



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1222350
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: _____

1222350

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: 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> _____	PRODUCTION INTERVAL: _____ _____
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DIAMOND TESTING GENERAL REPORT

Jake Fahrenbruch, Tester

Cell: (620) 282-8977 / Office: (800) 542-7313



TEST INFORMATION

Well Name	Inloes Trust #1-14
Formation	Lansing "K" 4364'-4393'
Surface Location	Sec 14-8s-36w-Thomas Co.-KS
Company Name	Val Energy, Inc.
Test Type	Bottom-Hole DST w/J&SJ
Gauge Name	Inside 5951
Start Test Date	2014/09/23
Start Test Time	04:56:00
Final Test Date	2014/09/23
Final Test Time	12:08:00
Job Number	F320
Contact	Dustin Wyer
Site Contact	Harley Sayles

TEST RESULTS

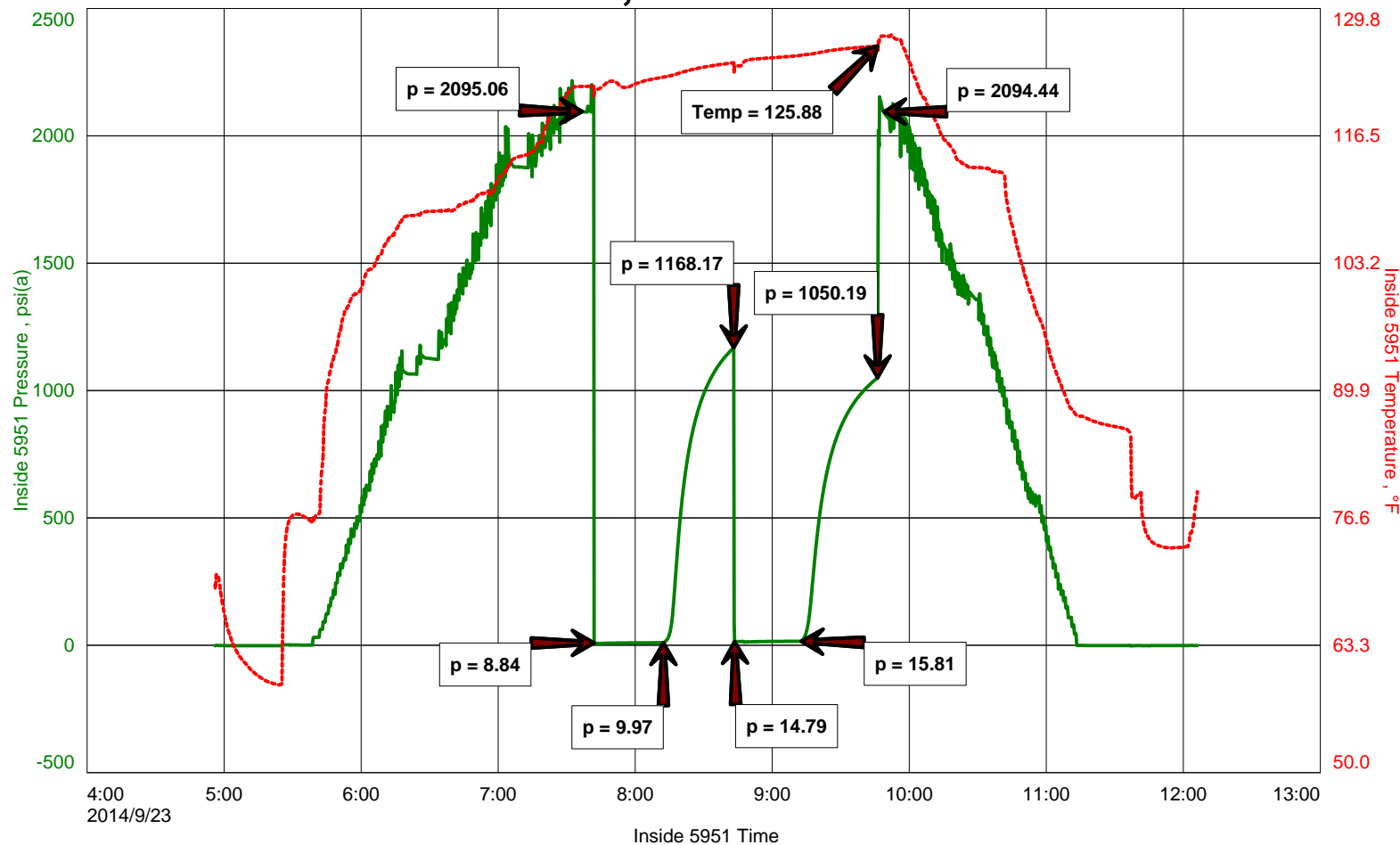
Initial open, surface blow, increased to .25", blow died in 20 minutes.
Final open, no blow.

RECOVERED: 10' of DRLG MUD, 100% mud
TOOL SAMPLE: OSM, 2% oil, 98% mud

Val Energy, Inc.
Start Test Date: 2014/09/23
Final Test Date: 2014/09/23

Inloes Trust #1-14
Formation: Lansing "K" 4364'-4393'
Job Number: F320

DST #1, LANSING "K"





DIAMOND TESTING
 P.O. Box 157
 HOISINGTON, KANSAS 67544
 (800) 542-7313
DRILL-STEM TEST TICKET
 FILE: INLTRUIDSTI

ON LOCATION: 03:28
 START RECORDERS: 04:56
 STOP RECORDERS: 12:08

Company VAL ENERGY INC. Lease & Well No. INLOES TRUST #1-14
 Contractor VAL ENERGY, INC. RIG #7 Charge to VAL ENERGY, INC.
 Elevation 3310' KB Formation LANSING K Effective Pay _____ Ft. Ticket No. F320
 Date 9-23-14 Sec. 14 Twp. 8S Range 36W County THOMAS State KANSAS
 Test Approved By HARLEY SAYLES / DUSTIN WYER Diamond Representative JAKE FAHRENBRUCH

Formation Test No. 1 Interval Tested from 4364 ft. to 4393 ft. Total Depth 4393 ft.
 Packer Depth 4359 ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
 Packer Depth 4364 ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
 Depth of Selective Zone Set _____

Top Recorder Depth (Inside) 4342 ft. Recorder Number 5951 Cap. 5000 P.S.I.
 Bottom Recorder Depth (Outside) 4365 ft. Recorder Number 5584 Cap. 5000 P.S.I.
 Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ P.S.I.
 Mud Type CHEMICAL Viscosity 51 (2*LCM) Drill Collar Length 62 ft. I.D. 2 1/4 in.
 Weight 9.3 Water Loss 8.0 cc. Weight Pipe Length _____ ft. I.D. 2 7/8 in.
 Chlorides 5100 P.P.M. Drill Pipe Length 4269 ft. I.D. 3 1/2 in.
 Jars: Make STERLING Serial Number #5 JARS 3/8 JWL Test Tool Length 33 ft. Tool Size 3 1/2-IF in.
 Did Well Flow? NO Reversed Out NO Anchor Length 29 ft. Size 4 1/2-FH in.
 Main Hole Size 7 7/8 Tool Joint Size 4 1/2 XH in. Surface Choke Size 1 in. Bottom Choke Size 5/8 in.

Blow: 1st Open: SURFACE BLOW, INCREASED TO 1/4", BLOW DIED IN 20 MINUTES.
 2nd Open: NO BLOW

Recovered 10 ft. of DRLG MUD 100% MUD
 Recovered _____ ft. of TOOL SAMPLE: OSM 2% OIL, 98% MUD
 Recovered _____ ft. of _____
 Recovered _____ ft. of _____

Recovered _____ ft. of _____	Price Job
Recovered _____ ft. of _____	Other Charges
Remarks: _____	<u>JARS & SAFETY JOINT</u>
	<u>492 MRT (PRAT KS)</u>
	Total

Time Set Packer(s) 7:45 AM Time Started Off Bottom 9:45 AM Maximum Temperature 126F

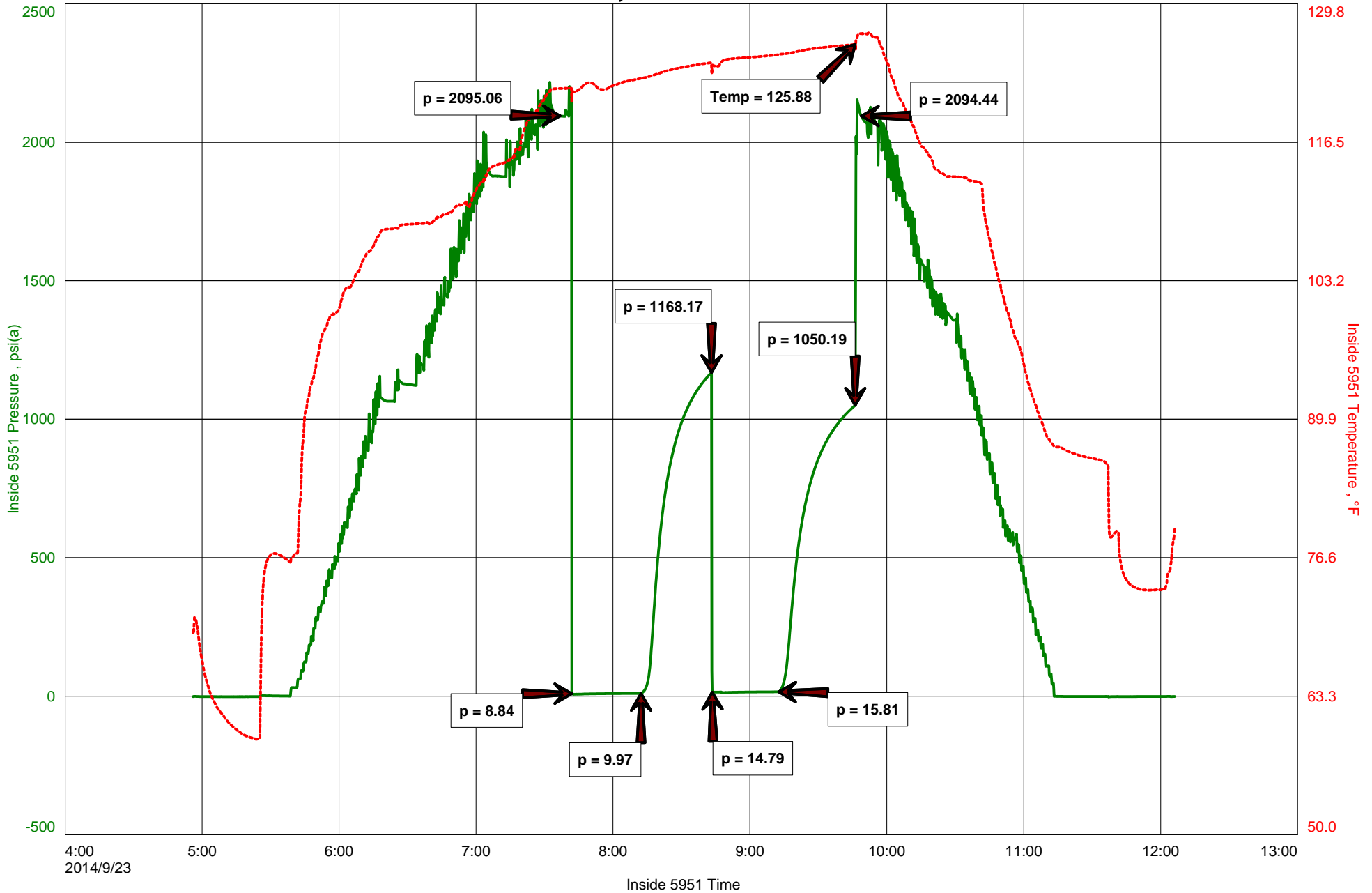
Initial Hydrostatic Pressure..... (A) 2095 P.S.I.
 Initial Flow Period..... Minutes 30 (B) 9 P.S.I. to (C) 10 P.S.I.
 Initial Closed In Period..... Minutes 30 (D) 1168 P.S.I.
 Final Flow Period..... Minutes 30 (E) 15 P.S.I. to (F) 116 P.S.I.
 Final Closed In Period..... Minutes 30 (G) 1050 P.S.I. THANKS!
 Final Hydrostatic Pressure..... (H) 2094 P.S.I. Jake Fahrenbruch

Diamond Testing shall not be liable for damages of any kind to the property or personnel of the one for whom a test is made or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statement or opinion concerning the result of any test. Tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.

Val Energy, Inc.
Start Test Date: 2014/09/23
Final Test Date: 2014/09/23

Inloes Trust #1-14
Formation: Lansing "K" 4364'-4393'
Job Number: F320

DST #1, LANSING "K"





DIAMOND TESTING
P.O. Box 157
HOISINGTON, KANSAS 67544
(800) 542-7313
DRILL-STEM TEST TICKET
FILE: _____

TIME ON: _____
TIME OFF: _____

Company _____ Lease & Well No. _____
Contractor _____ Charge to _____
Elevation _____ Formation _____ Effective Pay _____ Ft. Ticket No. _____
Date _____ Sec. _____ Twp. _____ S Range _____ W County _____ State **KANSAS**
Test Approved By _____ Diamond Representative _____

Formation Test No. _____ Interval Tested from _____ ft. to _____ ft. Total Depth _____ ft.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Depth of Selective Zone Set _____

Top Recorder Depth (Inside) _____ ft. Recorder Number _____ Cap. _____ P.S.I.
Bottom Recorder Depth (Outside) _____ ft. Recorder Number _____ Cap. _____ P.S.I.
Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ P.S.I.

Mud Type _____ Viscosity _____ Drill Collar Length _____ ft. I.D. 2 1/4 in.
Weight _____ Water Loss _____ cc. Weight Pipe Length _____ ft. I.D. 2 7/8 in.
Chlorides _____ P.P.M. Drill Pipe Length _____ ft. I.D. 3 1/2 in.
Jars: Make STERLING Serial Number _____ Test Tool Length _____ ft. Tool Size 3 1/2-IF in.
Did Well Flow? _____ Reversed Out _____ Anchor Length _____ ft. Size 4 1/2-FH in.
Main Hole Size 7 7/8 Tool Joint Size 4 1/2 in. Surface Choke Size 1 in. Bottom Choke Size 5/8 in.

Blow: 1st Open: _____
2nd Open: _____

Recovered _____ ft. of _____	Price Job Other Charges Insurance Total
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Remarks: _____	

Time Set Packer(s) _____ A.M. P.M. Time Started Off Bottom _____ A.M. P.M. Maximum Temperature _____
Initial Hydrostatic Pressure..... (A) _____ P.S.I.
Initial Flow Period..... Minutes _____ (B) _____ P.S.I. to (C) _____ P.S.I.
Initial Closed In Period..... Minutes _____ (D) _____ P.S.I.
Final Flow Period..... Minutes _____ (E) _____ P.S.I. to (F) _____ P.S.I.
Final Closed In Period..... Minutes _____ (G) _____ P.S.I.
Final Hydrostatic Pressure..... (H) _____ P.S.I.

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DIAMOND TESTING GENERAL REPORT

Jake Fahrenbruch, Tester

Cell: (620) 282-8977 / Office: (800) 542-7313



TEST INFORMATION

Well Name	Inloes Trust #1-14
Formation	Marm.-Cher. (4397'-4653')
Surface Location	Sec 14-8s-36w-Thomas Co.-KS
Company Name	Val Energy, Inc.
Test Type	Bottom-Hole w/J&SJ
Gauge Name	Inside 5951
Start Test Date	2014/09/24
Start Test Time	21:29:00
Final Test Date	2014/09/25
Final Test Time	06:04:00
Job Number	F321
Contact	Dustin Wyler
Site Contact	Harley Sayles

TEST RESULTS

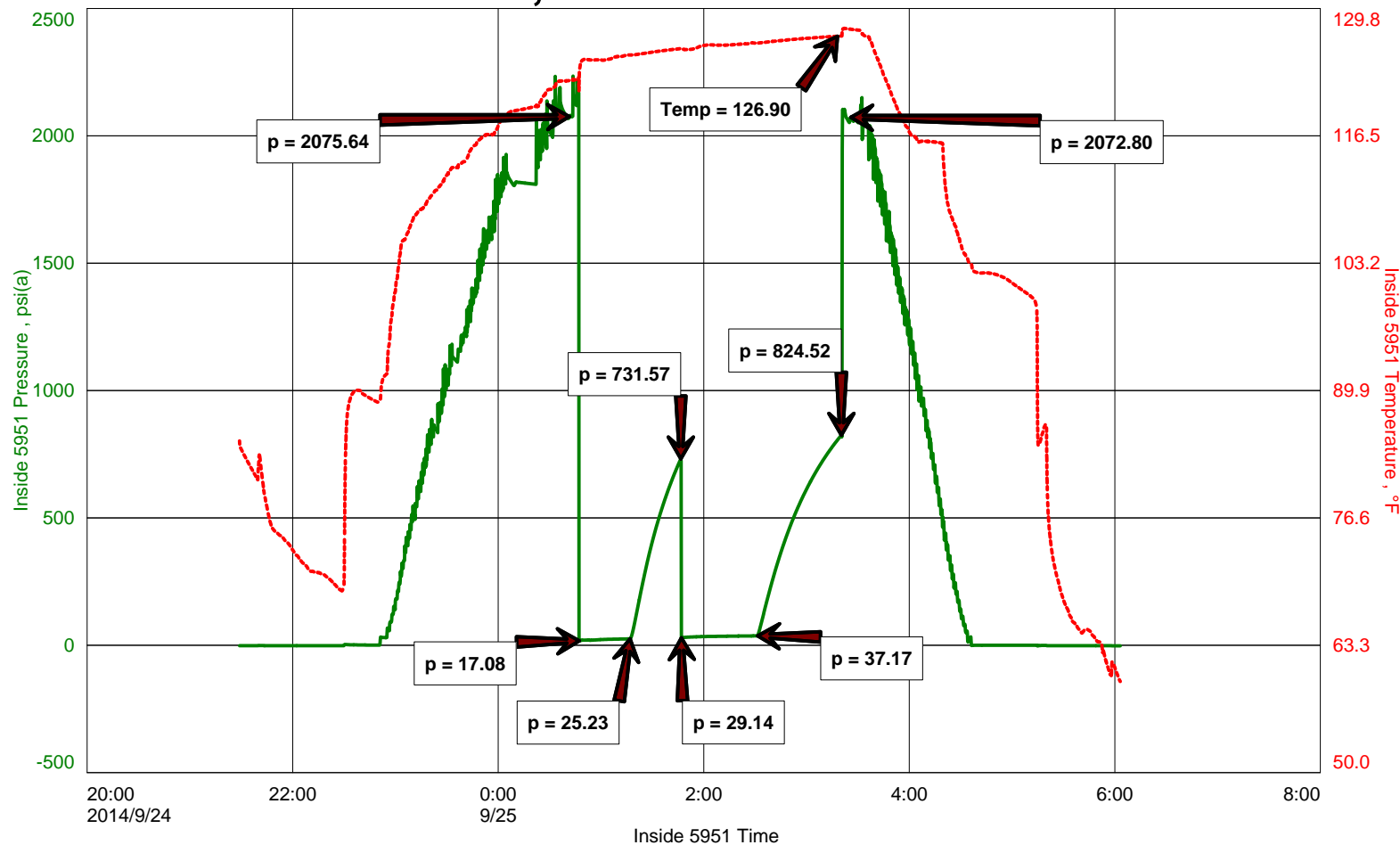
Initial open, .5" blow, increased to 1.25". No blowback.
 Final open, surface blow, dead in 10 minutes. No blowback.

RECOVERED 20' OF DRILLING MUD, 100% M

Val Energy, Inc.
 Start Test Date: 2014/09/24
 Final Test Date: 2014/09/25

Inloes Trust #1-14
 Formation: Marm.-Cher. (4397'-4653')
 Job Number: F321

DST #2, Marmaton - Cherokee





DIAMOND TESTING
 P.O. Box 157
 HOISINGTON, KANSAS 67544
 (800) 542-7313
DRILL-STEM TEST TICKET
 FILE: INLTRUIDST2

ON LOCATION: 20:33 9-24
 START RECORDERS: 21:29 9-24
 STOP RECORDERS: 06:04 9-25

Company VAL ENERGY, INC. Lease & Well No. INLOES TRUST #1-14
 Contractor VAL ENERGY, INC. RIG # 7 Charge to VAL ENERGY, INC.
 Elevation 3310' KB Formation MARM. - CHER. Effective Pay _____ Ft. Ticket No. F321
 Date 9-25-14 Sec. 14 Twp. 8s Range 36W County THOMAS State KANSAS
 Test Approved By HARLEY SAYLES Diamond Representative JAKE FAHRENBRUCH

Formation Test No. 2 Interval Tested from 4397 ft. to 4653 ft. Total Depth 4653 ft.
 Packer Depth 4392 ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
 Packer Depth 4397 ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
 Depth of Selective Zone Set _____

Top Recorder Depth (Inside) 4375 ft. Recorder Number 5951 Cap. 5000 P.S.I.
 Bottom Recorder Depth (Outside) 4625 ft. Recorder Number 5584 Cap. 5000 P.S.I.
 Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ P.S.I.

Mud Type CHEMICAL Viscosity 49 (2# LCM) Drill Collar Length 62 ft. I.D. 2 1/4 in.
 Weight 9.2 Water Loss 6.4 cc. Weight Pipe Length _____ ft. I.D. 2 7/8 in.
 Chlorides 4000 P.P.M. Drill Pipe Length 4302 ft. I.D. 3 1/2 in.

Jars: Make STERLING Serial Number #5 J&S JNT. Test Tool Length 33 ft. Tool Size 3 1/2-IF in.
 Did Well Flow? NO Reversed Out NO Anchor Length 256 ft. Size 4 1/2-FH in.
 Main Hole Size 7 7/8 Tool Joint Size 4 1/2 XH in. Surface Choke Size _____ in. Bottom Choke Size 5/8 in.

Blow: 1st Open: HALF INCH BLOW, INCREASED TO 1 1/4" NO BLOWBACK
 2nd Open: SURFACE BLOW, DEAD IN 10 MINUTES. NO BLOWBACK

Recovered 20 ft. of DRUG MUD 100' MUD
 Recovered _____ ft. of _____
 Recovered _____ ft. of _____
 Recovered _____ ft. of _____

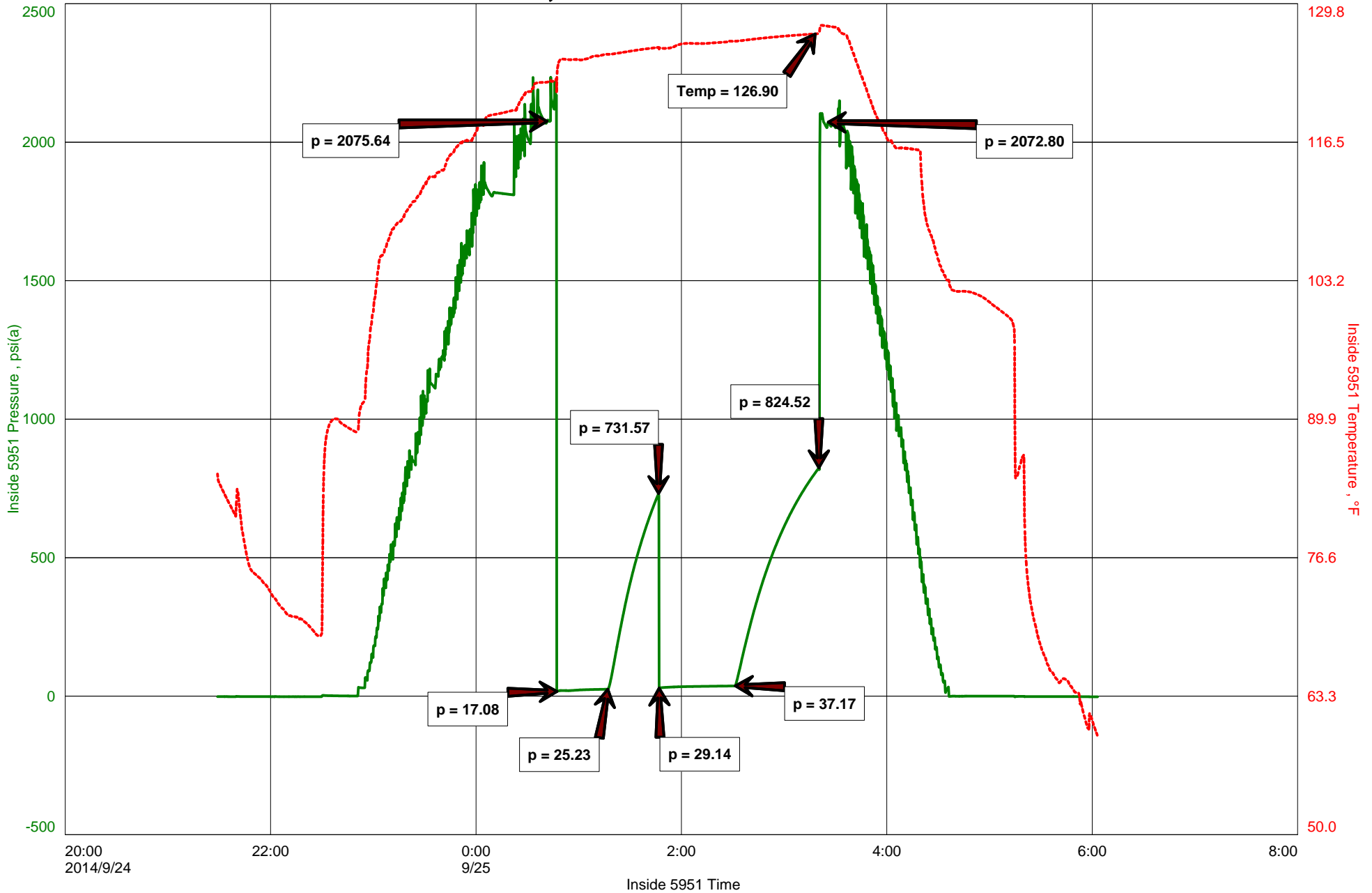
Recovered _____ ft. of _____	Price Job
Recovered _____ ft. of _____	Other Charges
Remarks: _____	JARS. <u>S. JOINT</u>
	<u>45 MRT (COLBY KS)</u>
	Total

Time Set Packer(s) 12:49 ^{A.M.} _{P.M.} Time Started Off Bottom 3:19 ^{A.M.} _{P.M.} Maximum Temperature 127 F

Initial Hydrostatic Pressure..... (A) 2076 P.S.I.
 Initial Flow Period..... Minutes 30 (B) 17 P.S.I. to (C) 25 P.S.I.
 Initial Closed In Period..... Minutes 30 (D) 732 P.S.I.
 Final Flow Period..... Minutes 45 (E) 29 P.S.I. to (F) 37 P.S.I.
 Final Closed In Period..... Minutes 45 (G) 825 P.S.I. THANK YOU!
 Final Hydrostatic Pressure..... (H) 2073 P.S.I. Jack E. Johnson

Diamond Testing shall not be liable for damages of any kind to the property or personnel of the one for whom a test is made or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statement or opinion concerning the result of any test. Tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.

DST #2, Marmaton - Cherokee





DIAMOND TESTING
P.O. Box 157
HOISINGTON, KANSAS 67544
(800) 542-7313
DRILL-STEM TEST TICKET
FILE: _____

TIME ON: _____
TIME OFF: _____

Company _____ Lease & Well No. _____
Contractor _____ Charge to _____
Elevation _____ Formation _____ Effective Pay _____ Ft. Ticket No. _____
Date _____ Sec. _____ Twp. _____ S Range _____ W County _____ State **KANSAS**
Test Approved By _____ Diamond Representative _____

Formation Test No. _____ Interval Tested from _____ ft. to _____ ft. Total Depth _____ ft.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Depth of Selective Zone Set _____

Top Recorder Depth (Inside) _____ ft. Recorder Number _____ Cap. _____ P.S.I.
Bottom Recorder Depth (Outside) _____ ft. Recorder Number _____ Cap. _____ P.S.I.
Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ P.S.I.

Mud Type _____ Viscosity _____ Drill Collar Length _____ ft. I.D. 2 1/4 in.
Weight _____ Water Loss _____ cc. Weight Pipe Length _____ ft. I.D. 2 7/8 in.
Chlorides _____ P.P.M. Drill Pipe Length _____ ft. I.D. 3 1/2 in.
Jars: Make STERLING Serial Number _____ Test Tool Length _____ ft. Tool Size 3 1/2-IF in.
Did Well Flow? _____ Reversed Out _____ Anchor Length _____ ft. Size 4 1/2-FH in.
Main Hole Size 7 7/8 Tool Joint Size 4 1/2 in. Surface Choke Size 1 in. Bottom Choke Size 5/8 in.

Blow: 1st Open: _____
2nd Open: _____

Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	Price Job
Recovered _____ ft. of _____	Other Charges
Remarks: _____	Insurance
	Total

Time Set Packer(s) _____ A.M. P.M. Time Started Off Bottom _____ A.M. P.M. Maximum Temperature _____
Initial Hydrostatic Pressure..... (A) _____ P.S.I.
Initial Flow Period..... Minutes _____ (B) _____ P.S.I. to (C) _____ P.S.I.
Initial Closed In Period..... Minutes _____ (D) _____ P.S.I.
Final Flow Period..... Minutes _____ (E) _____ P.S.I. to (F) _____ P.S.I.
Final Closed In Period..... Minutes _____ (G) _____ P.S.I.
Final Hydrostatic Pressure..... (H) _____ P.S.I.

Diamond Testing shall not be liable for damages of any kind to the property or personnel of the one for whom a test is made or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statement or opinion concerning the result of any test. Tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.

KCC

Global Cementing LLC

18048 I-70 Road
Russell, KS 67665

Invoice

Date	Invoice #
9/27/2014	1486

Bill To
VAL ENERGY INC 200 WEST DOUGLAS STE 500 WICHITA,KS 67202

RECEIVED

OCT 07 2014

Invoes

P.O. No.	Terms	Project
INLOES#1-14	Net 30	

Quantity	Description	Rate	Amount
159	COMMON	16.75	2,663.25
106	POZ	9.55	1,012.30
9	GEL	23.50	211.50
66.25	FLO-SEAL	2.00	132.50
274	HANDLING	2.10	575.40
	BULK MILEAGE	931.60	931.60
1	TRI-PLEX PUMP CHARGE FOR PLUG	1,200.00	1,200.00
68	PUMP TRUCK MILEAGE	6.50	442.00
68	PICKUP	2.50	170.00
1	DRY HOLE PLUG	62.50	62.50
	DEDUCT 10% FROM TOTAL IF PAID WITHIN 30 DAYS OF INVOICE		
	Sales Tax	7.15%	0.00

Plugging Cement # 1-14

Thank you for your business.

Total \$7,401.05

Phone #	Fax #	E-mail
785-324-2658	785-445-3526	

GLOBAL CEMENTING, L.L.C.

1486

REMIT TO 18048 170RD
RUSSELL, KS 67665

SERVICE POINT: Russell KS

DATE <u>7-27-14</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START	JOB FINISH <u>2:00 PM</u>
LEASE <u>79 Acres</u>	WELL #. <u>1-14</u>		LOCATION			COUNTY <u>Thomas</u>	STATE <u>KS</u>
OLD OR <input checked="" type="radio"/> NEW (CIRCLE ONE)							

CONTRACTOR Val Rig #7
 TYPE OF JOB Plug
 HOLE SIZE 2 1/2 T.D.
 CASING SIZE 1 1/2 DEPTH
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX MINIMUM
 MEAS. LINE SHOE JOINT
 CEMENT LEFT IN CSG.
 PERFS
 DISPLACEMENT

OWNER
 CEMENT
 AMOUNT ORDERED 265 sks (60% HC 102% 90% gel 1/4 Flt. per sk)

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

EQUIPMENT

PUMP TRUCK # B1 CEMENTER Cody
 HELPER Brad
 BULK TRUCK # B1 DRIVER Budd
 BULK TRUCK # DRIVER

REMARKS:
2860 ft 50 sks
1900 100 sks
270 50 sks
90ft + 10 sks R+ 30 M315

CHARGE TO: VAL Energy
 STREET _____
 CITY _____ STATE _____ ZIP _____

Global Cementing, L.L.C.,
 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 Walter Parrell
 SIGNATURE Walter Parrell

TOTAL _____

SERVICE

DEPTH OF JOB _____
 PUMP TRUCK CHARGE _____
 EXTRA FOOTAGE _____ @ _____
 MILEAGE 342 @ _____
 MANIFOLD _____ @ _____
 _____ @ _____
 _____ @ _____

TOTAL _____

PLUG & FLOAT EQUIPMENT

_____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____

TOTAL _____

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

Global Cementing LLC

18048 I-70 Road
Russell, KS 67665

Invoice

Date	Invoice #
9/17/2014	1448

Bill To
VAL ENERGY INC 200 WEST DOUGLAS STE 500 WICHITA,KS 67202

RECEIVED
SEP 24 2014

P.O. No.	Terms	Project
9208 INLOES TRUST#1...	Net 30	

Quantity	Description	Rate	Amount
175	COMMON	16.75	2,931.25
6	CALCIUM	59.00	354.00
4	GEL	23.50	94.00
185	HANDLING	2.10	388.50
	BULK MILEAGE	629.00	629.00
1	TRI-PLEX PUMP CHARGE FOR SURFACE	1,250.00	1,250.00
68	PUMP TRUCK MILEAGE	6.50	442.00
68	PICKUP	2.50	170.00
	DEDUCT 15% FROM TOTAL IF PAID WITHIN 30 DAYS OF INVOICE		
	Sales Tax	7.15%	0.00

Thank you for your business.

Phone #	Fax #	E-mail
785-324-2658	785-445-3526	

Total

\$6,258.75

GLOBAL CEMENTING, L.L.C.

1448

REMIT TO 18048 170RD
RUSSELL, KS 67665

SERVICE POINT: Russell KS

DATE <u>9-17-14</u>	SEC. <u>14</u>	TWP. <u>8</u>	RANGE <u>36</u>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH <u>3:15 PM</u>
LEASE <u>Inter-Tech</u>		WELL # <u>14</u>	LOCATION			COUNTY <u>Thomas Co</u>	STATE <u>KS</u>
OLD OR <u>NEW</u> (CIRCLE ONE)							

CONTRACTOR Val Drilling, Rig #7

TYPE OF JOB Surface

HOLE SIZE 5 7/8 T.D. 216

CASING SIZE 4 1/2 DEPTH

TUBING SIZE 4 1/2 DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG.

PERFS

DISPLACEMENT

OWNER

CEMENT AMOUNT ORDERED 175 sacks con 3 1/2 cc 2 1/2 gal

COMMON @

POZMIX @

GEL @

CHLORIDE @

ASC @

HANDLING @

MILEAGE @

TOTAL

EQUIPMENT

PUMP TRUCK CEMENTER Cody

P1 HELPER Bruce

BULK TRUCK DRIVER Mark

B1 DRIVER

REMARKS:

Ran 5 joints 8 1/2 casing 1 landing joint FSC

circulation hooked up pumped 175 sacks circulated

Cement Displaced 12.5 bbls H2O. saw in 20 gals

CHARGE TO: Val Energy

STREET

CITY STATE ZIP

Global Cementing, L.L.C.,
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 Walter Russell

SIGNATURE Walter Russell

SERVICE

DEPTH OF JOB

PUMP TRUCK CHARGE

EXTRA FOOTAGE @

MILEAGE 34.2 @

MANIFOLD @

TOTAL

PLUG & FLOAT EQUIPMENT

@

@

@

@

@

TOTAL

SALES TAX (If Any)

TOTAL CHARGES

DISCOUNT IF PAID IN 30 DAYS