

LOG-TECH OF KANSAS, INC.

P.O. BOX 885
 GREAT BEND, KANSAS 67530
 (620) 792-2167

INVOICE

8114

Date 8-13-14

CHARGE TO: Cherokee Operating, Inc.
 ADDRESS _____
 R/A SOURCE NO. _____ CUSTOMER ORDER NO. _____
 LEASE AND WELL NO. Merrill Trust #1-24 FIELD _____
 NEAREST TOWN _____ COUNTY Comanche STATE KS
 SPOT LOCATION W15E-NE SEC. 24 TWP. 24S RANGE 10W
 ZERO 1146 CASING SIZE 5 7/8 WEIGHT _____
 CUSTOMER'S T.D. _____ LOG TECH _____ FLUID LEVEL _____
 ENGINEER Lee S. Cole OPERATOR Heath Buchler

PERFORATING					
Description	No. Shots	Depth		Amount	
		From	To		

DEPTH AND OPERATIONS CHARGES						
Description	From	Depth		Total No. Ft.	Price Per Ft.	Amount
		To				
<u>50' 2" WF 1184 DB-5 at 4711</u>	<u>0</u>	<u>4711</u>	<u>4711</u>	<u>2.22</u>	<u>106.42</u>	
<u>Drop 2 sacks cement supply</u>						<u>180.00</u>

MISCELLANEOUS			
Description	Quantity	Amount	
<u>Service Charge</u>	<u>1</u>	<u>550.00</u>	
<u>1184 DB-5</u>	<u>1</u>	<u>100.00</u>	

PRICES SUBJECT TO CORRECTION BY BILLING DEPARTMENT

RECEIVED THE ABOVE SERVICES ACCORDING TO THE TERMS AND CONDITIONS SPECIFIED ON THE REVERSE SIDE TO WHICH WE HEREBY AGREE.

Customer Signature _____ Date _____

Sub Total	<u>2466.42</u>
Code Ref.	
Tool Insurance	
Tax	

Date 8-26-14 District MARTIN Ticket No. 63155
 Company WILLIAMS Rig CREATON
 Lease MERRILL TRUST Well No. 1-24
 County BARBER State KS
 Location 162 HWY RD 5 Field 1
70 WALKER RD 1 1/2 mi N J070

CASING DATA: Conductor PTA Squeeze Misc
 Surface Intermediate Production Liner
 Size 2 3/8 Type _____ Weight 6.4 Collar _____

Casing Depths: Top _____ Bottom _____

Drill Pipe: Size _____ Weight _____ Collars _____
 Open Hole: Size _____ T.D. _____ ft. P.B. to _____ ft.

CAPACITY FACTORS:
 Casing: Bbbls/Lin. ft. 100.887 Lin. ft./Bbl. _____
 Open Holes: Bbbls/Lin. ft. _____ Lin. ft./Bbl. _____
 Drill Pipe: Bbbls/Lin. ft. _____ Lin. ft./Bbl. _____
 Annulus: Bbbls/Lin. ft. _____ Lin. ft./Bbl. _____
 Perforations: From _____ ft. to _____ ft. Amt. _____

CEMENT DATA:
 Spacer Type: _____
 Amt. _____ Sks Yield _____ ft³/sk Density _____ PPG

LEAD: Pump Time _____ hrs. Type _____
 Excess _____
 Amt. _____ Sks Yield _____ ft³/sk Density _____ PPG

TAIL: Pump Time _____ hrs. Type _____
 Excess _____
 Amt. _____ Sks Yield _____ ft³/sk Density _____ PPG

WATER: Lead _____ gals/sk Tail _____ gals/sk Total _____ Bbbls.

Pump Trucks Used 892-553
 Bulk Equip. 361

Float Equip: Manufacturer _____
 Shoe: Type _____ Depth _____
 Float: Type _____ Depth _____
 Centralizers: Quantity _____ Plugs Top _____ Btm. _____
 Stage Collars _____
 Special Equip. _____
 Disp. Fluid Type _____ Amt. _____ Bbbls. Weight _____ PPG
 Mud Type _____ Weight _____ PPG

COMPANY REPRESENTATIVE _____ CEMENTER SCOTT PRIDDY

TIME AM/PM	PRESSURES PSI		FLUID PUMPED DATA			REMARKS
	DRILL PIPE CASING	ANNULUS	TOTAL FLUID	Pumped Per Time Period	RATE Bbbls Min.	
12:00 PM						ON LOCATION (SPT) MORTAR SPOT IN RAMP PREP TOP SPT MORTAR
12:30 PM	1000					PRESSURE TEST PUMP GEL
12:40			12 1/2		4	SET 1 ST PLUG 50% TDC 952 FT
12:45			1 1/2		3 1/2	DISPLACE PLUG
1:00 PM			12 1/2		4	SET 2 ND PLUG 50% TDC 157 FT
1:10 PM			.5		2	DISPLACE PLUG
1:15 PM			12 1/2		3	SET SURFACE PLUG 50% SA
			3 1/2			TOP OFF
1:30 PM						LINK UP

FINAL DISP. PRESS: _____ PSI BUMP PLUG TO _____ PSI BLEEDBACK _____ BBLs. THANK YOU

ALLIED OIL & GAS SERVICES, LLC 063155

Federal Tax I.D. # 20-8651475

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

SERVICE POINT:
MEDICINE LODGE 10

DATE 8-15-14	SEC. 24	TWP. 34 S	RANGE 16 W	CALLED OUT 9:30 AM	ON LOCATION 12:00 PM	JOB START 12:30 PM	JOB FINISH 1:30 PM
LEASE MERRELL TRUST	WELL # 1-24	LOCATION 100 + 107th RD S TO HICKBERRY			COUNTY	STATE	
OLD OR NEW (Circle one)			RD 1/4 W THEN N INTO				

CONTRACTOR ALLIANCE WELL SERVICE
 TYPE OF JOB P T A
 HOLE SIZE 8 5/8 T.D.
 CASING SIZE DEPTH
 TUBING SIZE 2 7/8 DEPTH 160'
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX MINIMUM
 MEAS. LINE SHOE JOINT
 CEMENT LEFT IN CSG.
 PERFS.
 DISPLACEMENT FRESH H₂O

EQUIPMENT
 PUMP TRUCK CEMENTER SCOTT PRIDDY
 # 892-555 HELPERTHOMAS GIBSON
 BULK TRUCK
 # 364 DRIVER JOHN BURGESS
 BULK TRUCK
 # DRIVER

REMARKS:
 ON LOCATION FIG UP PRESSURE TEST
 SPOT GELS SET + DISPLACED 1ST PLUG
 660' SET + DISPLACED 2ND PLUG 360'
 SET SURFACE PLUG WASH UP. END JOB.
 1ST PLUG 50 ST
 2ND PLUG 30 ST
 SURFACE PLUG 50 ST

CHARGE TO: CHESAPEAKE ENERGY
 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]

OWNER CHESAPEAKE ENERGY
 CEMENT
 AMOUNT ORDERED 160SK 60.40 + 470 GEL
 10SK GEL
 COMMON @ _____
 POZMIX @ _____
 GEL @ _____
 CHLORIDE @ _____
 ASC @ _____
 @ _____
 @ _____
 @ _____
 @ _____
 @ _____
 @ _____
 @ _____
 @ _____
 HANDLING @ _____
 MILEAGE @ _____
 TOTAL _____

SERVICE
 DEPTH OF JOB 660
 PUMP TRUCK CHARGE _____
 EXTRA FOOTAGE @ _____
 MILEAGE @ _____
 MANIFOLD @ _____
 @ _____
 @ _____
 TOTAL _____

PLUG & FLOAT EQUIPMENT
 @ _____
 @ _____
 @ _____
 @ _____
 @ _____
 TOTAL _____

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