OPERATION	AM PM
						FINISH OPERATION	AM PM
						RELEASED	AM PM
						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
P E100	Pickup Mileage	Mi	65	\$	276 25
P E101	Heavy Equipment Mileage	Mi	130	\$	910 00
P E113	Bulk Delivery	tm	621	\$	993 20
P CE206	Cement Pump: 5,001 Feet To 6,000 Feet	hrs	4	\$	2,880 00
P CE240	Blending and Mixing Service	St	205	\$	287 00
P CE504	Plug Container	Job	1	\$	250 00
P S003	Service Supervisor	hrs	8	\$	175 00

CHEMICAL / ACID DATA:			

	SUB TOTAL	169 \$ 8,498 10
SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
	TOTAL	

SERVICE REPRESENTATIVE: *R. M. [Signature]* THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: *[Signature]*

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.