



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1190965
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: _____

1190965

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> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Shakespeare Oil Co., Inc.
Well Name	Bahm 1-16
Doc ID	1190965

All Electric Logs Run

Array Induction
Photo Density
Comp Neutron
Microlog
Sonic

Form	ACO1 - Well Completion
Operator	Shakespeare Oil Co., Inc.
Well Name	Bahm 1-16
Doc ID	1190965

Tops

Name	Top	Datum
Base Anhydrite	2492	+651
Heebner	4008	-865
Lansing	4050	-907
Muncie Creek	4236	-1093
Stark Shale	4324	-1181
Hushpuckney	4371	-1228
Pawnee	4544	-1401
L. Cherokee Shale	4625	-1482
Johnson	4668	-1525
Mississippian	4806	-1663



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

Shakespeare Oil Co, Inc.

16 16s 34w Scott, Ks

202 W Main St.
Salem, IL 62881

Bahm 1-16

Job Ticket: 55695

DST#: 1

ATTN: Tim Priest

Test Start: 2014.02.04 @ 03:20:00

GENERAL INFORMATION:

Formation: **Marmaton A**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 06:11:30

Time Test Ended: 11:27:00

Test Type: Conventional Bottom Hole (Initial)

Tester: Bradley Walter

Unit No: 69

Interval: **4457.00 ft (KB) To 4488.00 ft (KB) (TVD)**

Reference Elevations: 3143.00 ft (KB)

Total Depth: 4488.00 ft (KB) (TVD)

3133.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Good

KB to GR/CF: 10.00 ft

Serial #: 8522 Outside

Press@RunDepth: 48.29 psig @ 4458.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2014.02.04

End Date:

2014.02.04

Last Calib.:

2014.02.04

Start Time: 03:20:05

End Time:

11:26:59

Time On Btm:

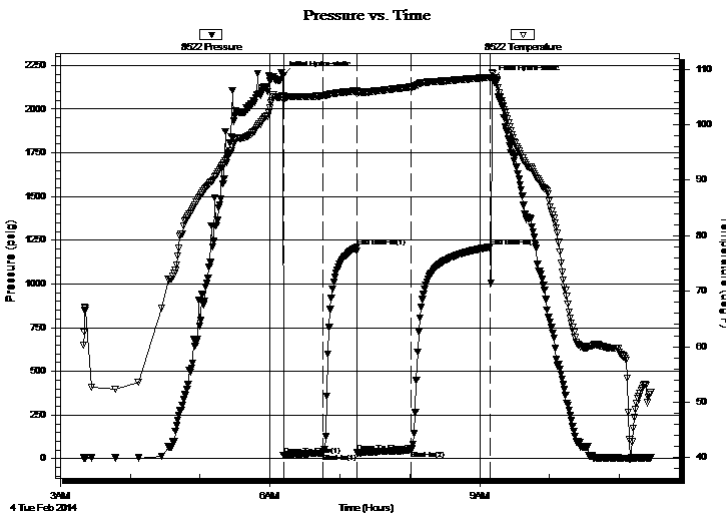
2014.02.04 @ 06:11:15

Time Off Btm:

2014.02.04 @ 09:10:45

TEST COMMENT: IF: Surface blow .
IS: No return.
FF: Surface blow .
FS: No return.

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2193.50	105.32	Initial Hydro-static
1	19.81	104.37	Open To Flow (1)
35	33.28	105.24	Shut-In(1)
64	1210.26	106.11	End Shut-In(1)
64	34.67	105.70	Open To Flow (2)
110	48.29	106.82	Shut-In(2)
178	1210.95	108.56	End Shut-In(2)
180	2171.02	109.46	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
65.00	Mud 100m (oil spots)	0.32

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

Shakespeare Oil Co, Inc.

16 16s 34w Scott, Ks

202 W Main St.
Salem, IL 62881

Bahm 1-16

Job Ticket: 55695

DST#: 1

ATTN: Tim Priest

Test Start: 2014.02.04 @ 03:20:00

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

0 deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

0 ppm

Viscosity: 48.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 7.99 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 4000.00 ppm

Filter Cake: 1.00 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
65.00	Mud 100m (oil spots)	0.320

Total Length: 65.00 ft Total Volume: 0.320 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

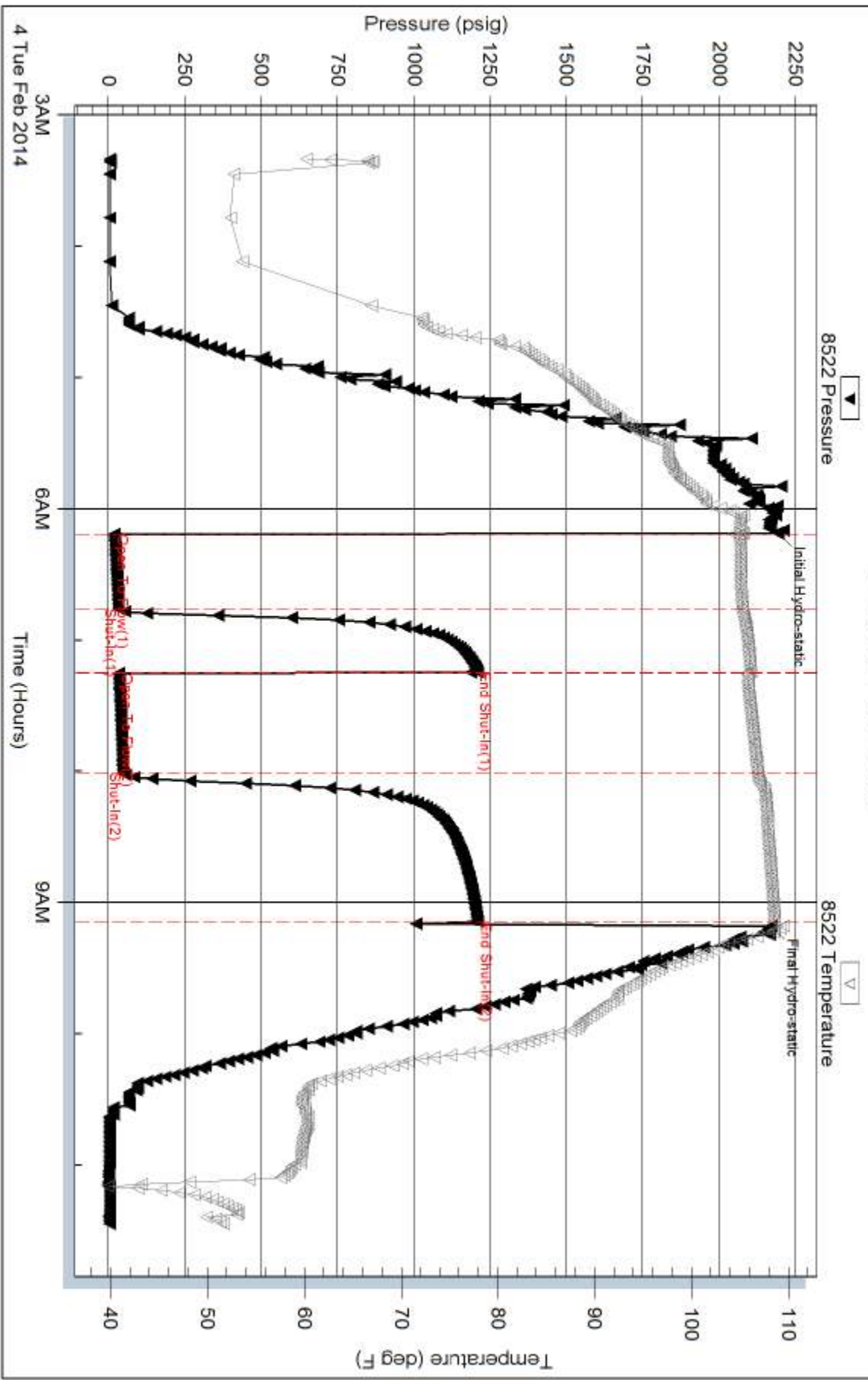
Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:

Pressure vs. Time





**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Shakespeare Oil Co, Inc.

16 16s 34w Scott, Ks

202 W Main St.
Salem, IL 62881

Bahm 1-16

Job Ticket: 55696

DST#: 2

ATTN: Tim Priest

Test Start: 2014.02.08 @ 10:48:00

GENERAL INFORMATION:

Formation: **Johnson**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 14:08:00

Time Test Ended: 18:36:15

Test Type: Conventional Bottom Hole (Reset)

Tester: Bradley Walter

Unit No: 69

Interval: 4660.00 ft (KB) To 4736.00 ft (KB) (TVD)

Total Depth: 4736.00 ft (KB) (TVD)

Hole Diameter: 7.88 inches Hole Condition: Good

Reference Elevations: 3143.00 ft (KB)

3133.00 ft (CF)

KB to GR/CF: 10.00 ft

Serial #: 8522 Outside

Press @ Run Depth: 28.88 psig @ 4661.00 ft (KB)

Start Date: 2014.02.08

End Date: 2014.02.08

Start Time: 10:48:05

End Time: 18:36:14

Capacity: 8000.00 psig

Last Calib.: 2014.02.08

Time On Btm: 2014.02.08 @ 14:07:45

Time Off Btm: 2014.02.08 @ 16:16:45

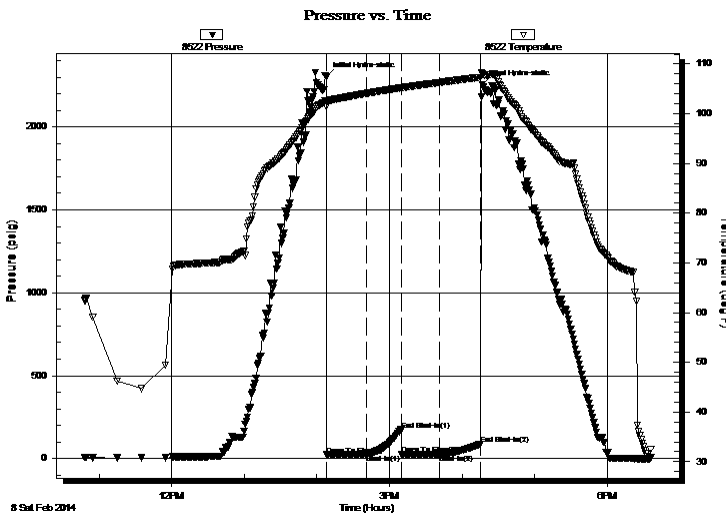
TEST COMMENT: IF: Surface blow, Died @ 20 min.

IS: No return.

FF: No blow.

FS: No return.

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2301.20	102.68	Initial Hydro-static
1	23.71	101.47	Open To Flow (1)
34	29.14	104.09	Shut-In(1)
62	174.48	105.22	End Shut-In(1)
62	27.40	105.19	Open To Flow (2)
94	28.88	106.29	Shut-In(2)
128	88.63	107.33	End Shut-In(2)
129	2255.80	107.96	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
15.00	Mud 100m (oil spots)	0.07

Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)

* Recovery from multiple tests



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Shakespeare Oil Co, Inc.

16 16s 34w Scott, Ks

202 W Main St.
Salem, IL 62881

Bahm 1-16

Job Ticket: 55696

DST#: 2

ATTN: Tim Priest

Test Start: 2014.02.08 @ 10:48:00

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

0 deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

0 ppm

Viscosity: 55.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 7.20 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 5000.00 ppm

Filter Cake: 1.00 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
15.00	Mud 100m (oil spots)	0.074

Total Length: 15.00 ft Total Volume: 0.074 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

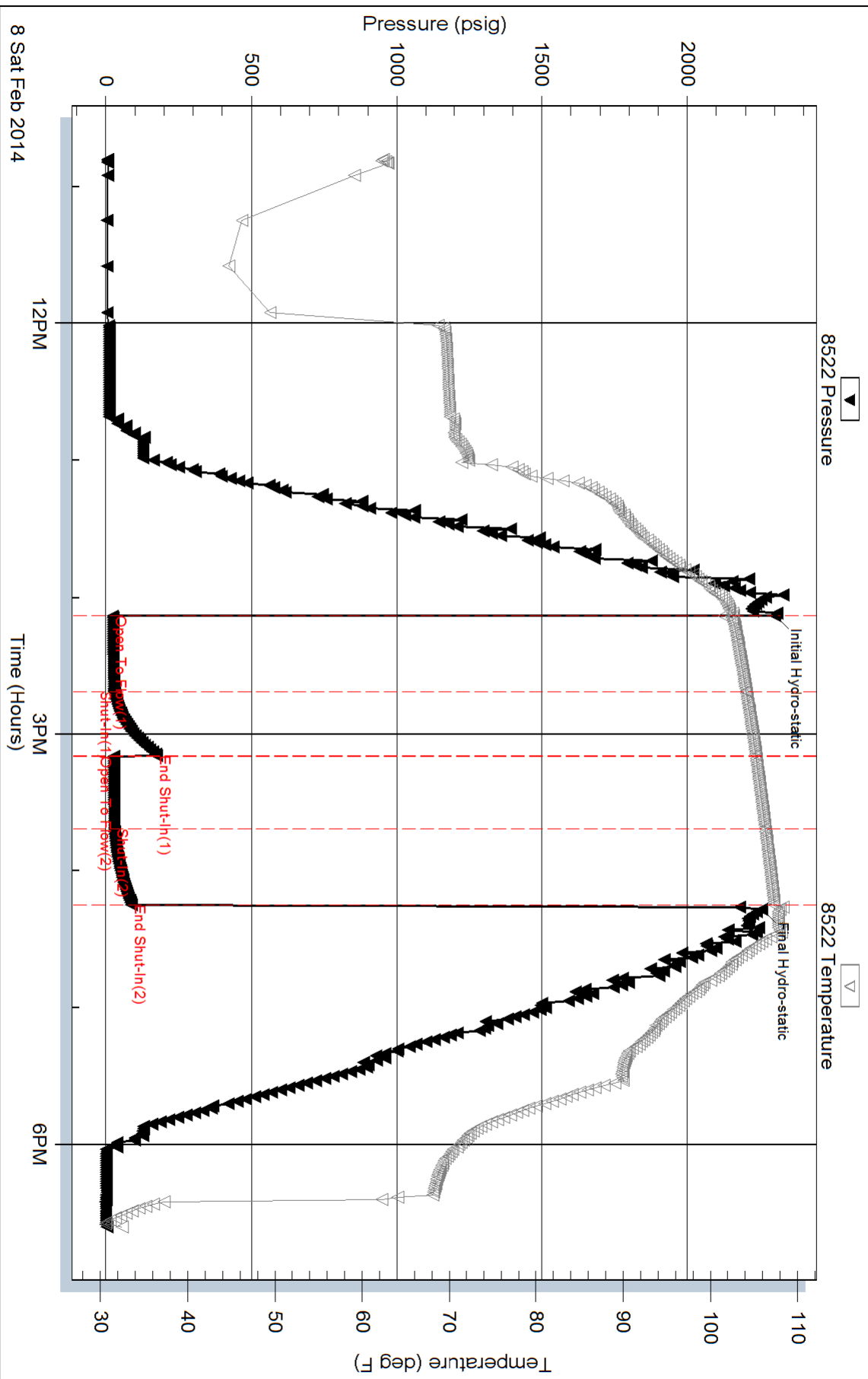
Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:

Pressure vs. Time



GEOLOGIST'S REPORT
DRILLING TIME AND SAMPLE LOG

COMPANY **SHAKESPARE OIL CO.** ELEVATIONS
 LEASE **Baham I-16** KG 3143'
 FIELD **Wildcat** DF _____
 LOCATION **2375' TNSL 1320' FEL** GL 3133'
 SEC **16** TMSP **16S** ROE **34W**
 COUNTY **Scott** STATE **Kansas** Measurements Are All From **KB**

CONTRACTOR **HD Rite 2** From **KB**
 SPUD **1-28-14** COMP **2-9-14**
 RTD **4880'** LTD **4882'** CASING CONDUCTION **N/A**
 MUD UP **3500'** TYPE MUD **Chemical** SURFACE **8-5/8" @ 263'**
 PRODUCTION **None**

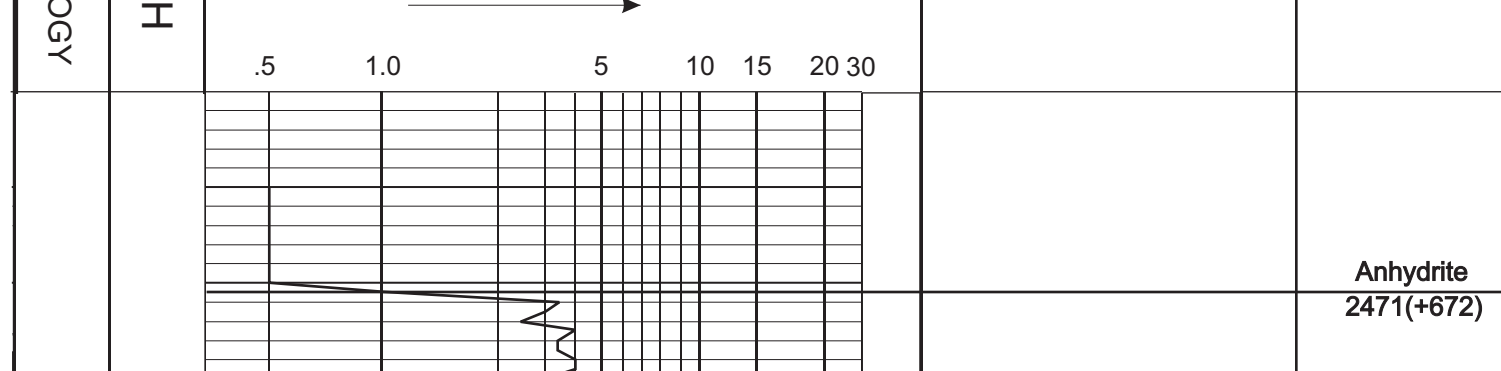
SAMPLES SAVED FROM **3800'** to **RTD**
 DRILLING TIME KEPT FROM **3800'** to **RTD**
 SAMPLES EXAMINED FROM **3800'** to **RTD**
 GEOLOGICAL SUPERVISION FROM **3900'** to **RTD**
 GEOLOGIST ON WELL **Tim Priest** By: **Weatherford**

FORMATION TOPS ELECTRIC LOG SAMPLE
 Anyvrite 2474 (+675) 2471 (+672)
 Heebner Shale 4008 (-865) 4006 (-863)
 Lansing 4050 (-907) 4050 (-907)
 SARC 4326 (-1183) 4325 (-1182)
 BRC 4421 (-1278) 4419 (-1276)
 Fort Scott 4597 (-1452) 4595 (-1454)
 Cherokee Shale 4625 (-1482) 4624 (-1481)
 Mississippian 4803 (-1660) 4804 (-1661)

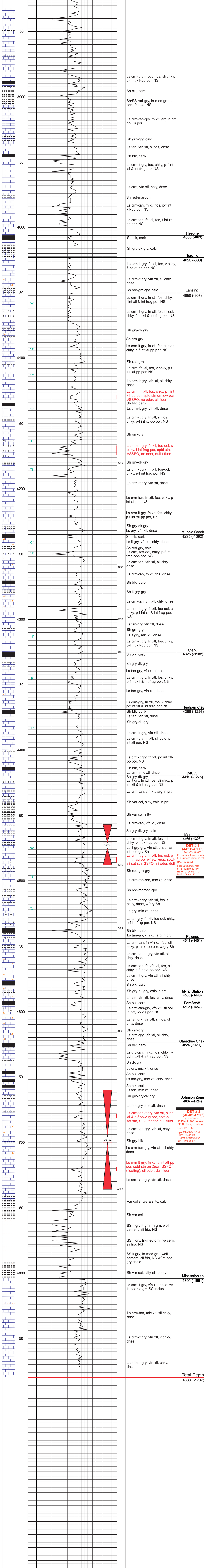
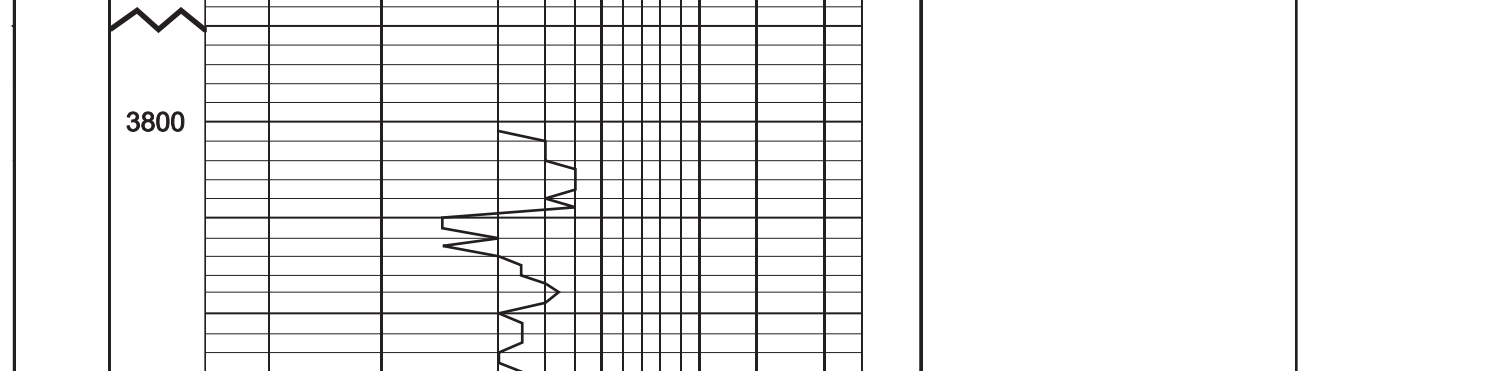
REMARKS Due to the lack of shows and negative drill stem tests, it was decided to plug and abandon the well.

Respectfully Submitted,
 Tim Priest
 Petroleum Geologist

API #15-171-21016-00-00



DEPTH	DRILLING TIME IN MINUTES PER FOOT	SAMPLE DESCRIPTION	REMARKS
2471 (+672)			Anhydrite
2491 (+652)			Base/ Anhydrite
3800			
3900		Sh blk, carb	
3950		Sh blk, carb	
4000		Sh blk, carb	
4006 (-863)		Sh blk, carb	Heebner
4023 (-880)		Sh blk, carb	Toronto
4050 (-907)		Sh blk, carb	Lansing
4100		Sh blk, carb	
4200		Sh blk, carb	
4235 (-1092)		Sh blk, carb	Muncie Creek
4300		Sh blk, carb	
4325 (-1182)		Sh blk, carb	Stark
4369 (-1226)		Sh blk, carb	Hushpuckney
4419 (-1276)		Sh blk, carb	BRC
4486 (-1323)		Sh blk, carb	Marmaton
4544 (-1401)		Sh blk, carb	Pawnee
4586 (-1443)		Sh blk, carb	Myric Station
4595 (-1452)		Sh blk, carb	Fort Scott
4624 (-1481)		Sh blk, carb	Cherokee Shale
4677 (-1524)		Sh blk, carb	Johnson Zone
4700		Sh blk, carb	
4804 (-1661)		Sh blk, carb	Mississippian
4880			Total Depth



DST # 1 (4451'-4500')
 30'-30'-30'
 FF: Surface blow, no return
 SF: Surface flow, no return
 FF: No blow, no return
 Rec: 65' OSM
 Pps: 20-33#/05-48#
 SIFs: 1210#/221#
 HSPs: 2104#/211#
 SHT: 109 deg F

DST # 2 (4648'-4725')
 30'-30'-30'
 FF: Surface blow, no return
 SF: Surface flow, no return
 FF: No blow, no return
 Rec: 15' OSM
 Pps: 24-29#/07-29#
 SIFs: 174#/0#
 HSPs: 2301#/2256#
 SHT: 108 deg F



PO Box 93999
Southlake, TX 76092

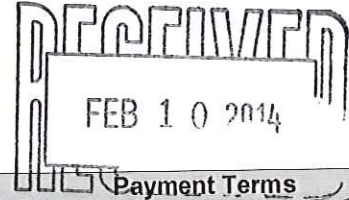
Voice: (817) 546-7282
Fax: (817) 246-3361

INVOICE

Invoice Number: 141140
Invoice Date: Jan 28, 2014
Page: 1

Bill To:

Shakespeare Oil Co., Inc.
202 West Main St.
Salem, IL 62881



Customer ID	Field Ticket #	Payment Terms	
Shak	61850	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-01	Great Bend	Jan 28, 2014	2/27/14

Quantity	Item	Description	Unit Price	Amount
1.00	WELL NAME	Bahm #1-16		
180.00	CEMENT MATERIALS	Class A Common	17.90	3,222.00
3.00	CEMENT MATERIALS	Gel	23.40	70.20
507.00	CEMENT MATERIALS	Chloride	0.80	405.60
194.64	CEMENT SERVICE	Cubic Feet Charge	2.48	482.71
399.60	CEMENT SERVICE	Ton Mileage Charge	2.60	1,038.96
1.00	CEMENT SERVICE	Surface ✓	1,512.25	1,512.25
45.00	CEMENT SERVICE	Pump Truck Mileage	7.70	346.50
45.00	CEMENT SERVICE	Light Vehicle Mileage	4.40	198.00
1.00	CEMENT SUPERVISOR	Dustin Chambers		
1.00	EQUIPMENT OPERATOR	Kevin Eddy		
1.00	OPERATOR ASSISTANT	Kevin Weighous		

INT

10502-5

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

\$ 1,455.24

ONLY IF PAID ON OR BEFORE

Feb 22, 2014

Subtotal	7,276.22
Sales Tax	301.37
Total Invoice Amount	7,577.59
Payment/Credit Applied	
TOTAL	7,577.59

DW

ALLIED OIL & GAS SERVICE, LLC 061850

Federal Tax I.D. # 20-8651475

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

SERVICE POINT: Great Bend #5

DATE <u>1-28-14</u>	SEC. <u>16</u>	TWP. <u>16S</u>	RANGE <u>34W</u>	CALLED OUT	ON LOCATION	JOB START <u>5:00</u>	JOB FINISH <u>6:05 PM</u>
LEASE <u>Bahn</u>		WELL # <u>1-16</u>		LOCATION <u>pence 1/2 N W1/4</u>		COUNTY <u>SCOTT</u>	STATE <u>KS</u>
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR H.D. Drilling #2
 TYPE OF JOB Sur Face
 HOLE SIZE 12 1/4 T.D.
 CASING SIZE 6 5/8 DEPTH
 TUBING SIZE DEPTH
 DRILL PIPE 4 1/2 DEPTH
 TOOL DEPTH
 PRES. MAX MINIMUM
 MEAS. LINE SHOE JOINT
 CEMENT LEFT IN CSG. 20 lbs
 PERFS.
 DISPLACEMENT 15.67 bbls Freshwater

OWNER _____
 CEMENT
 AMOUNT ORDERED 180 sks Class A
34" cc 2" gel

EQUIPMENT
 PUMP TRUCK CEMENTER Dustin Chambers
 # 366 HELPER Kevla Eddy
 BULK TRUCK
 # 47-112 DRIVER Kevla Werschow
 BULK TRUCK
 # DRIVER

COMMON	<u>180</u>	@	<u>17.90</u>	<u>3,222.00</u>
POZMIX		@		
GEL	<u>3</u>	@	<u>23.40</u>	<u>70.20</u>
CHLORIDE	<u>507</u>	@	<u>.80</u>	<u>405.60</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>194.64</u>	@	<u>2.48</u>	<u>482.70</u>
MILEAGE	<u>8,884.454</u>		<u>2.60</u>	<u>1,038.96</u>
TOTAL				<u>5,219.46</u>

REMARKS:

pump 56 bbls Freshwater Ahead
Mix 180 sks cement
Displace 15.67 bbls Freshwater
& slurry
Cement did circulation
plug down 5.45 PM
Part down

SERVICE

DEPTH OF JOB				
PUMP TRUCK CHARGE			<u>1512.25</u>	
EXTRA FOOTAGE		@		
MILEAGE Hum	<u>45</u>	@	<u>7.70</u>	<u>346.50</u>
MANIFOLD		@		
	<u>Hum 45</u>	@	<u>4.40</u>	<u>198.00</u>
		@		

TOTAL 2,056.75

PLUG & FLOAT EQUIPMENT

	@		
	@		
	@		
	@		
	@		

TOTAL _____

CHARGE TO: Shakespeare Oil
 STREET _____
 CITY _____ STATE _____ ZIP _____

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 & Doug Roberts
 SIGNATURE & Doug Roberts
Thank you!

SALES TAX (if Any) _____
 TOTAL CHARGES 7,276.21
 DISCOUNT 1,455.24 IF PAID IN 30 DAYS
5,820.96



INVOICE

PO Box 93999
Southlake, TX 76092

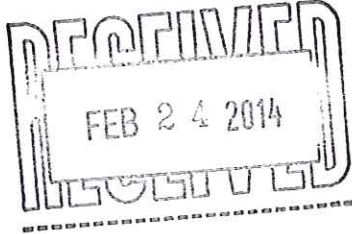
Invoice Number: 141365
Invoice Date: Feb 10, 2014
Page: 1

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

Bill To:
Shakespeare Oil Co., Inc. 202 West Main St. Salem, IL 62881

Customer ID	Field Ticket #	Payment Terms	
Shak	62211	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-03	Oakley	Feb 10, 2014	3/12/14

Quantity	Item	Description	Unit Price	Amount
1.00	WELL NAME	Bahm #1-16 <i>INT</i>		
162.00	CEMENT MATERIALS	Class A Common	17.90	2,899.80
108.00	CEMENT MATERIALS	Pozmix	9.35	1,009.80
9.00	CEMENT MATERIALS	Gel	23.40	210.60
67.00	CEMENT MATERIALS	Flo Seal	2.97	198.99
290.00	CEMENT SERVICE	Cubic Feet Charge	2.48	719.20
522.45	CEMENT SERVICE	Ton Mileage Charge	2.60	1,358.37
1.00	CEMENT SERVICE	Plug to Abandon ✓	1,250.00	1,250.00
45.00	CEMENT SERVICE	Pump Truck Mileage	7.70	346.50
45.00	CEMENT SERVICE	Light Vehicle Mileage	4.40	198.00
1.00	CEMENT SUPERVISOR	Kelly Gabel		
1.00	EQUIPMENT OPERATOR	Wayne McGhghy		
1.00	OPERATOR ASSISTANT	Brandon Wilkinson		



10502-017

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

\$ 2,047.81 ✓

ONLY IF PAID ON OR BEFORE
Mar 7, 2014

Subtotal	8,191.26
Sales Tax	667.59
Total Invoice Amount	8,858.85
Payment/Credit Applied	
TOTAL	8,858.85

DW

ALLIED OIL & GAS SERVICES, LLC 062211

Federal Tax I.D. # 20-8651475

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

SERVICE POINT:

DATE <u>2-10-14</u>	SEC. <u>16</u>	TWP. <u>16</u>	RANGE <u>34</u>	CALLED OUT	ON LOCATION	JOB START <u>12:30 PM</u>	JOB FINISH <u>1:00 PM</u>
LEASE <u>Bahn</u>	WELL# <u>1-16</u>	LOCATION <u>Panola (Cherokee Rd) 1/2 N</u>			COUNTY <u>Scott</u>	STATE <u>K5</u>	
OLD OR NEW (Circle one) <u>Wintlo</u>							

CONTRACTOR <u>HD #2</u>	OWNER <u>Demie</u>
TYPE OF JOB <u>PTA</u>	
HOLE SIZE <u>7 7/8</u> T.D.	CEMENT
CASING SIZE DEPTH	AMOUNT ORDERED: <u>270 S&S 60 #10902</u>
TUBING SIZE DEPTH	<u>49 gal 1/4 # floreal</u>
DRILL PIPE DEPTH	
TOOL DEPTH	
PRES. MAX MINIMUM	COMMON <u>162 S&S 1790 289980</u>
MEAS. LINE SHOE JOINT	POZMIX <u>108 S&S @ 925 100980</u>
CEMENT LEFT IN CSG.	GEL <u>9 S&S @ 2370 21060</u>
PERFS.	CHLORIDE @
DISPLACEMENT	ASC @

EQUIPMENT

PUMP TRUCK	CEMENTER <u>Kelly Gabel</u>
# <u>422</u>	HELPER <u>Wayne Maghary</u>
BULK TRUCK	
# <u>3969306</u>	DRIVER <u>Brandon Wilkerson</u>
BULK TRUCK	
#	DRIVER

POZMIX	<u>108 S&S @ 925</u>	<u>100980</u>
GEL	<u>9 S&S @ 2370</u>	<u>21060</u>
CHLORIDE	@	
ASC	@	
<u>floreal 62 #</u>	@ <u>291</u>	<u>19879</u>
	@	
	@	
	@	
	@	
	@	
	@	
HANDLING <u>289 S&S cut</u>	@ <u>248</u>	<u>71930</u>
MILEAGE <u>11.617 mi x 45 x 260</u>		<u>135837</u>
TOTAL		<u>621676</u>

REMARKS:

50 @ 2490

80 @ 1600

90 @ 800

40 @ 300

20 @ 60

30 R#

Thank you Kelly & crew

SERVICE

DEPTH OF JOB	<u>2490</u>	
PUMP TRUCK CHARGE	<u>125000</u>	
EXTRA FOOTAGE	@	
MILEAGE <u>M:LV 45</u>	@ <u>440</u> <u>19800</u>	
MANIFOLD	@	
<u>M:HV 45</u>	@ <u>770</u> <u>34650</u>	
	@	
TOTAL		<u>179450</u>

CHARGE TO: Shakspere

STREET _____

CITY _____ STATE _____ ZIP _____

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 _____

SIGNATURE [Signature]

PLUG & FLOAT EQUIPMENT

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

SALES TAX (If Any) _____

TOTAL CHARGES 8,011.26

DISCOUNT 2,002.81 IF PAID IN 30 DAYS

6,008.44 Net.