



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1171826
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
-----------------------------------	-----------------	---

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: _____

1171826

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

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> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
--	---	---

Form	ACO1 - Well Completion
Operator	Richlan Drilling, a General Partnership
Well Name	Ummel Brothers Trust #4
Doc ID	1171826

Tops

Name	Top	Datum
Heebner	3658	-1384
Lansing Kansas City	3701	-1427
BKC	3996	-1722
Marmaton	4040	-1766
Pawnee	4117	-1843
Fort Scott	4202	-1928
Cherokee Shale	4227	-1953
Mississippi	4292	-2018



DIAMOND TESTING, LLC
P.O. Box 157
HOISINGTON, KANSAS 67544
(620) 653-7550 • (800) 542-7313
UMMELBROTHERSTRUST4DST1

Company Richlan Drilling Lease & Well No. Ummel Brothers Trust No. 4
Elevation 2274 KB Formation Fort Scott Effective Pay _____ Ft. Ticket No. T283
Date 11-17-13 Sec. 24 Twp. 18S Range 24W County Ness State Kansas
Test Approved By Robert A. (Bob) Schreiber Diamond Representative _____ Tim Venters

Formation Test No. 1 Interval Tested from 4,177 ft. to 4,228 ft. Total Depth 4,228 ft.
Packer Depth 4,172 ft. Size 6 3/4 in. Packer Depth _____ ft. Size _____ in.
Packer Depth 4,177 ft. Size 6 3/4 in. Packer Depth _____ ft. Size _____ in.
Depth of Selective Zone Set _____ ft.

Top Recorder Depth (Inside) 4,158 ft. Recorder Number 8457 Cap. 10,000 psi.
Bottom Recorder Depth (Outside) 4,225 ft. Recorder Number 11030 Cap. 5,025 psi.
Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ psi.

Drilling Contractor Southwind Drilling, Inc. - Rig 8 Drill Collar Length _____ ft I.D. _____ in.
Mud Type Chemical Viscosity 68 Weight Pipe Length _____ ft I.D. _____ in.
Weight 9.4 Water Loss 8.8 cc. Drill Pipe Length 4,144 ft I.D. 3 1/2 in.
Chlorides 3,000 P.P.M. Test Tool Length 33 ft Tool Size 3 1/2-IF in.
Jars: Make Sterling Serial Number 2 Anchor Length 19' perf. w/32' drill pipe Size 4 1/2-FH in.
Did Well Flow? No Reversed Out No Surface Choke Size 1 in. Bottom Choke Size 5/8 in.
Main Hole Size 7 7/8 in. Tool Joint Size 4 1/2-XH in.

Blow: 1st Open: Weak, surface blow increasing to 1/2 in. No blow back during shut-in.
2nd Open: Weak, surface blow throughout. No blow back during shut-in.

Recovered 5 ft. of mud = .071150 bbls.
Recovered _____ ft. of _____
Recovered _____ ft. of _____
Recovered _____ ft. of _____
Recovered _____ ft. of _____
Recovered _____ ft. of _____

Remarks Tool Sample Grind Out: Spotty-oil; 100%-mud

Time Set Packer(s) 8:18 P.M. Time Started off Bottom 9:50 P.M. Maximum Temperature 108°
Initial Hydrostatic Pressure.....(A) 2026 P.S.I.
Initial Flow Period.....Minutes 30 (B) 5 P.S.I. to (C) 8 P.S.I.
Initial Closed In Period.....Minutes 30 (D) 150 P.S.I.
Final Flow Period.....Minutes 17 (E) 9 P.S.I. to (F) 9 P.S.I.
Final Closed In Period.....Minutes 15 (G) 24 P.S.I.
Final Hydrostatic Pressure.....(H) 2025 P.S.I.

DIAMOND TESTING

General Information Report

General Information

Company Name	RICHLAN DRILLING & GENERAL PARTNERS	Representative	TIM VENTERS
Contact	RICK SCHREIBER	Well Operator	RICHLAN DRILLING & GENERAL PAR.
Well Name	UMMEL BROTHERS TRUST #4	Report Date	2013/11/18
Unique Well ID	DST #1, FT. SCOTT, 4177-4228	Prepared By	TIM VENTERS
Surface Location	SEC 24-18S-24W, NESS CO. KS.	Qualified By	BOB SCHREIBER
Field	MINER		
Well Type	Vertical		
Test Type	CONVENTIONAL		
Formation	DST #1, FT. SCOTT, 4177-4228		
Well Fluid Type	01 Oil		
Start Test Date	2013/11/17	Start Test Time	17:40:00
Final Test Date	2013/11/17	Final Test Time	23:55:00

Test Recovery:

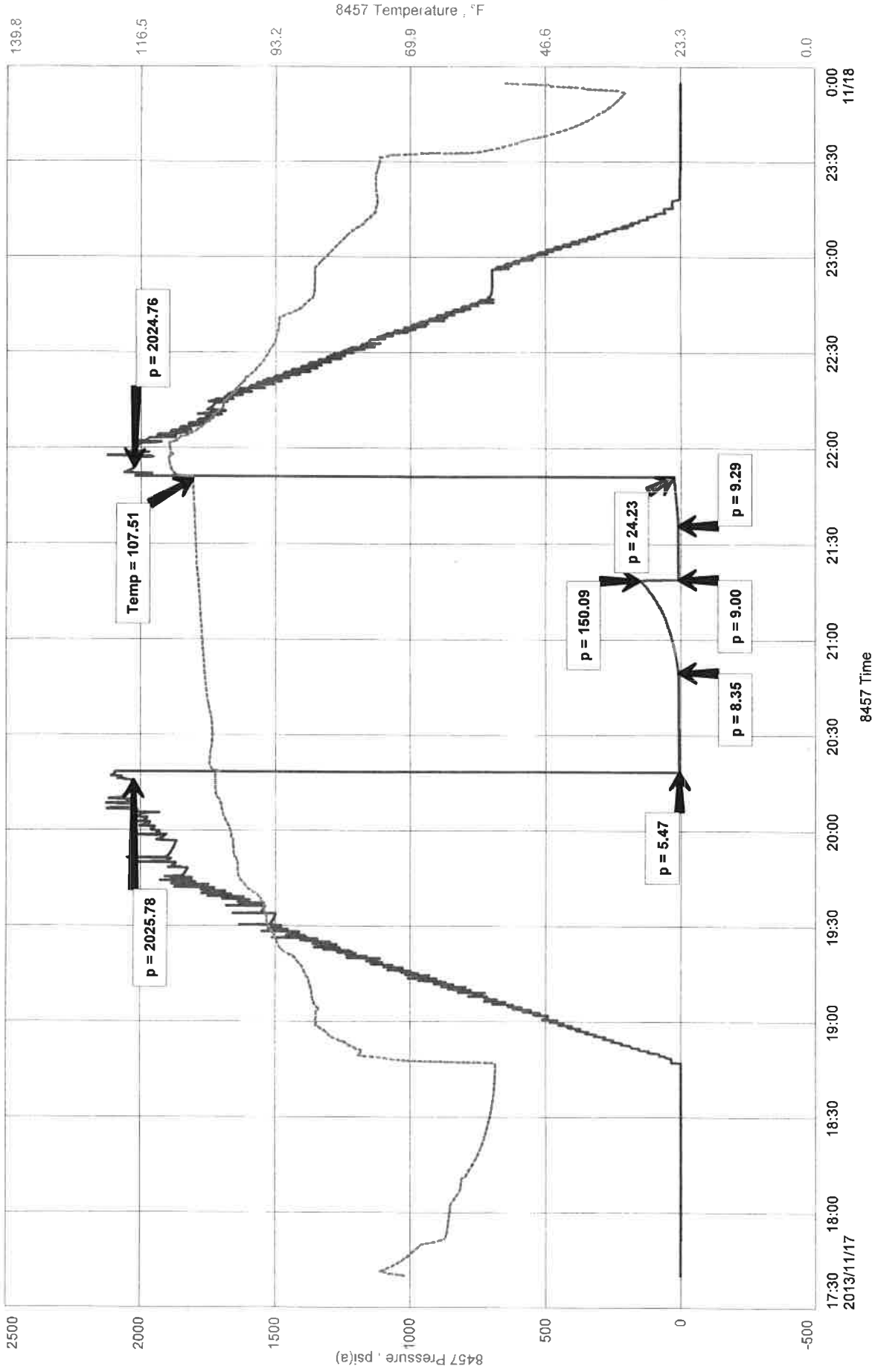
RECOVERED: 5' MUD

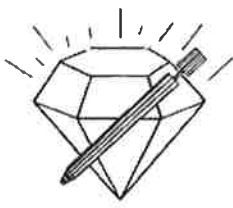
TOOL SAMPLE: SPOTTY OIL, 100% MUD

RICHLAN DRILLING & GENERAL PARTNERS
DST #1, FT. SCOTT, 4177-4228
Start Test Date: 2013/11/17
Final Test Date: 2013/11/17

UMMEL BROTHERS TRUST #4
Formation: DST #1, FT. SCOTT, 4177-4228
Pool: MINER
Job Number: T283

UMMEL BROTHERS TRUST #4





DIAMOND TESTING, LLC
P.O. Box 157
HOISINGTON, KANSAS 67544
(620) 653-7550 • (800) 542-7313
UMMELBROTHERSTRUST4DST2

Company Richlan Drilling Lease & Well No. Ummel Brothers Trust No. 4
Elevation 2274 KB Formation Mississippi Effective Pay _____ Ft. Ticket No. T284
Date 11-18-13 Sec. 24 Twp. 18S Range 24W County Ness State Kansas
Test Approved By Robert A. (Bob) Schreiber Diamond Representative _____ Tim Venters

Formation Test No. 2 Interval Tested from 4,249 ft. to 4,307 ft. Total Depth 4,307 ft.
Packer Depth 4,244 ft. Size 6 3/4 in. Packer Depth _____ ft. Size _____ in.
Packer Depth 4,249 ft. Size 6 3/4 in. Packer Depth _____ ft. Size _____ in.
Depth of Selective Zone Set _____ ft.

Top Recorder Depth (Inside) 4,230 ft. Recorder Number 8457 Cap. 10,000 psi.
Bottom Recorder Depth (Outside) 4,304 ft. Recorder Number 11030 Cap. 5,025 psi.
Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ psi.

Drilling Contractor Southwind Drilling, Inc. - Rig 8 Drill Collar Length _____ ft I.D. _____ in.
Mud Type Chemical Viscosity 56 Weight Pipe Length _____ ft I.D. _____ in.
Weight 9.2 Water Loss 9.6 cc. Drill Pipe Length 4,216 ft I.D. 3 1/2 in.
Chlorides 3,000 P.P.M. Test Tool Length 33 ft Tool Size 3 1/2-IF in.
Jars: Make Sterling Serial Number 2 Anchor Length 26' perf. w/32' drill pipe Size 4 1/2-FH in.
Did Well Flow? No Reversed Out No Surface Choke Size 1 in. Bottom Choke Size 5/8 in.
Main Hole Size 7 7/8 in. Tool Joint Size 4 1/2-XH in.

Blow: 1st Open: Weak, 1/2 in. blow increasing. Off bottom of bucket in 24 mins. No blow back during shut-in.
2nd Open: Weak, 1/4 in. blow increasing to 11 ins. No blow back during shut-in.

Recovered 30 ft. of mud = .426900 bbls.
Recovered 125 ft. of slightly water cut mud = 1.778750 bbls. (Grind out: 17%-water; 83%-mud)
Recovered 65 ft. of heavy water cut mud = .924950 bbls. (Grind out: 46%-water; 54%-mud)
Recovered 65 ft. of mud cut water = .924950 bbls. (Grind out: 71%-water; 29%-mud) Chlorides: 19,000 Ppm PH: 7.0
Recovered 285 ft. of TOTAL FLUID = 4.055550 bbls.

Recovered _____ ft. of _____
Remarks Tool Sample Grind Out: 1%-oil; 74%-water; 25%-mud

Time Set Packer(s) 5:43 P.M. Time Started off Bottom 7:58 P.M. Maximum Temperature 116°
Initial Hydrostatic Pressure.....(A) 2026 P.S.I.
Initial Flow Period.....Minutes 30 (B) 19 P.S.I. to (C) 79 P.S.I.
Initial Closed In Period.....Minutes 30 (D) 874 P.S.I.
Final Flow Period.....Minutes 45 (E) 87 P.S.I. to (F) 138 P.S.I.
Final Closed In Period.....Minutes 30 (G) 671 P.S.I.
Final Hydrostatic Pressure.....(H) 2025 P.S.I.

DIAMOND TESTING

General Information Report

General Information

Company Name RICHLAN DRILLING & GENERAL PARTNERS
Contact RICK SCHREIBER
Well Name UMMEL BROTHERS TRUST #4
Unique Well ID DST #2, MISSISSIPPIAN, 4249-4307
Surface Location SEC 24-18S-24W, NESS CO. KS.
Field MINER
Well Type Vertical
Test Type CONVENTIONAL
Formation DST #2, MISSISSIPPIAN, 4249-4307
Well Fluid Type 01 Oil

Representative TIM VENTERS
Well Operator RICHLAN DRLG. & GENERAL PARTS.
Report Date 2013/11/18
Prepared By TIM VENTERS

Qualified By BOB SCHREIBER

Start Test Date 2013/11/18
Final Test Date 2013/11/18

Start Test Time 15:09:00
Final Test Time 23:04:00

Test Recovery:

RECOVERED: 30' MUD
 125' SWCM, 17% WATER, 83% MUD
 65' HWCM, 46% WATER, 54% MUD
 65' MCW, 71% WATER, 29% MUD
 285' TOTAL FLUID

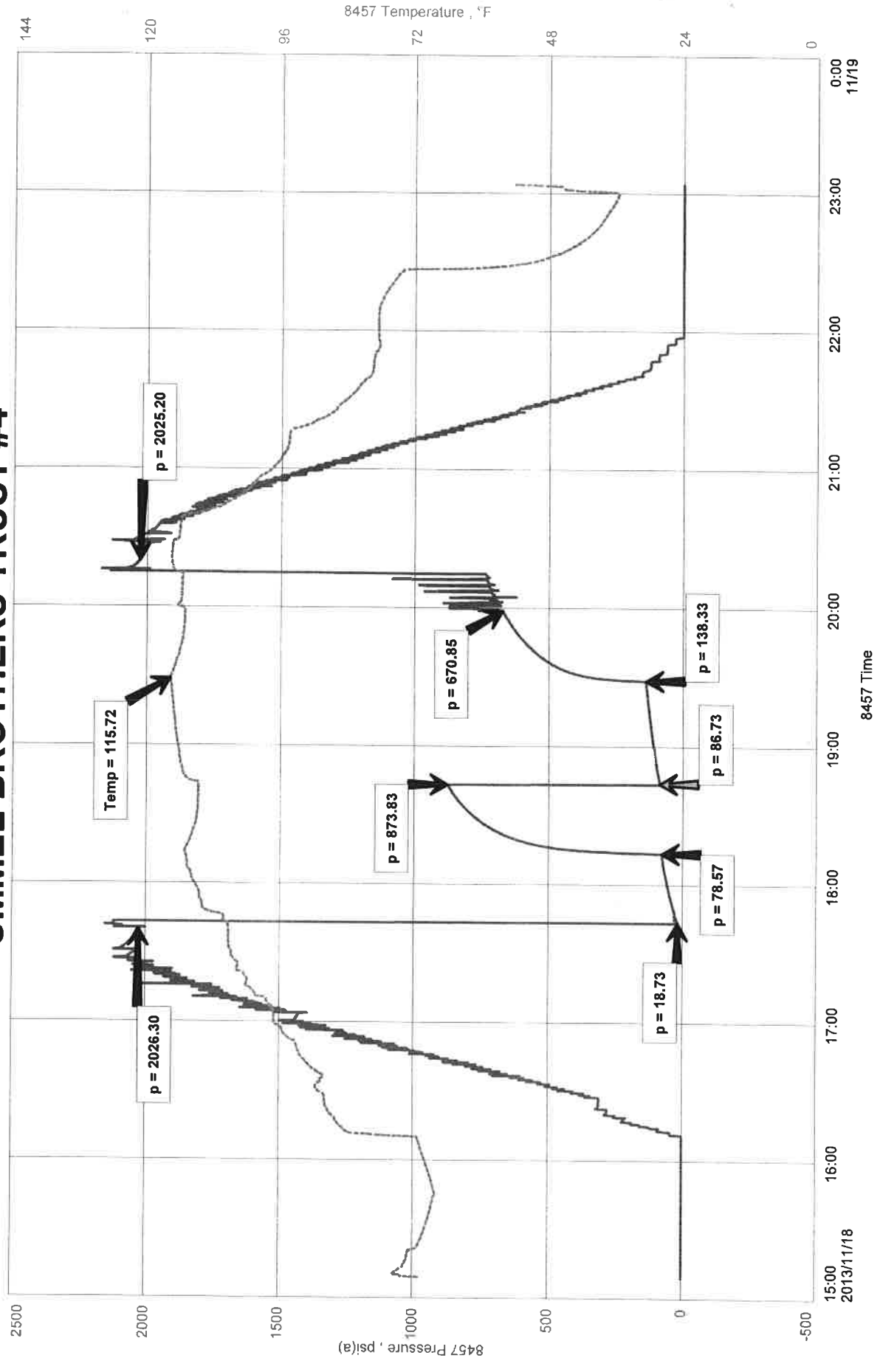
TOOL SAMPLE: 1% OIL, 74% WATER, 25% MUD

CHLORIDES: 19,000 ppm
PH: 7.0

RICHLAN DRILLING & GENERAL PARTNERS
DST #2, MISSISSIPPIAN, 4249-4307
Start Test Date: 2013/11/18
Final Test Date: 2013/11/18

UMMEL BROTHERS TRUST #4
Formation: DST #2, MISSISSIPPIAN, 4249-4307
Pool: MINER
Job Number: T284

UMMEL BROTHERS TRUST #4



ALLIED OIL & GAS SERVICES, LLC 054739

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

Russell KS

DATE <u>11-11-13</u>	SEC. <u>24</u>	TWP. <u>18 S</u>	RANGE <u>24 W</u>	LOCATED OUT	ON LOCATION	JOB START	JOB FINISH
LEASE <u>UNWEL TRUST</u>	WELL # <u>4</u>		LOCATION <u>Wess City W Edge</u>			11:15	11:45
OLD OR NEW (Circle one) <u>NEW</u>			<u>1 1/4 W 1/4 W INTO</u>			COUNTY <u>Wess</u>	STATE <u>Kansas</u>

CONTRACTOR Scott Howard Dag. Rig # 8

OWNER

TYPE OF JOB _____
 HOLE SIZE 12 1/4 T.D. 280
 CASING SIZE 8 5/8 DEPTH 230
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. 15'
 PERFS. _____
 DISPLACEMENT _____

EQUIPMENT

PUMP TRUCK CEMENTER Gibson G.
 # 366 HELPER Ben GB.
 BULK TRUCK DRIVER Danny GB.
 BULK TRUCK DRIVER _____

REMARKS:

ran 5 new joints of 234
2 5/8 CSG. Set @ 220'
Required C. RL. of cement
of 160 SX Com 3 @ 2 1/2
D. Spaced 13 BBL BEHIND
Cement, @ SHUT IN @
200# Cement P.D. Circulate!
THANKS

CHARGE TO: Richard Drilling & General Partnership

CITY _____ STATE _____ ZIP _____

HANDLING _____
 MILEAGE _____
 TOTAL _____

DEPTH OF JOB _____
 PUMP TRUCK CHARGE _____
 EXTRA FOOTAGE _____
 MILEAGE _____
 MANIFOLD _____
 TOTAL _____

PLUG & FLOAT EQUIPMENT

_____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 TOTAL _____

To: Allied Oil & Gas Services, LLC.
 You are hereby requested to rent cementing equipment and furnish cement 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 Scott Howard

SALES TAX (If Any) _____
 TOTAL CHARGES _____
 DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE Scott Howard

CEMENTING LOG

STAGE NO.

Date 11-15-13 District Claiborne Ticket No. 61056
 Company Richlin Drilling Rig 2024010105
 Lease Demol Barbercreek Well No. KS
 County West State MS
 Location Miss City, RR 1222 Field

CEMENT DATA:
 Spacer Type: Fresh water Amt: Sks Yield ft³/sk Density 6.34 PPG
 LEAD: Pump Time hrs. Type Excess

CASING DATA: Conductor PTA Squeeze Misc
 Surface Intermediate Production Liner
 Size Type Weight Collar

Amt: Sks Yield ft³/sk Density PPG
 TAIL: Pump Time hrs. Type 60% class Excess
 Amt: 250 Sks Yield 1.40 ft³/sk Density 14.5 PPG

Casing Depths: Top Bottom
 Pump Trucks Used 366 - 100K
 Bulk Equip. 3009-720-Ken's Co

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

Drill Pipe: Size 4 1/2 Weight 16.5 Collars
 Open Hole: Size T.D. ft. P.B. to ft.

Capacity Factors:
 Casing: Bbls/Lin. ft. 1.0677 Lin. ft./Bbl. 15.70
 Open Holes: Bbls/Lin. ft. Lin. ft./Bbl.
 Drill Pipe: Bbls/Lin. ft. 1.0142 Lin. ft./Bbl. 70.72
 Annulus: Bbls/Lin. ft. Lin. ft./Bbl.
 Perforations: From ft. to ft. Amt

Float Equip. Manufacturer Depth
 Shoe Type Depth
 Float Type Depth
 Centralizers: Quantity Plugs Top Btm.
 Stage Collars
 Special Equip.
 Disp. Fluid Type Freshwater Amt Bbls Weight 5.34 PPG
 Mud Type Water Amt Bbls Weight 9.2 PPG

COMPANY REPRESENTATIVE

CEMENTER Dustin C

TIME	PRESSURES PSI	FLUID PUMPED DATA			RATE Bbls Min.	REMARKS
		DRILL PIPE CASING	ANNULUS	TOTAL FLUID		
						DN to Camp - Rig up
						Had safety meeting
						Ran 4 1/2" Drill pipe
						fill hole in 2" of pipe and
						hook up cement pump
						1.1500-50 SKS
						2.630-50 SKS
						3.250-50 SKS
						4.50-20 SKS
						5. KH-10 SKS
						6.MH-20 SKS
						Plug Down 515PM
						Rig Down

ALLIED OIL & GAS SERVICES, LLC 061058

Federal Tax I.D. # 20-8651475

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

SERVICE POINT: 6002/Boyle/KS

DATE <u>11-19-13</u>	SEC. <u>24</u>	TWP. <u>15S</u>	RANGE <u>24W</u>	LOCATION <u>Kress City West side R Rd</u>	COUNTY <u>KS</u>	STATE <u>KS</u>
LEASE <u>Umarel Brothers</u>	WELL # <u>4</u>	LOCATION <u>Kress City West side R Rd</u>		COUNTY <u>KS</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one) <u>OLD</u>	LOCATION <u>1 1/2 mi before</u>		COUNTY <u>KS</u>	STATE <u>KS</u>		

CONTRACTOR Southwind Drilling & S OWNER _____
 TYPE OF JOB Arroyo Plug
 HOLE SIZE _____ T.D. _____
 CASING SIZE _____ DEPTH _____
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE 4 1/2 DEPTH 1560
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. 011
 PERFS. _____
 DISPLACEMENT Freshwater 1000
 EQUIPMENT _____

PUMP TRUCK CEMENTER Dustin Chambers
 # 366 HELPER Ben Neumeier
 BULK TRUCK DRIVER Keith Weathers
 # 344-170
 BULK TRUCK DRIVER _____
 # _____

REMARKS:
C-11 hole with Arroyo mud
1 1560-50 SKS
2 530-50 SKS
3 250-50 SKS
4 60-70 SKS
5 AM - 30 SKS
6 MH - 20 SKS
Play Down 5:15 pm

CHARGE TO: Richlin Drilling
 STREET _____
 CITY _____ STATE _____ ZIP _____

To: Allied Oil & Gas Services, LLC.
 You are hereby requested to rent cementing equipment and furnish cement 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 Deere II 1075
 SIGNATURE X [Signature]

CEMENT AMOUNT ORDERED 250 SKS 604. class 2
424. ps 2 44. gel 1/4 cts

COMMON @ _____
 POZMIX @ _____
 GEL @ _____
 CHLORIDE @ _____
 ASC @ _____
 HANDLING @ _____
 MILEAGE @ _____
 TOTAL _____

SERVICE _____
 DEPTH OF JOB _____
 PUMP TRUCK CHARGE _____
 EXTRA FOOTAGE @ _____
 MILEAGE @ _____
 MANIFOLD @ _____
 TOTAL _____

PLUG & FLOAT EQUIPMENT
 @ _____
 @ _____
 @ _____
 @ _____
 @ _____
 SALES TAX (If Any) _____ TOTAL _____
 TOTAL CHARGES _____
 DISCOUNT _____ IF PAID IN 30 DAYS