



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1210245  
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: \_\_\_\_\_

1210245

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 <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No  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: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Top Datum
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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: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <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> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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Douglas County, KS  
Well:Early AI-1  
Lease Owner:Altavista

Town Oilfield Service, Inc.  
(913) 837-8400

Commenced Spudding:  
04/22/2014

WELL LOG

Thickness of Strata	Formation	Total Depth
0-3	soil/clay	3
48	sand	51
4	lime and sand	55
134	shale	189
5	lime	194
5	shale	199
16	lime	215
8	shale	223
7	lime	230
6	shale	236
18	lime	254
12	shale	266
4	sand and sandy shale	270
17	shale	287
19	lime	306
4	sandy shale	310
9	sand	319
60	shale	379
23	lime	402
15	shale	417
8	lime	425
15	shale	440
8	sand and sandy shale	448
20	lime	468
3	shale	471
1	lime	472
13	shale	485
5	lime	490
1	lime crystals	491
2	lime	493
1	shale	494
15	lime	509
7	shale	516
24	lime	540
3	shale	543
4	lime	547
4	shale	551
4	lime	555
6	shale	561
11	sand	572



# Short Cuts

## TANK CAPACITY

BBLs. (42 gal.) equals  $D^2 \times .14 \times h$

D equals diameter in feet.

h equals height in feet.

## BARRELS PER DAY

Multiply gals. per minute x 34.2

HP equals BPH x PSI x .0004

BPH - barrels per hour

PSI - pounds square inch

## TO FIGURE PUMP DRIVES

\* D - Diameter of Pump Sheave

\* d - Diameter of Engine Sheave

SPM - Strokes per minute

RPM - Engine Speed

R - Gear Box Ratio

\*C - Shaft Center Distance

D -  $\text{RPM} \times d$  over  $\text{SPM} \times R$

d -  $\text{SPM} \times R \times D$  over RPM

SPM -  $\text{RPM} \times D$  over  $R \times d$

R -  $\text{RPM} \times D$  over  $\text{SPM} \times d$

BELT LENGTH -  $2C + 1.57(D + d) + \frac{(D-d)^2}{4C}$

\* Need these to figure belt length

TO FIGURE AMPS:  $\frac{\text{WATTS}}{\text{VOLTS}} = \text{AMPS}$

746 WATTS equal 1 HP

# Log Book

Well No. AI-1

Farm Early

KS Douglas  
(State) (County)

11 15 20  
(Section) (Township) (Range)

For Altavista  
(Well Owner)

## Town Oilfield Services, Inc.

1207 N. 1st East

Louisburg, KS 66053

913-710-5400

Early Farm: Douglas County  
 KS State; Well No. A-1

Elevation 1091  
 Commenced Spuding 04/22 20 14  
 Finished Drilling 04/23 20 14  
 Driller's Name Greg Perry  
 Driller's Name \_\_\_\_\_  
 Driller's Name \_\_\_\_\_  
 Tool Dresser's Name Kenny Green  
 Tool Dresser's Name Wes Dillard  
 Tool Dresser's Name \_\_\_\_\_  
 Contractor's Name TOS  
11 15 20  
 (Section) (Township) (Range)  
 Distance from S line, 4730 ft.  
 Distance from E line, 270 ft.

CASING AND TUBING MEASUREMENTS

Feet	In.	Feet	In.	Feet	In.
927		Baffle			
938	30	Total			

CASING AND TUBING RECORD

10" Set \_\_\_\_\_ 10" Pulled \_\_\_\_\_  
 8" Set \_\_\_\_\_ 8" Pulled \_\_\_\_\_  
 7" ~~6~~" Set 72.5' 6 1/2" Pulled \_\_\_\_\_  
 4" Set \_\_\_\_\_ 4" Pulled \_\_\_\_\_  
 2" Set \_\_\_\_\_ 2" Pulled \_\_\_\_\_

Thickness of Strata	Formation	Total Depth	Remarks
0-3	Soil-Clay	3	
48	Sand	51	
4	Lime & Sand	55	
134	Shale	189	
5	Lime	194	
5	Shale	199	
16	Lime	215	
8	Shale	223	
7	Lime	230	
6	Shale	236	
18	Lime	254	Shells
12	Shale	266	
4	Sand & Sandy Shale	270	No Oil
17	Shale	287	
19	Lime	306	Shells
4	Sandy Shale	310	
9	Sand	319	No Oil
60	Shale	379	
23	Lime	402	
15	Shale	417	
8	Lime	425	
15	Shale	440	
8	Sand & Sandy Shale	448	No Oil
20	Lime	468	
3	Shale	471	
1	Lime	472	
13	Shale	485	

485

Thickness of Strata	Formation	Total Depth	Remarks
5	Lime	490	
1	Lime Crystals	491	
2	Lime	493	Oil - Heavy Bleed
1	Shale	494	
15	Lime	509	
7	Shale	516	
24	Lime	540	
3	Shale	543	
4	Lime	547	
4	Shale	551	
4	Lime	555	Hertha
6	Shale	561	
11	Sand	572	No Oil
103	Shale	675	
11	Sand	686	No Oil
40	Shale	726	
8	Lime	734	
18	Shale	752	
10	Lime	762	
12	Shale	774	
3	Lime	777	
9	Shale	788	
3	Lime	791	
2	Shale	793	
2	Lime	795	
6	Shale & Lime	801	
11	Shale	812	



812

Thickness of Strata	Formation	Total Depth	Remarks
1	Lime	813	
7	Shale	820	
1	Lime	821	
2	Shale	823	
2	Lime	825	
6	Shale	831	
2	Sand	833	Slight Show
5	Sand/Lime	838	No Oil
2	Sand	840	Broken - Good saturation
2	Sand	842	Broken - Poor saturation
14	Sand	856	Solid - Poor saturation
4	Sand	860	Solid - Good saturation
6	Sand	866	Solid - Poor saturation
20	Sand	886	Solid - Good saturation
2	Sand	888	No Oil
47	Shale	935	
2	Lime	937	
6	Sand	943	No Oil
37	Shale	980	TD



**CONSOLIDATED**  
Oil Well Services, LLC

**REMIT TO**  
~~FINV~~  
Consolidated Oil Well Services, LLC  
Dept. 970  
P.O. Box 4346  
Houston, TX 77210-4346

**MAIN OFFICE**  
P.O. Box 884  
Chanute, KS 66720  
620/431-9210 • 1-800/467-8676  
Fax 620/431-0012

INVOICE

Invoice # 267597

Invoice Date: 04/24/2014 Terms: 0/30/10,n/30

Page 1

ALTAVISTA ENERGY INC  
4595 K-33 HIGHWAY  
P.O. BOX 128  
WELLSVILLE KS 66092  
(785) 883-4057

EARLY AI-1  
47115  
NE 11-15-20  
04-22-2014  
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	35.00	11.5000	402.50
1118B	PREMIUM GEL / BENTONITE	59.00	.2200	12.98
1111	SODIUM CHLORIDE (GRANULA	68.00	.3900	26.52
1110A	KOL SEAL (50# BAG)	175.00	.4600	80.50

Sublet Performed	Description	Total
9996-120	CEMENT MATERIAL DISCOUNT	-156.75

Description	Hours	Unit Price	Total
495 CEMENT PUMP (SURFACE)	1.00	870.00	870.00
495 EQUIPMENT MILEAGE (ONE WAY)	.00	4.20	.00
495 CASING FOOTAGE	73.00	.00	.00
548 MIN. BULK DELIVERY	.50	368.00	184.00
675 80 BBL VACUUM TRUCK (CEMENT)	1.50	100.00	150.00

Amount Due 1763.87 if paid after 05/04/2014

Parts:	522.50	Freight:	.00	Tax:	26.16	AR	1595.91
Labor:	.00	Misc:	.00	Total:	1595.91		
Sublt:	-156.75	Supplies:	.00	Change:	.00		

Signed \_\_\_\_\_ Date \_\_\_\_\_



**CONSOLIDATED**  
Oil Well Services, LLC

267597

TICKET NUMBER 47115

LOCATION Ottawa KS

FOREMAN Fred Madar

PO Box 884, Chanute, KS 66720  
620-431-9210 or 800-467-8676

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
4/22/14	3244	Early # A.I.1	NE 11	15	20	DG

CUSTOMER <u>Altavista Energy</u>		
MAILING ADDRESS <u>P.O. Box 128</u>		
CITY <u>Wellsville</u>	STATE <u>KS</u>	ZIP CODE <u>66092</u>

TRUCK #	DRIVER	TRUCK #	DRIVER
712	Fred Mad		
495	Har Bec		
675	Kai Dat		
548	MikHae		

JOB TYPE <u>Surface</u>	HOLE SIZE <u>978</u>	HOLE DEPTH <u>74'</u>	CASING SIZE & WEIGHT <u>7"</u>
CASING DEPTH <u>73'</u>	DRILL PIPE _____	TUBING _____	OTHER _____
SLURRY WEIGHT _____	SLURRY VOL _____	WATER gal/sk _____	CEMENT LEFT in CASING <u>10'</u>
DISPLACEMENT <u>3.5BBL</u>	DISPLACEMENT PSI _____	MIX PSI _____	RATE <u>5BPM</u>

REMARKS: Hold a new safety meeting. Establish pump rate thru 7" casing  
Mix + Pump 35 SKS 50/50 Por Mix Cement 2% Gel 5% Salt  
5# Kol Seal/sk. Cement to surface. Displace 7" casing clean  
w/ BBL water. Shut in casing.

TOS Drilling - Greg Perry

Fred Madar

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405	1	PUMP CHARGE Surface Cement	495	870.00 ✓
5406	-	MILEAGE		N/C ✓
5402	73'	Casing footage		N/C ✓
5407	1/2 Minimum	Ton Miles		184.00 ✓
5502C	1 1/2 hr	60 BBL Vac Truck		150.00 ✓
1124	35 SKS	50/50 Por Mix Cement	402.50	✓
115B	59#	Premium Gel	128.00	✓
1111	68#	Granulated Salt	26.52	✓
110A	175#	Kol Seal	80.50	✓
		Material	522.50	
		less 30%	156.75	✓
		Total Material		365.75
				1763.87
			7.15%	SALES TAX
				ESTIMATED
				TOTAL

completed

Revin 3737

AUTHORIZATION Bryan Miller TITLE \_\_\_\_\_ DATE \_\_\_\_\_

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form



**CONSOLIDATED**  
Oil Well Services, LLC

**REMIT TO**  
FINV  
Consolidated Oil Well Services, LLC  
Dept. 970  
P.O. Box 4346  
Houston, TX 77210-4346

**MAIN OFFICE**  
P.O. Box 884  
Chanute, KS 66720  
620/431-9210 • 1-800/467-8676  
Fax 620/431-0012

INVOICE

Invoice # 267667

Invoice Date: 04/28/2014 Terms: 0/30/10,n/30

Page 1

ALTAVISTA ENERGY INC  
4595 K-33 HIGHWAY  
P.O. BOX 128  
WELLSVILLE KS 66092  
(785) 883-4057

EARLY AI-1  
47119  
NE 11-15-20  
04-23-2014  
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	123.00	11.5000	1414.50
1118B	PREMIUM GEL / BENTONITE	307.00	.2200	67.54
1111	SODIUM CHLORIDE (GRANULA	228.00	.3900	88.92
1110A	KOL SEAL (50# BAG)	615.00	.4600	282.90
4402	2 1/2" RUBBER PLUG	1.00	29.5000	29.50
1401	HE 100 POLYMER	.50	47.2500	23.63

Sublet Performed	Description	Total
9996-120	CEMENT MATERIAL DISCOUNT	-556.16

Description	Hours	Unit Price	Total
495 CEMENT PUMP	1.00	1085.00	1085.00
495 EQUIPMENT MILEAGE (ONE WAY)	25.00	4.20	105.00
495 CASING FOOTAGE	959.00	.00	.00
548 MIN. BULK DELIVERY	1.00	122.67	122.67
675 80 BBL VACUUM TRUCK (CEMENT)	1.50	100.00	150.00

Amount Due 3506.02 if paid after 05/08/2014

Parts:	1906.99	Freight:	.00	Tax:	96.59	AR	2910.09
Labor:	.00	Misc:	.00	Total:	2910.09		
Sublt:	-556.16	Supplies:	.00	Change:	.00		

Signed \_\_\_\_\_ Date \_\_\_\_\_

BARTLESVILLE, OK  
918/338-0808

EL DORADO, KS  
316/322-7022

EUREKA, KS  
620/583-7664

PONCA CITY, OK  
580/762-2303

OAKLEY, KS  
785/672-8822

OTTAWA, KS  
785/242-4044

THAYER, KS  
620/839-5269

GILLETTE, WY  
307/686-4914

CUSHING, OK  
918/225-2650



**CONSOLIDATED**  
Oil Well Services, LLC

267667

TICKET NUMBER 47119

LOCATION Ottawa KS

FOREMAN Fred Maden

PO Box 884, Chanute, KS 66720  
620-431-9210 or 800-467-8676

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9/23/14	3244	Early # AI-1	NE 11	15	20	DC
CUSTOMER			TRUCK #			
Alta Vista Energy			DRIVER			
MAILING ADDRESS			TRUCK #			
P.O. Box 128			DRIVER			
CITY			TRUCK #			
Wellsville			DRIVER			
STATE			TRUCK #			
KS			DRIVER			
ZIP CODE			TRUCK #			
66092			DRIVER			

JOB TYPE Long string HOLE SIZE 5 7/8 HOLE DEPTH 980 CASING SIZE & WEIGHT 2 1/8 EUE  
 CASING DEPTH 959 DRILL PIPE Baffle in TUBING @ 927' OTHER \_\_\_\_\_  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 30' + PLY  
 DISPLACEMENT 5.4 BBL DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 58 BPM

REMARKS: Hold crew safety meeting. Establish pump rate. Pump 1/2 Gal HE-100 Polymer Flush. Circulate to conditioner hole. Mix + pump 100# Gel Flush. Mix + Pump 123 sks 50/50 Por Mix Cement 2% Gel 5% Salt 5# Kol Seal/sk. Cement to surface Flush pump + lines clean. Displace 2 1/2" Rubber plug to baffle in casing. Pressure to 800# PSI. Release pressure to set float valve. Shut in casing.

T&S Drilling Greg

Fred Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	1025 <sup>00</sup>
5406	25 mi	MILEAGE	495	105 <sup>00</sup>
5402	959	Casing footage		N/C
5407	1/3 minimum	Ton Miles	598	122 <sup>67</sup>
5502C	1 1/2 hr	50 BBL Voc Truck	675	150 <sup>00</sup>
1124	123 sks	50/50 Por Mix Cement	1414 <sup>50</sup>	
1118B	302 #	Premium Gel	675 <sup>4</sup>	
1111	225 #	Granulated Salt	882 <sup>2</sup>	
1110A	615 #	Kol Seal	282 <sup>20</sup>	
		Material	1853 <sup>84</sup>	
		Less - 30%	-556 <sup>16</sup>	
		Total Material		1297 <sup>20</sup>
4402	1	2 1/2" Rubber Plug		29 <sup>50</sup>
7401	1/2 Gal	HE 100 Polymer		23 <sup>63</sup>
			3506 <sup>00</sup>	
		7.15%	SALES TAX	96 <sup>59</sup>
			ESTIMATED TOTAL	2910 <sup>09</sup>

completed

AUTHORIZATION Bryan Miller TITLE \_\_\_\_\_ DATE \_\_\_\_\_

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.