



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1236438  
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: \_\_\_\_\_



1236438

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](mailto: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

<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> _____ <i>(Submit ACO-4)</i>	<b>PRODUCTION INTERVAL:</b> _____ _____
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**COMPLETION  
& PRODUCTION  
SERVICES CO.**

**DUAL  
INDUCTION  
LOG**

Company PIONEER RESOURCES  
Well YOST #3  
Field COOPER  
County GRAHAM State KANSAS

Company PIONEER RESOURCES  
Well YOST #3  
Field COOPER  
County GRAHAM  
State KANSAS

Location: API #: 15-065-24060-00-00  
1624' FSL & 2000' FWL  
SW - SE - NE - SW  
SEC 32 TWP 9S RGE 21W  
Permanent Datum GROUND LEVEL Elevation 2288  
Log Measured From KELLY BUSHING 7' A.G.L.  
Drilling Measured From KELLY BUSHING  
Other Services  
CNL/CDL  
MEL  
Elevation  
K.B. 2295  
D.F. 2293  
G.L. 2288

Date	9/28/14		
Run Number	ONE		
Depth Driller	3930		
Depth Logger	3929		
Bottom Logged Interval	3927		
Top Log Interval	00		
Casing Driller	8 5/8" @ 220		
Casing Logger	222		
Bit Size	7 7/8		
Type Fluid in Hole	CHEMICAL MUD	CHLORIDES 2,300 PPM	
Density / Viscosity	9.3/50		
pH / Fluid Loss	10.5/7.8		
Source of Sample	FLOWLINE		
Rim @ Meas. Temp	.80 @ 85F		
Rmf @ Meas. Temp	.60 @ 85F		
Rmc @ Meas. Temp	.96 @ 85F		
Source of Rmf / Rmc	MEASURED		
Rim @ BHT	.54 @ 125F		
Time Circulation Stopped	2 HOURS		
Time Logger on Bottom			
Maximum Recorded Temperature	125F		
Equipment Number	3802		
Location	HAYS, KS.		
Recorded By	IAN MABB		
Witnessed By	CLIFF OTTAWAY		

<<< Fold Here >>>

All interpretations are opinions based on inferences from electrical or other measurements and we cannot and do not guarantee the accuracy or correctness of any interpretation, and we shall not, except in the case of gross or willful negligence on our part, be liable or responsible for any loss, costs, damages, or expenses incurred or sustained by anyone resulting from any interpretation made by any of our officers, agents or employees. These interpretations are also subject to our general terms and conditions set out in our current Price Schedule.

Comments

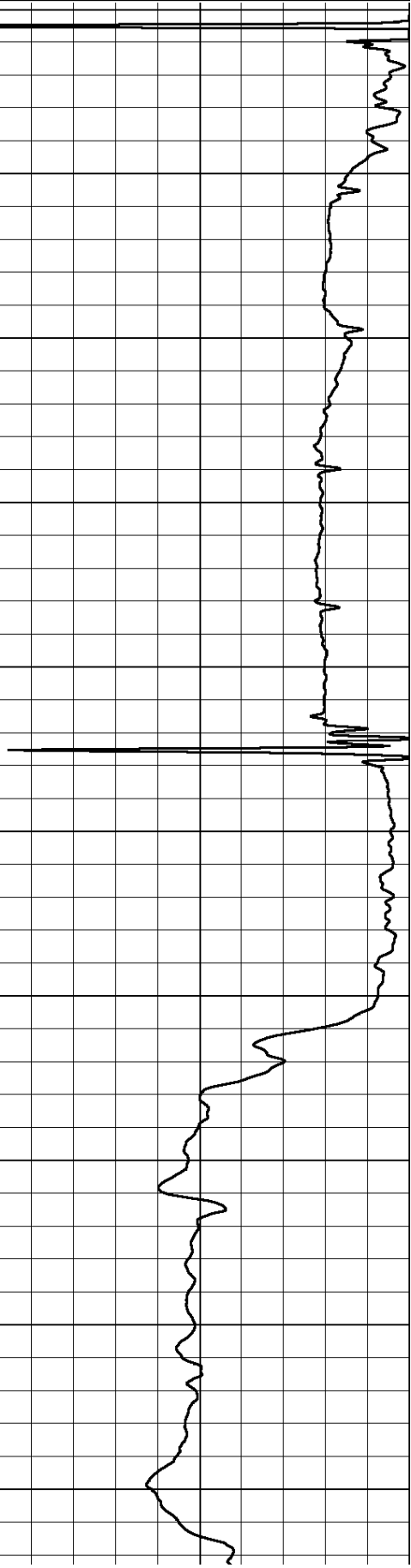
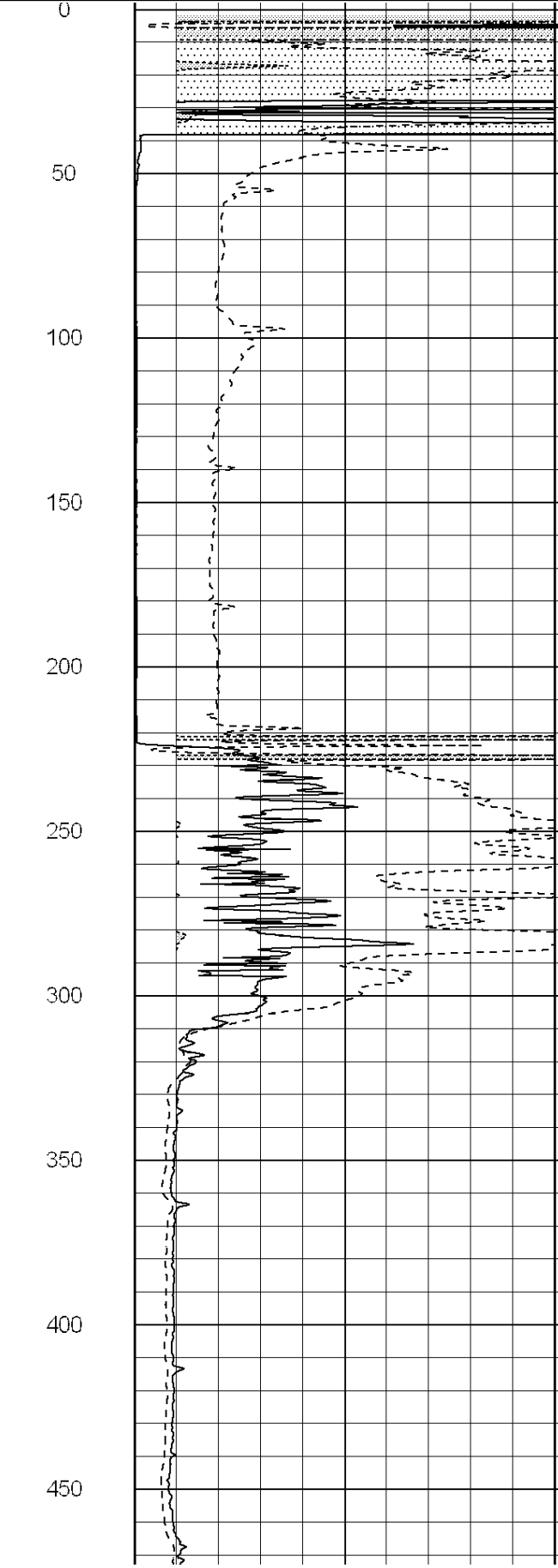
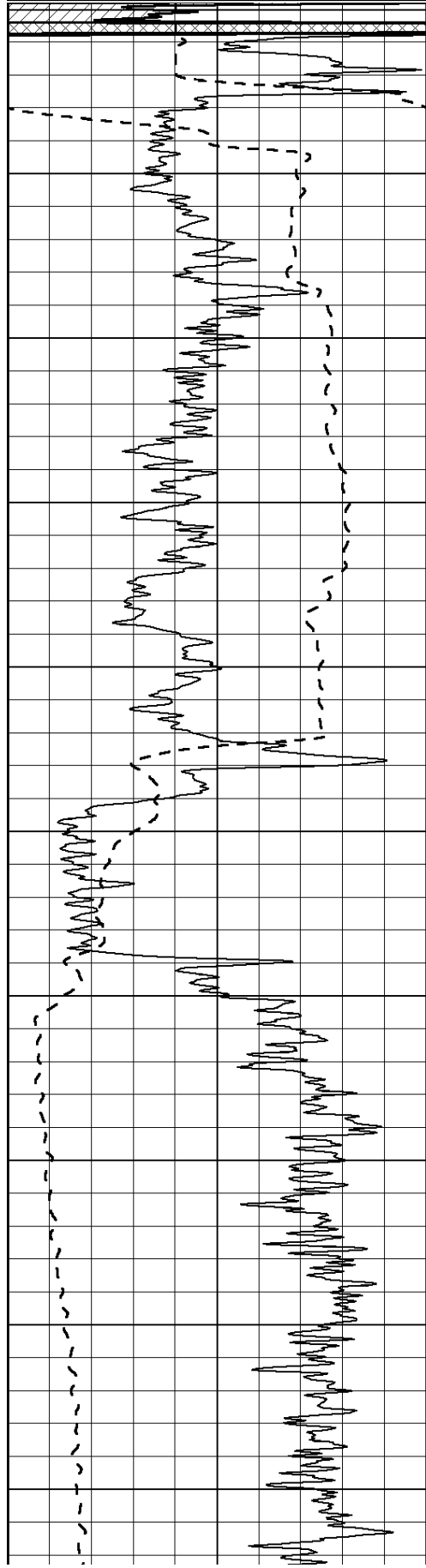
THANK YOU FOR USING NABORS COMPLETION & PRODUCTION SVCS. (785) 628-6395

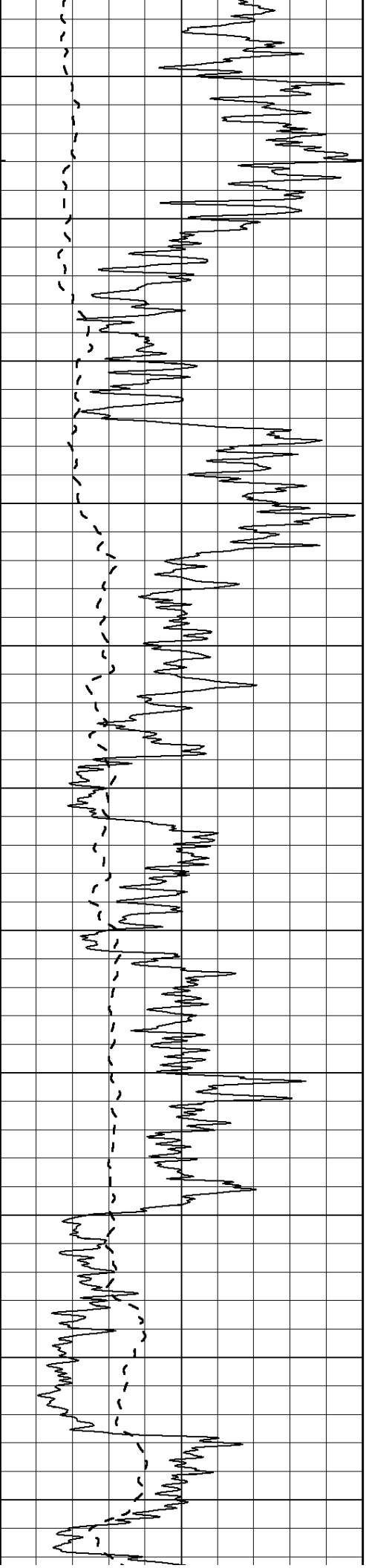
DIRECTIONS: I-70 & RIGA RD - NORTH TO GRAHAM CO. LINE - JOG EAST 1/2 MILE - NORTH 6 MILES TO RD G - WEST 2 1/2 MILES NORTH INTO

0	Gamma Ray (GAPI)	150
-100	SP (mV)	100

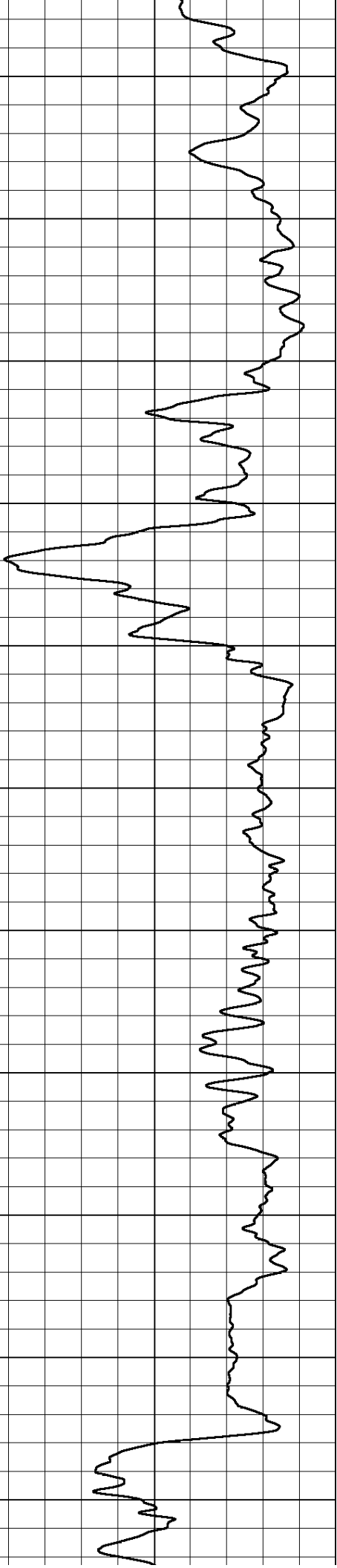
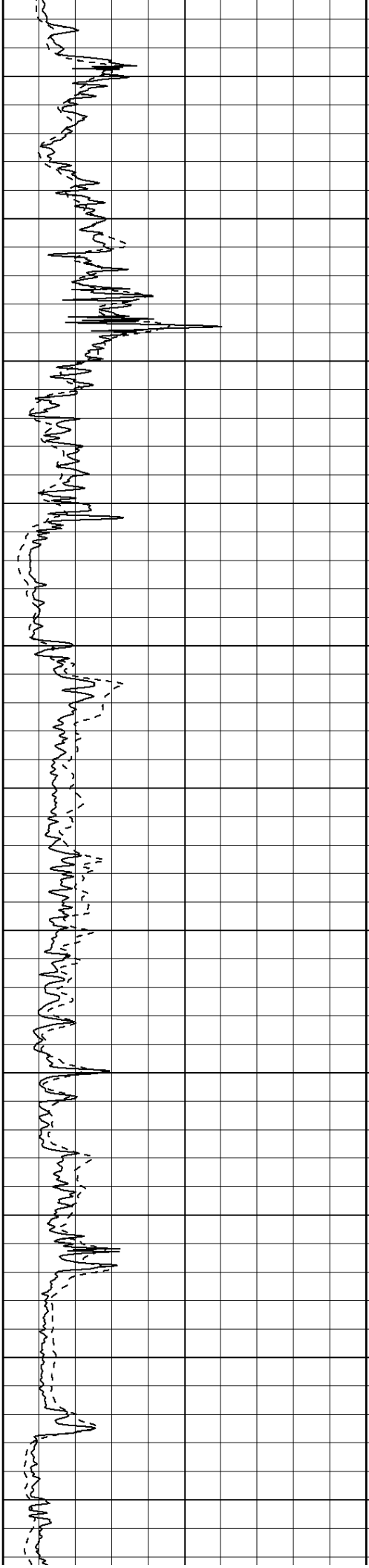
0	RLL3 (Ohm-m)	50
0	Deep Induction (Ohm-m)	50

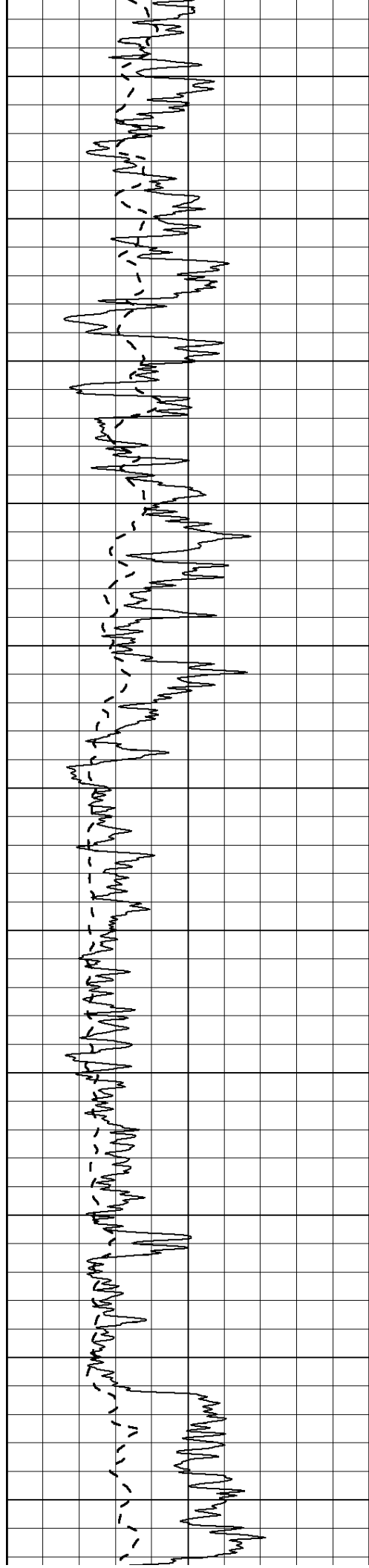
1000	CILD (mmho/m)	0
50	RILD X10 (Ohm-m)	500
50	RLL3 X10 (Ohm-m)	500



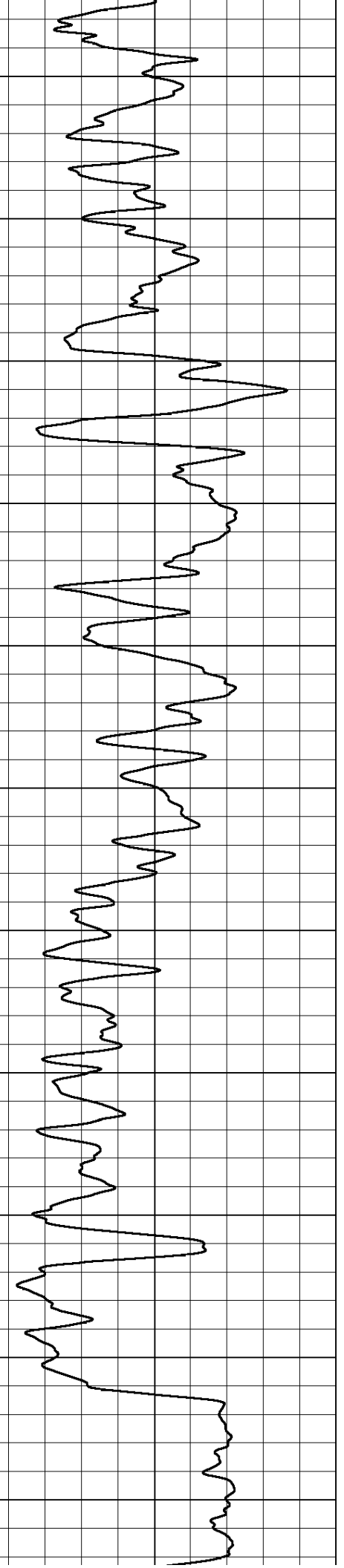
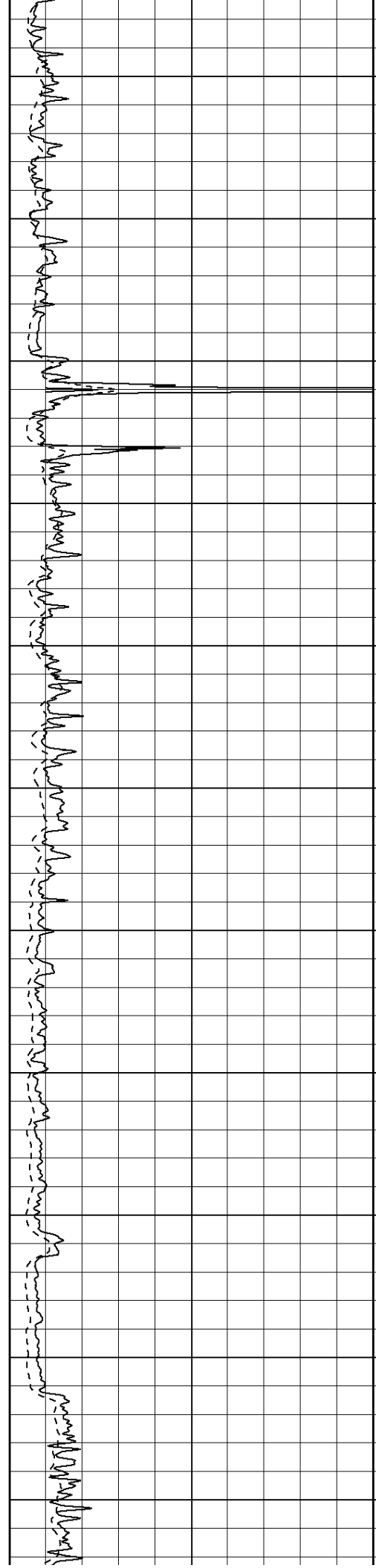


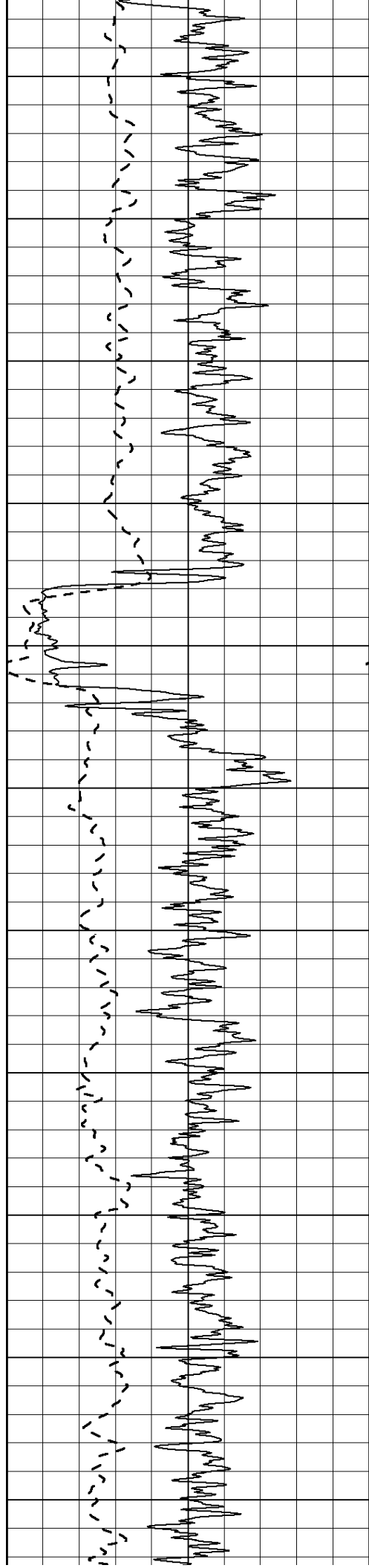
500  
550  
600  
650  
700  
750  
800  
850  
900  
950  
1000





1050  
1100  
1150  
1200  
1250  
1300  
1350  
1400  
1450  
1500  
1550





1600

1650

1700

1750

1800

1850

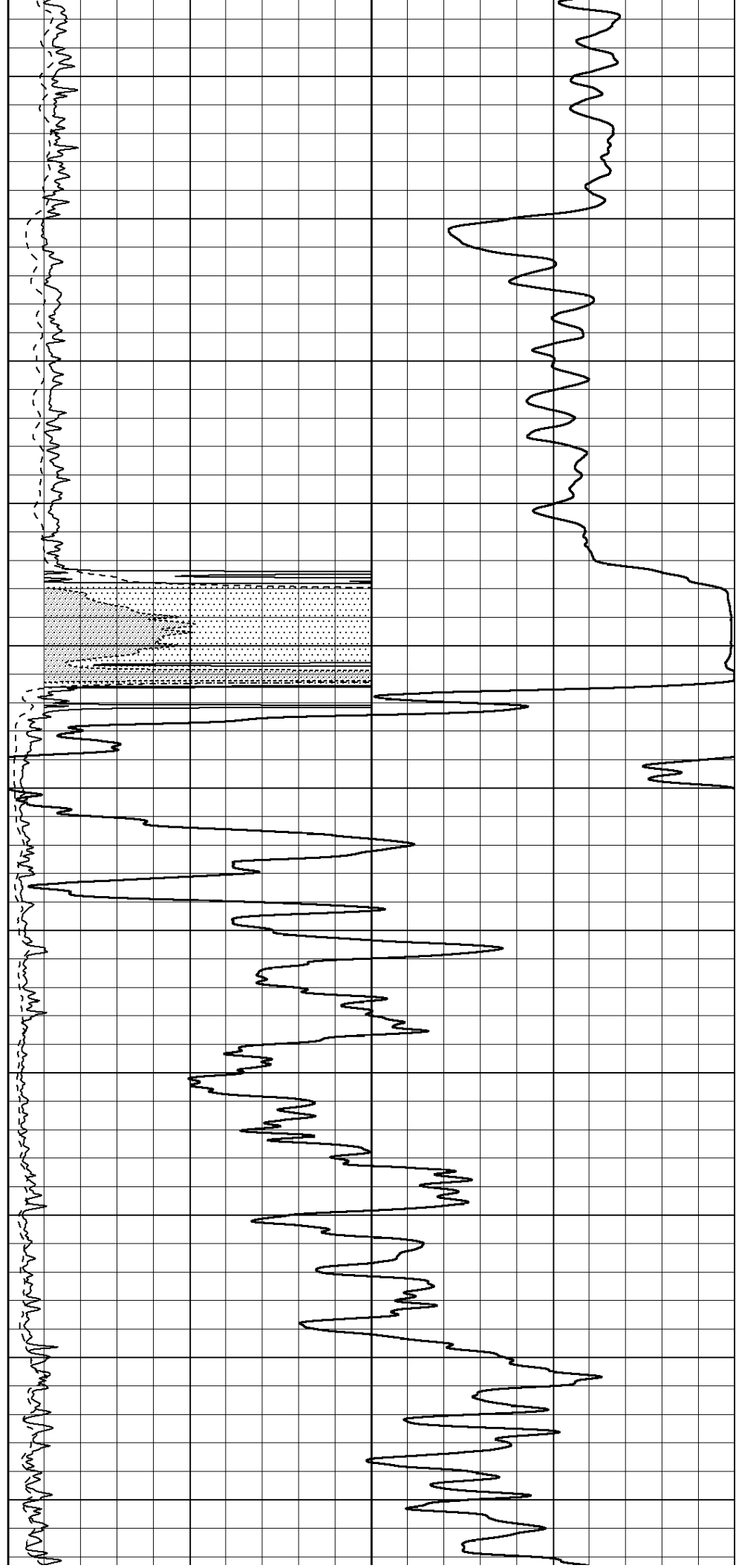
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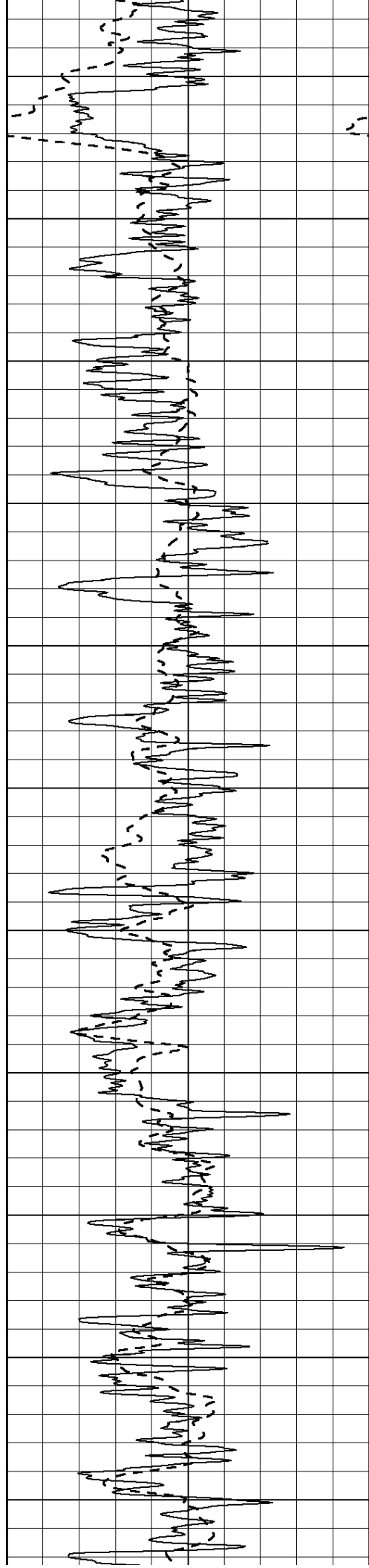
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2000

2050

2100





2150

2200

2250

2300

2350

2400

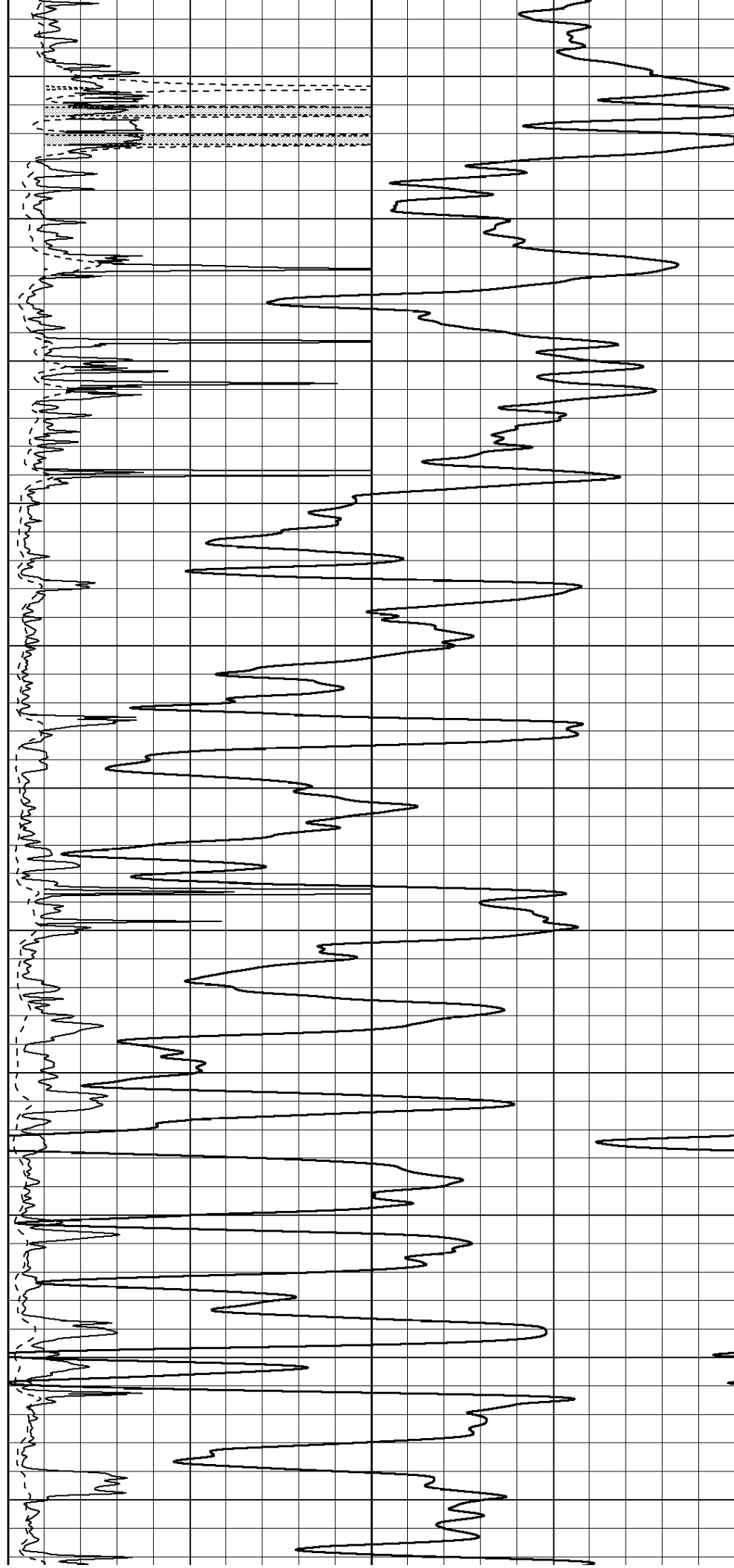
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2500

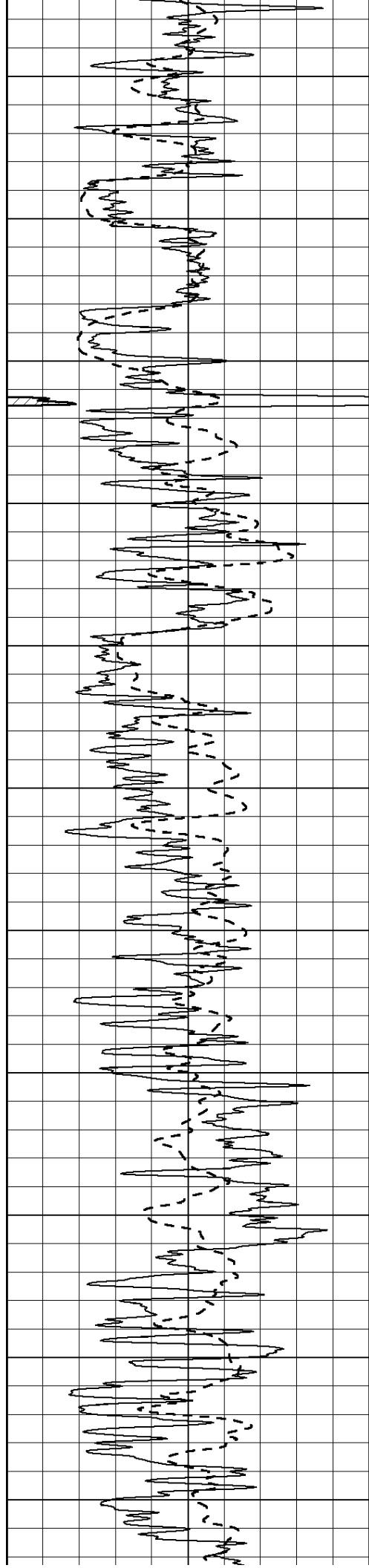
2550

2600

2650







2700

2750

2800

2850

2900

2950

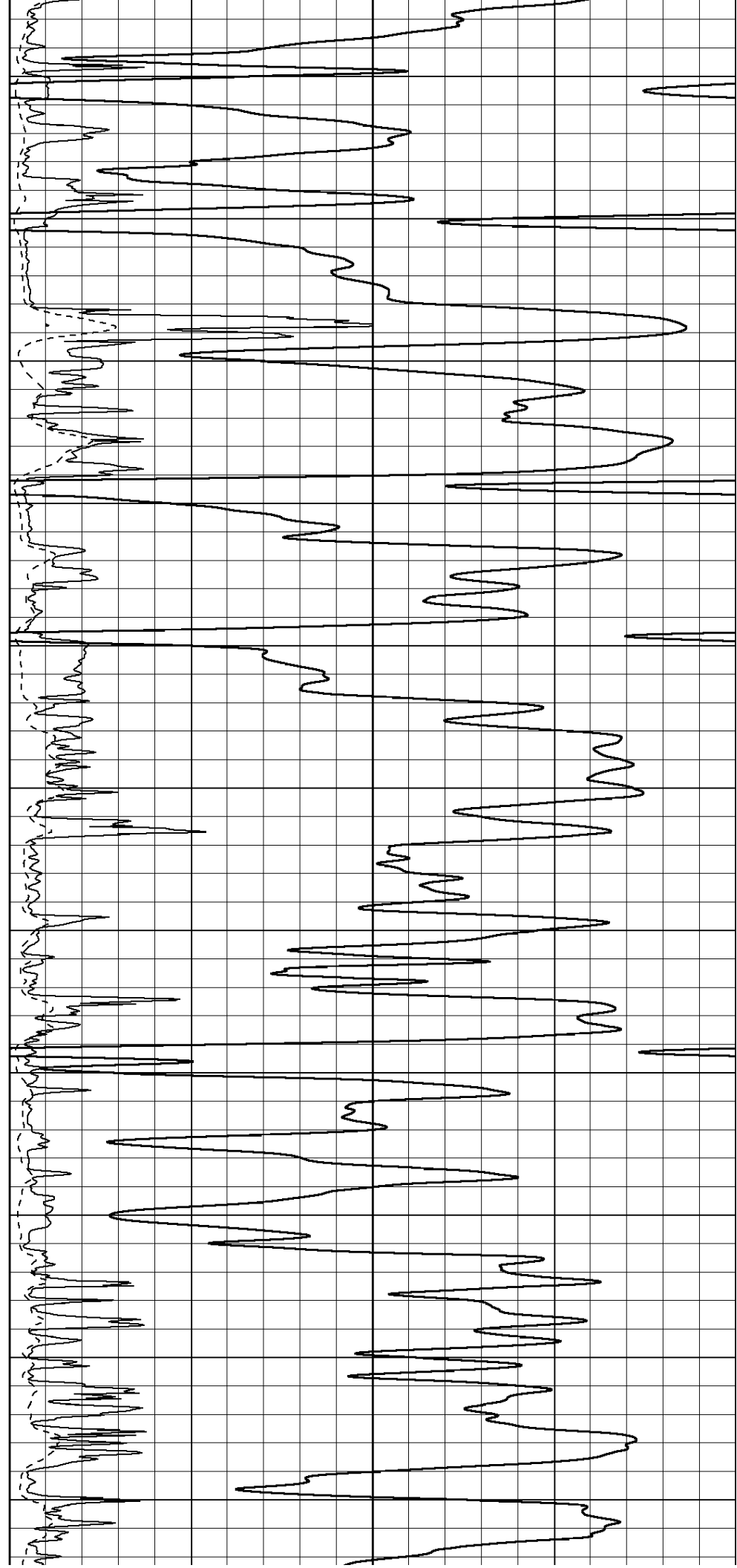
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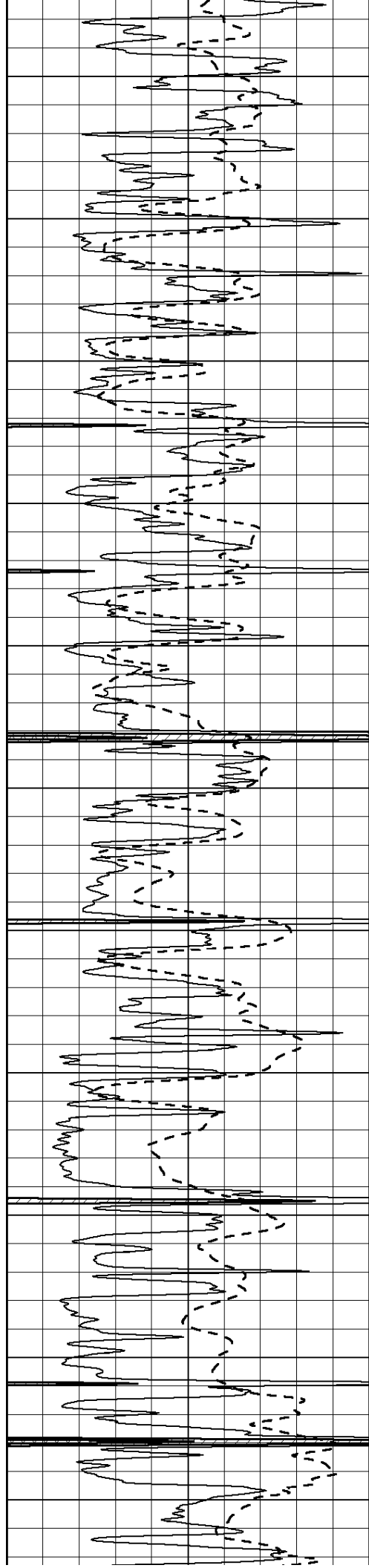
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3100

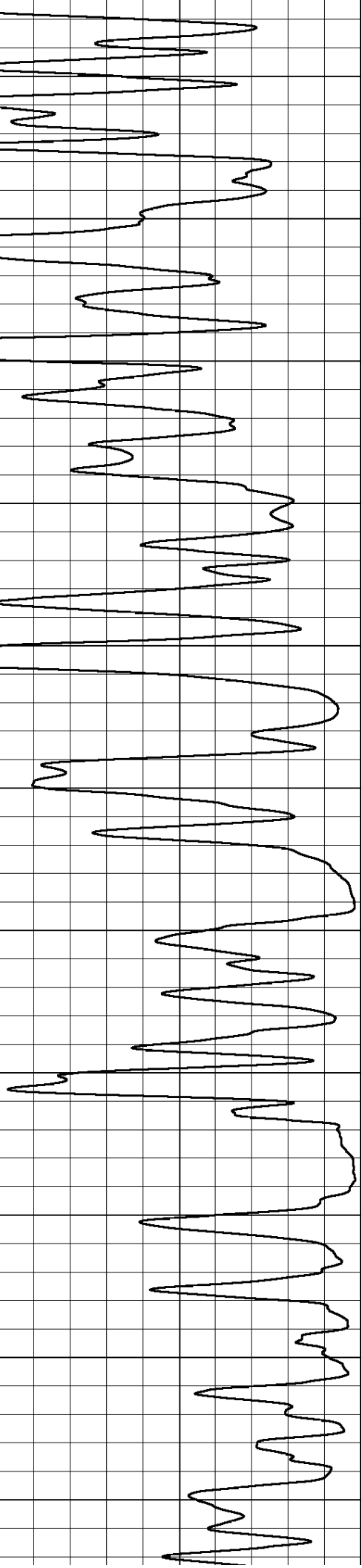
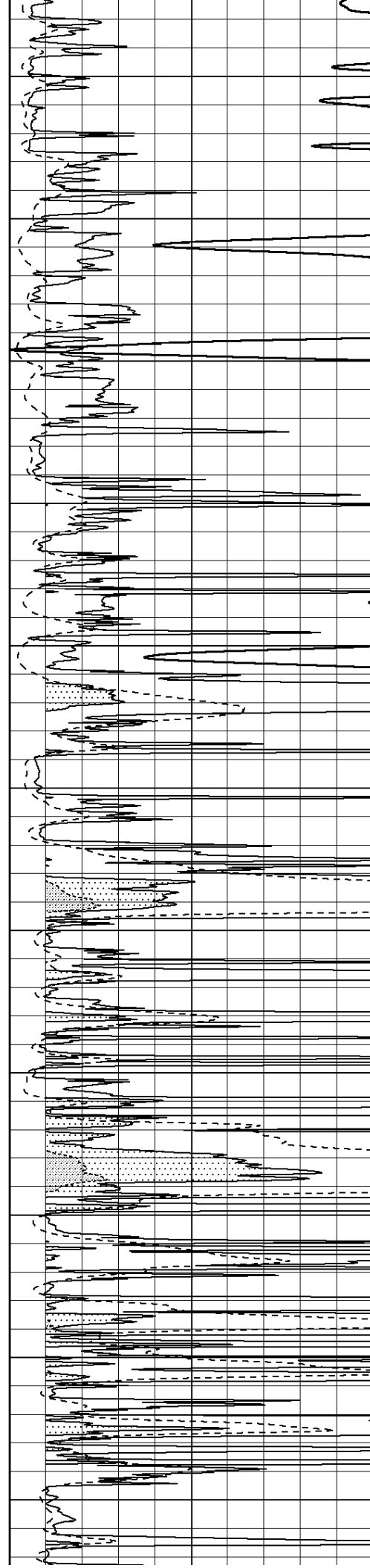
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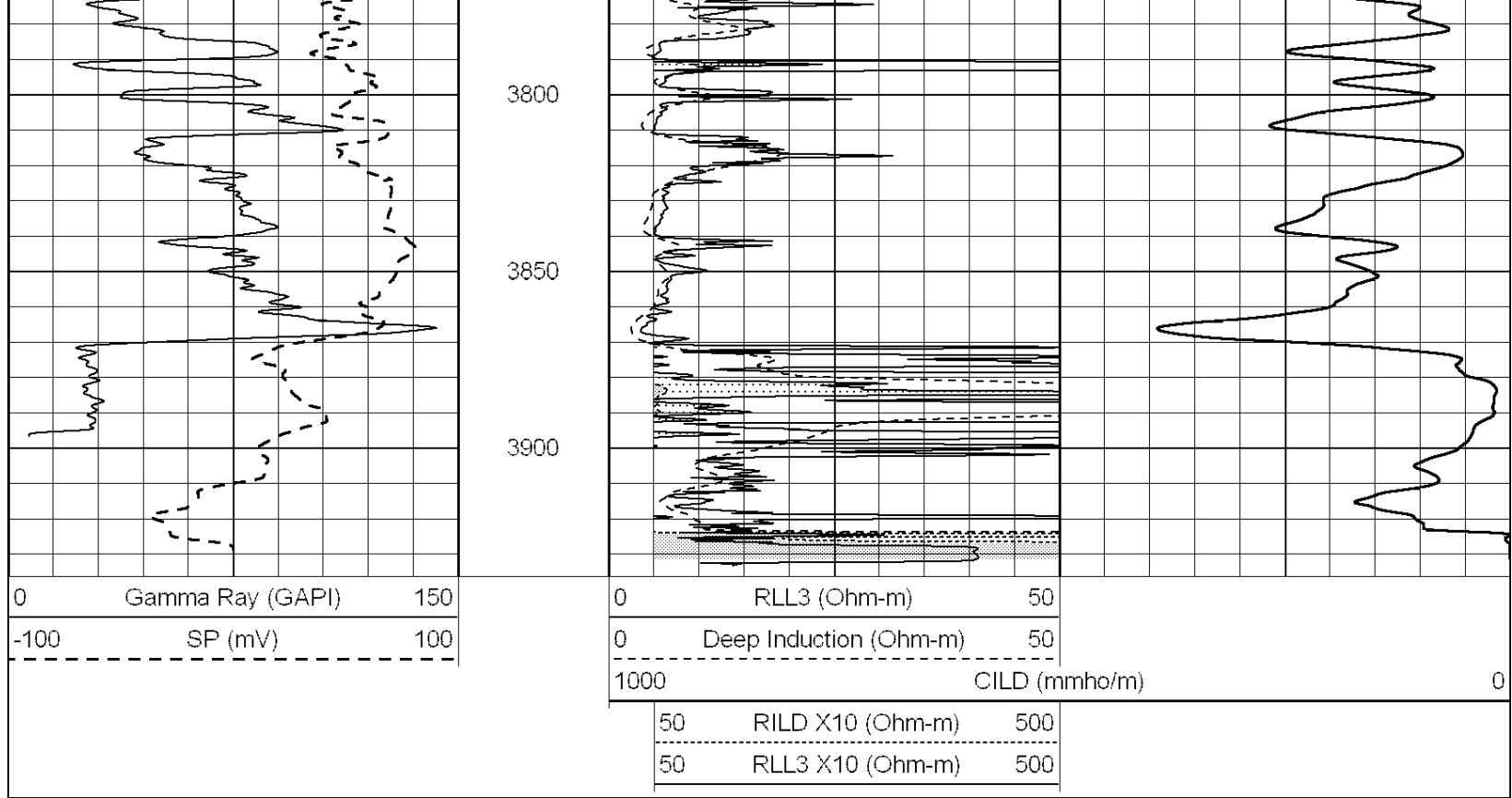
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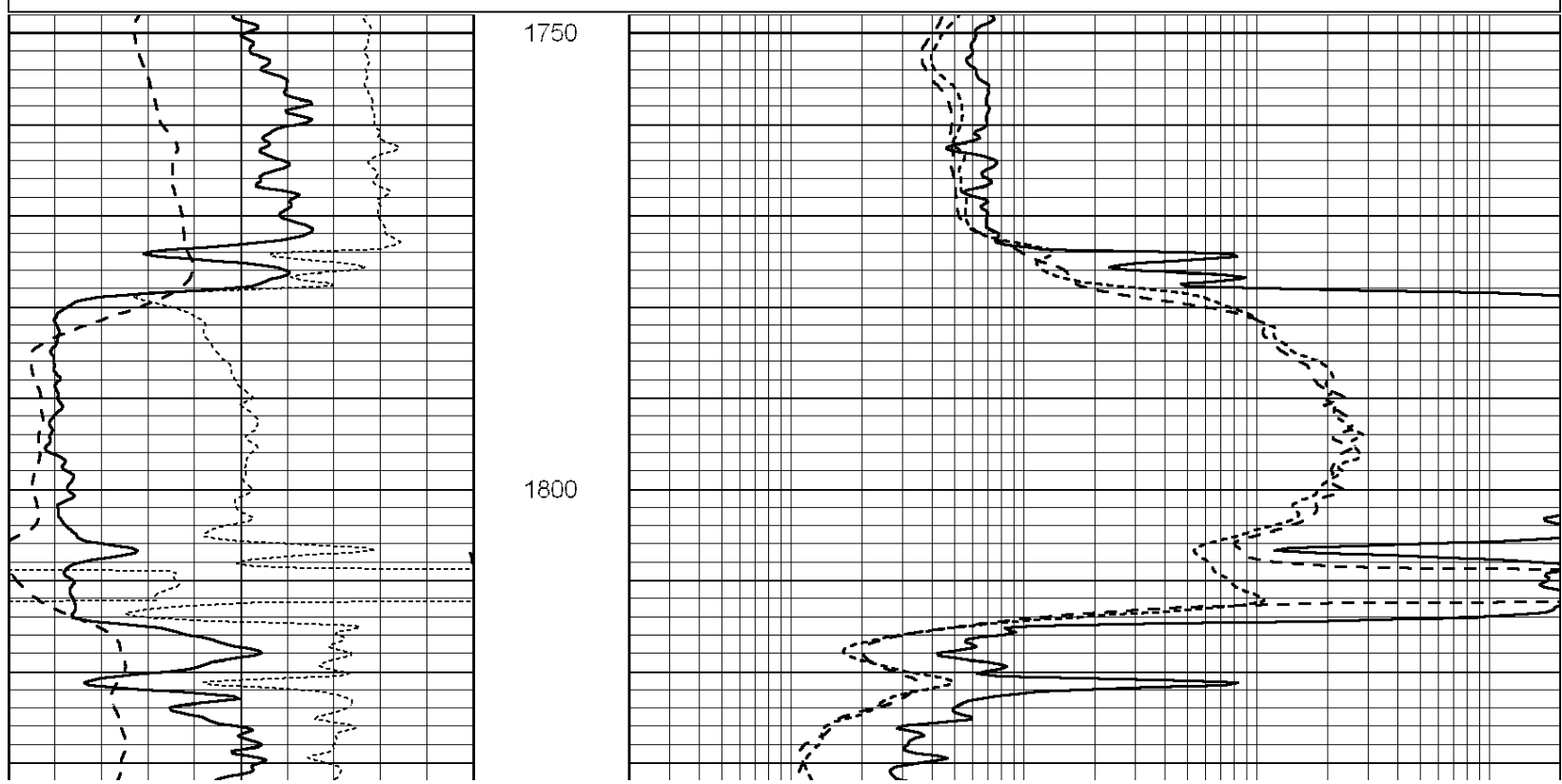


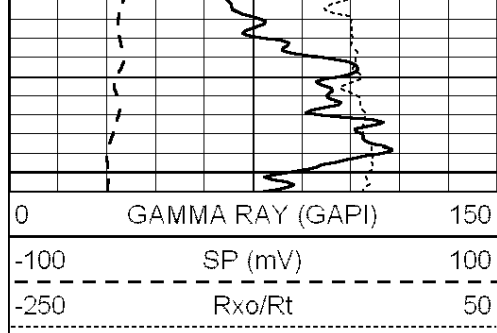
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3300  
3350  
3400  
3450  
3500  
3550  
3600  
3650  
3700  
3750



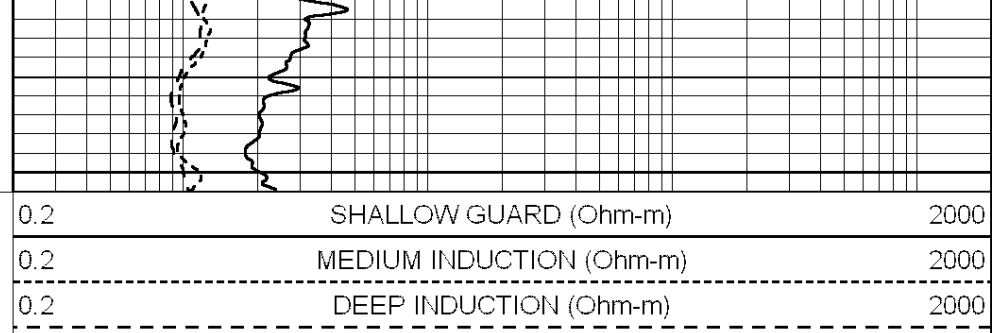


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 Charted by: Depth in Feet scaled 1:240

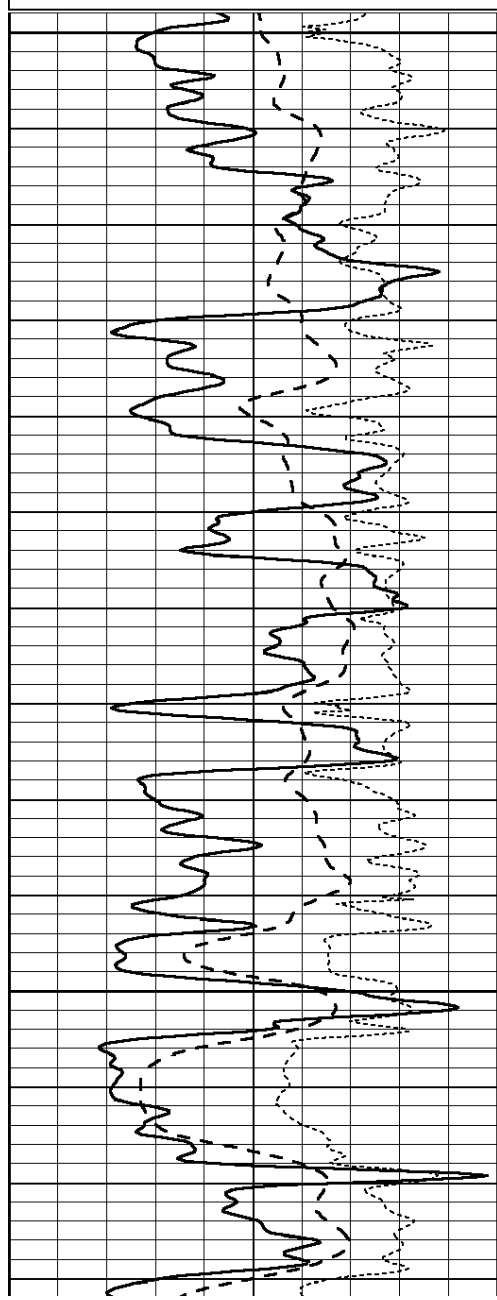
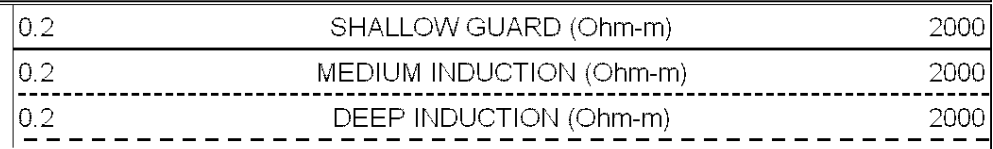
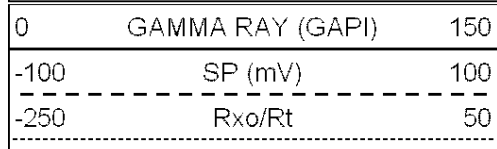




1850



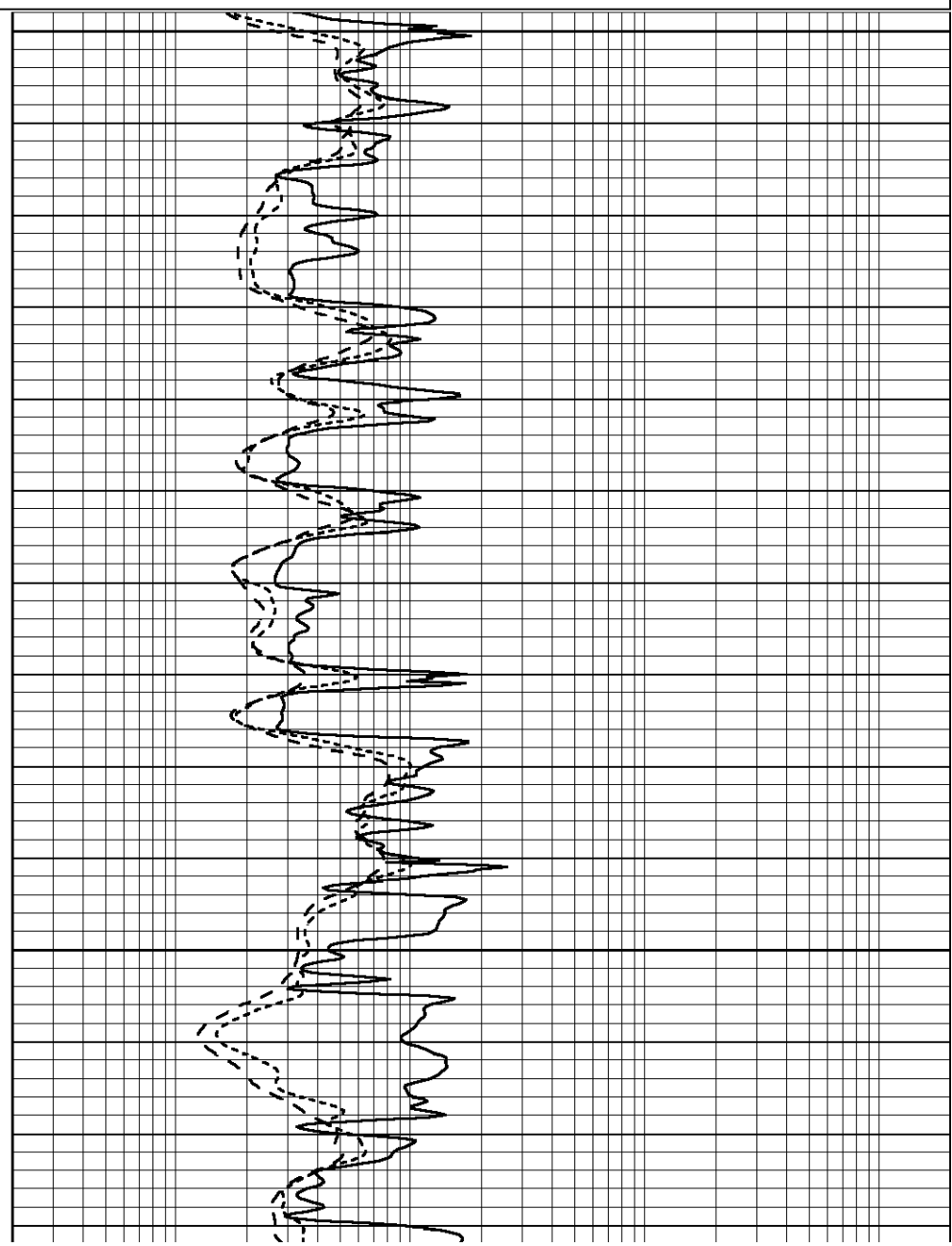
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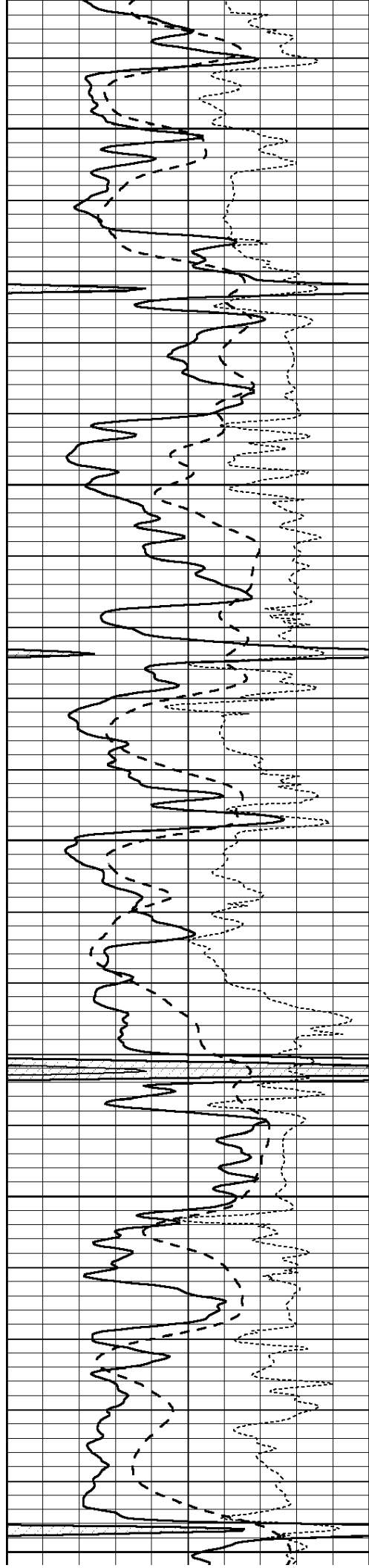


3200

3250

3300





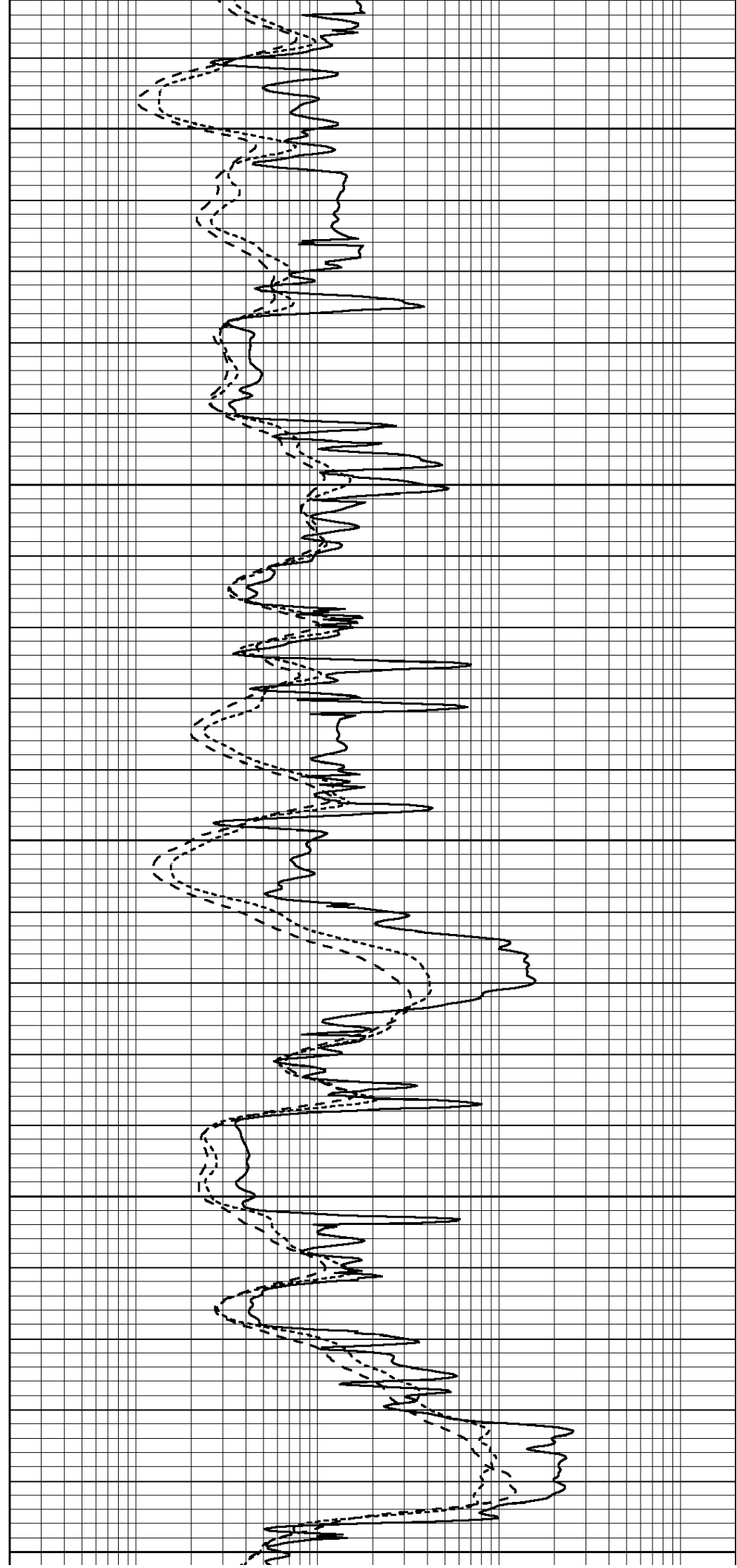
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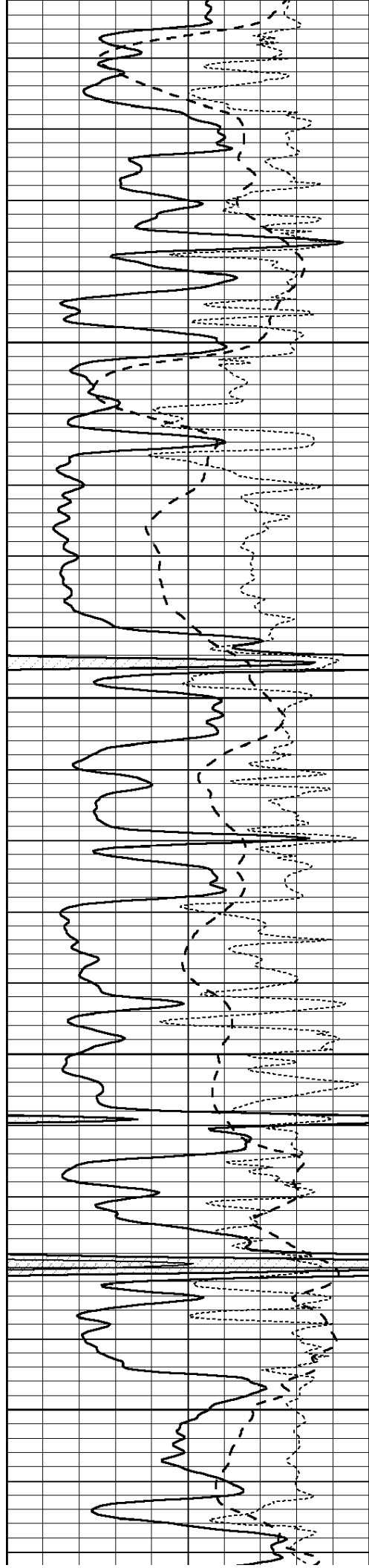
3400

3450

3500

3550



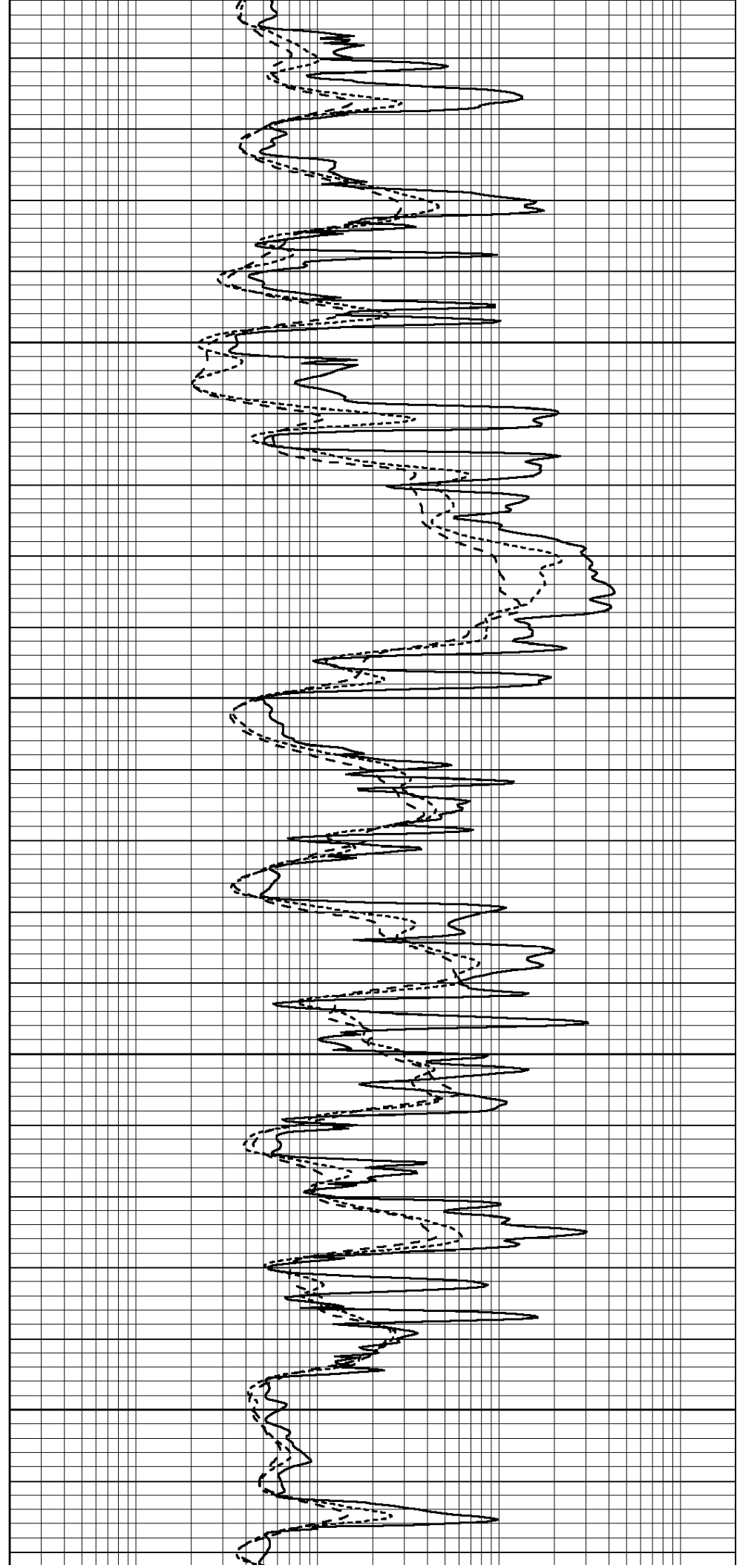


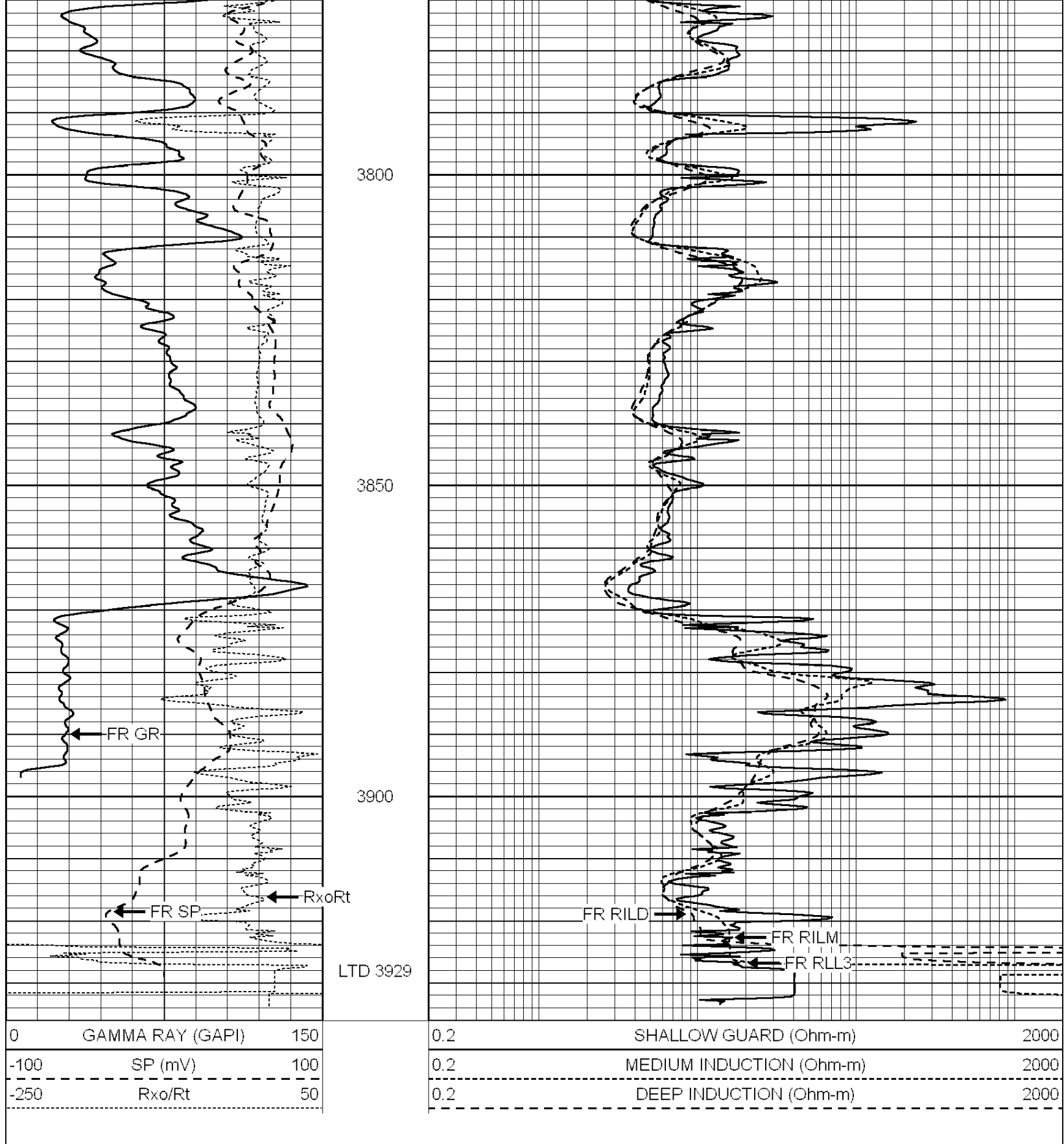
3600

3650

3700

3750



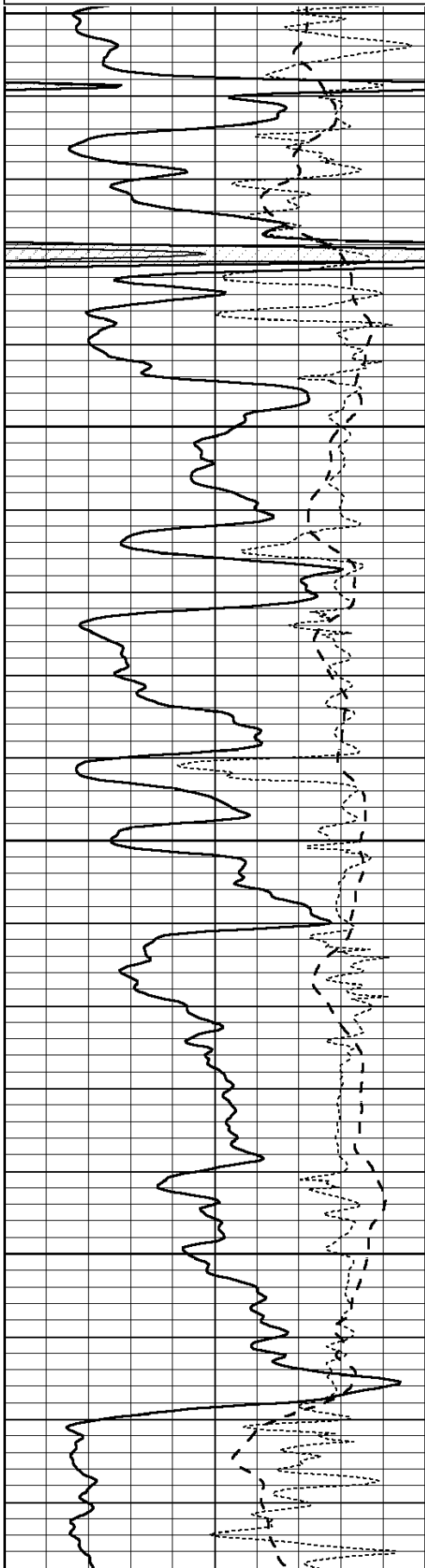


# REPEAT SECTION

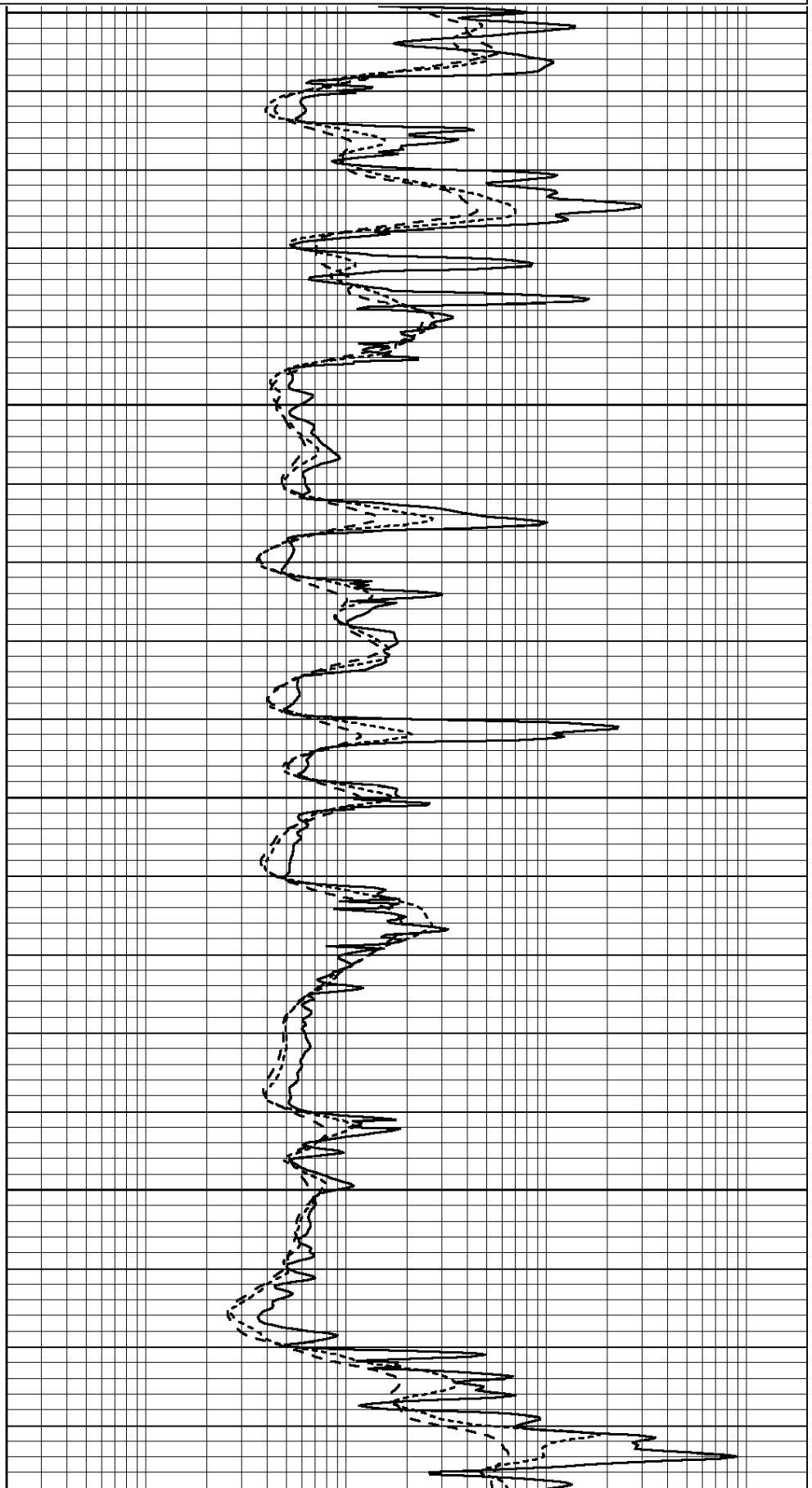
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 Dataset Pathname: pass2.1  
 Presentation Format: #1

0	GAMMA RAY (GAPI)	150
-100	SP (mV)	100
-250	Rxo/Rt	50

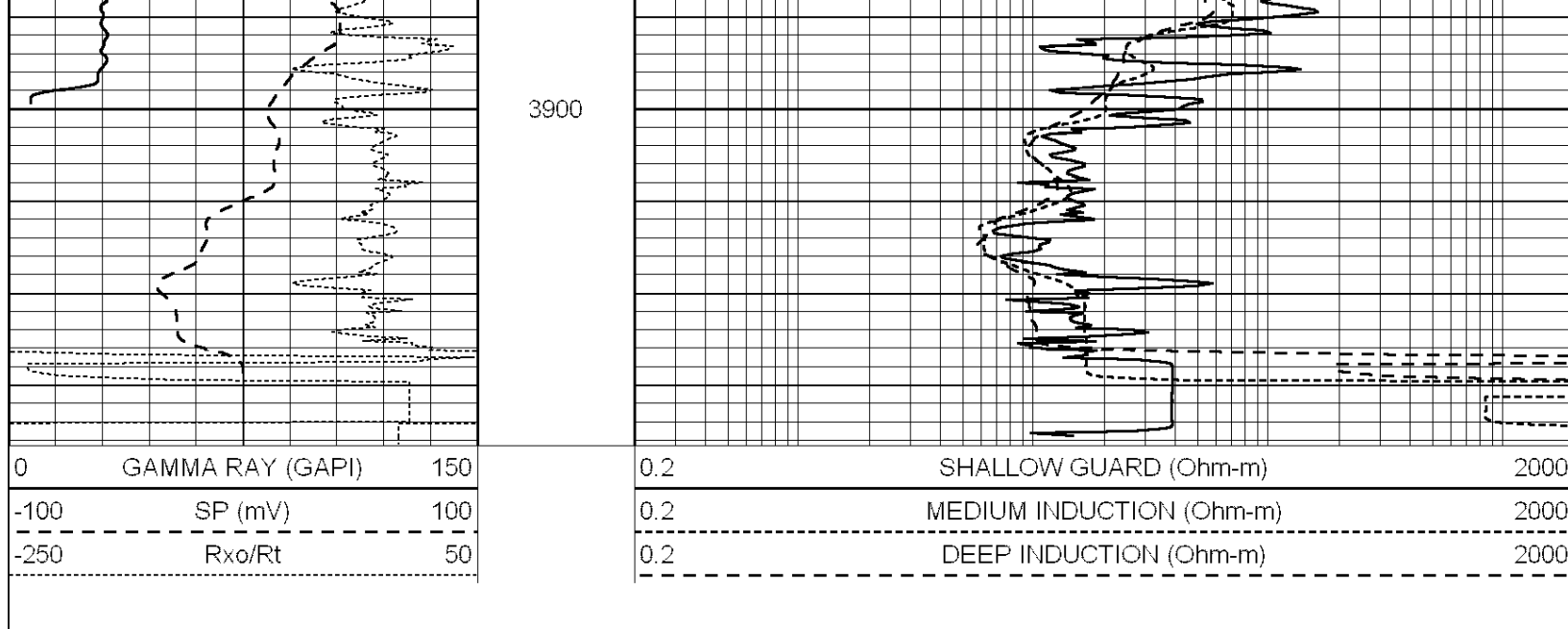
0.2	SHALLOW GUARD (Ohm-m)	2000
0.2	MEDIUM INDUCTION (Ohm-m)	2000
0.2	DEEP INDUCTION (Ohm-m)	2000



3700  
 3750  
 3800  
 3850







### Calibration Report

Database File: 26226ddn.db  
 Dataset Pathname: pass3.4  
 Dataset Creation: Sun Sep 28 16:57:15 2014

### Dual Induction Calibration Report

Serial-Model: PROBE7-DILG  
 Surface Cal Performed: Tue Sep 02 02:19:29 2014  
 Downhole Cal Performed: Tue Sep 02 01:11:23 2014  
 After Survey Verification Performed: Tue Sep 02 01:28:35 2014

#### Surface Calibration

Loop:	Readings			References			Results	
	Air	Loop		Air	Loop		m	b
Deep	0.593	0.593	V	0.000	400.000	mmho/m	620.000	-7.000
Medium	0.668	0.668	V	0.000	464.000	mmho/m	630.000	-44.000
Internal:	Zero	Cal		Zero	Cal		m	b
Deep	0.030	0.644	V	0.000	400.000	mmho/m	651.380	-19.739
Medium	0.027	0.815	V	0.000	464.000	mmho/m	588.755	-16.048

#### Downhole Calibration

	Readings			References			Results	
	Zero	Cal		Zero	Cal		m'	b'
Deep	0.000	0.000	mmho/m	3353890.000	-304691.000	mmho/m	1.000	0.000
Medium	0.000	0.000	mmho/m	16235500.000	-3735510.000	mmho/m	1.000	0.000
LL3		2.500	V		1400.000	Ohm-m		
		0.022	V		20.000	Ohm-m		
		-7.278	V		4000.000	mmho-m		

#### After Survey Verification

	Readings			Targets			Results	
	Zero	Cal		Zero	Cal		m'	b'
Deep	0.000	0.000	mmho/m	0.000	0.000	mmho/m	0.000	0.000
Medium	0.000	0.000	mmho/m	0.000	0.000	mmho/m	0.000	0.000
LL3		0.000	Ohm-m		1400.000	Ohm-m		
		0.000	Ohm-m		20.000	Ohm-m		
		0.000	mmho-m		4000.000	mmho-m		

Compensated Density Calibration Report

Serial-Model: GEAR5-GEARHART  
 Source / Verifier: 147 / 147  
 Master Calibration Performed: Tue Sep 02 02:18:22 2014

Master Calibration

	Density		Far Detector	Near Detector	
Magnesium	1.710	g/cc	943.83	576.01	cps
Aluminum	2.600	g/cc	212.01	399.19	cps
	Spine Angle = 76.20		Density/Spine Ratio = 0.579		
	Size		Reading		
Small Ring	8.00	in	1.77	V	
Large Ring	14.00	in	2.90	V	

Compensated Neutron Calibration Report

Serial Number: 080620  
 Tool Model: Probe

PRE-SURVEY VERIFICATION

Detector	Readings	Measured	Target
Short Space	cps		
Long Space	cps	pu	pu

POST-SURVEY VERIFICATION

Detector	Readings	Measured	Target
Short Space	cps		
Long Space	cps	pu	pu

Gamma Ray Calibration Report

Serial Number: 46001  
 Tool Model: Probe1  
 Performed: Tue Sep 02 02:32:49 2014

Calibrator Value: 1.0 GAPI

Background Reading: 0.0 cps  
 Calibrator Reading: 1.0 cps

Sensitivity: 0.2600 GAPI/cps

# ALLIED OIL & GAS SERVICES, LLC 055325

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:  
Russell KS

DATE <u>9-19-14</u>	SEC. <u>32</u>	TWP. <u>9</u>	RANGE <u>21</u>	CALLED OUT	ON LOCATION	JOB START <u>10:00 AM</u>	JOB FINISH <u>10:30 AM</u>
LEASE <u>Yost</u>	WELL# <u>3</u>	LOCATION <u>Pulca 35 7W 15 1/2 E Dinto</u>		COUNTY <u>Graham</u>	STATE <u>KS</u>		

CONTRACTOR Sty top Drilling 1  
 TYPE OF JOB Surface  
 HOLE SIZE 12 1/4 TD. 222  
 CASING SIZE 8 5/8 2.3" DEPTH 222  
 TUBING SIZE DEPTH  
 DRILL PIPE DEPTH  
 TOOL DEPTH  
 PRES. MAX MINIMUM  
 MEAS. LINE SHOE JOINT 15  
 CEMENT LEFT IN CSG. 15  
 PERFS.  
 DISPLACEMENT 13

EQUIPMENT  
 PUMP TRUCK CEMENTER Robert Y  
 # 409 HELPER Nathan D  
 BULK TRUCK  
 # 985 DRIVER Tracy J  
 BULK TRUCK  
 # DRIVER

REMARKS:  
see log

Cement did circulate to surface  
30 sks to pit  
Thank you!!!

CHARGE TO: Pioneer Resources  
 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 Jay A. Eilers  
 SIGNATURE Jay A. Eilers

OWNER  
 CEMENT AMOUNT ORDERED 150 com 35 acc 29 gal  
 COMMON 150 @ 17.90 2685.00  
 POZMIX @  
 GEL 282 @ 0.50 141.00  
 CHLORIDE 423 @ 1.10 465.30  
 ASC @  
Material @ 3291.30  
Blue @ 658.26  
 HANDLING 150 @ 2.48 372.00  
 MILEAGE 247 1/m 2.70 678.56  
246.74 TOTAL 4844.86

SERVICE  
 DEPTH OF JOB 222  
 PUMP TRUCK CHARGE 1512.25  
 EXTRA FOOTAGE @  
 MILEAGE 35 L.V.M.I @ 4.40 154.00  
 MANIFOLD @  
70 HVMT @ 7.70 539.00  
Blue 651.16 TOTAL 3255.81  
2205.25

PLUG & FLOAT EQUIPMENT  
 @  
 @  
 @  
 @  
 TOTAL

SALES TAX (If Any)  
 TOTAL CHARGES 6547.11  
 DISCOUNT 1309.42 20% IF PAID IN 30 DAYS  
net \$ 5237.69

# GLOBAL CEMENTING, L.L.C.

1461

REMIT TO 18048 170RD  
RUSSELL, KS 67665

SERVICE POINT: Russell, KS

DATE	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
9-29-14						8:30am	9:30am
LEASE <u>Yost</u>						COUNTY	STATE
WELL # <u>3</u>						<u>Carahom</u>	<u>KS</u>
LOCATION							
OLD OR <u>(N)</u> (CIRCLE ONE)							

CONTRACTOR Skycap Drilling  
 TYPE OF JOB Long string  
 HOLE SIZE 7 7/8 T.D.  
 CASING SIZE 5 1/2 DEPTH 3930.72  
 TUBING SIZE DEPTH  
 DRILL PIPE DEPTH  
 TOOL Port Collar DEPTH 1796'  
 PRES. MAX 1500 psi MINIMUM 100 psi  
 MEAS. LINE SHOE JOINT  
 CEMENT LEFT IN CSG. 20.96  
 PERFS  
 DISPLACEMENT 94 3/4 bbl

OWNER  
 CEMENT AMOUNT ORDERED 180sx com 10% salt 240gel 2% plaster  
 COMMON @ \_\_\_\_\_  
 POZMIX @ \_\_\_\_\_  
 GEL @ \_\_\_\_\_  
 CHLORIDE @ \_\_\_\_\_  
 ASC @ \_\_\_\_\_  
 HANDLING @ \_\_\_\_\_  
 MILEAGE @ \_\_\_\_\_  
 TOTAL \_\_\_\_\_

EQUIPMENT  
 PUMP TRUCK CEMENTER Leath  
 # 01 HELPER Brad  
 BULK TRUCK DRIVER Mark  
 BULK TRUCK DRIVER

**REMARKS:**

Ran 115' of 5 1/2" casing and landing it  
 and circulation for 1 hr and hook up  
 and pump 500 gal mud Plush and  
 10 bbl KC2 water - mix 150sx and shut  
 down - wash pump and lines clean -  
 hook up diso 94 3/4 bbl of H2O - 114.19  
 pressure @ 1500 psi - plug landed @ 1500 psi  
 released and float held - plug RH with  
 30sx

CHARGE TO: Pioneer Resources  
 STREET \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

Global Cementing, L.L.C.,  
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 do work as is listed. The above work was done to satisfaction  
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 understand the "GENERAL TERMS AND CONDITIONS"  
 listed on the reverse side. Thank You!

PRINTED NAME \_\_\_\_\_  
 SIGNATURE [Signature]

**SERVICE**

DEPTH OF JOB \_\_\_\_\_  
 PUMP TRUCK CHARGE \_\_\_\_\_  
 EXTRA FOOTAGE @ \_\_\_\_\_  
 MILEAGE 38x2 @ \_\_\_\_\_  
 MANIFOLD @ \_\_\_\_\_  
 TOTAL \_\_\_\_\_

**PLUG & FLOAT EQUIPMENT**

1-5 1/2 Port Collar - weatherford  
3-5 1/2 basket - weatherford  
8-5 1/2 Cent @ \_\_\_\_\_  
1-5 1/2 LD & Plug @ \_\_\_\_\_  
1-5 1/2 AFU shoe @ \_\_\_\_\_  
25 Scratchers @ \_\_\_\_\_  
500 gal mud Plush  
10 bbl KC2  
 TOTAL \_\_\_\_\_

SALES TAX (if Any) \_\_\_\_\_  
 TOTAL CHARGES \_\_\_\_\_

# GLOBAL CEMENTING, L.L.C.

1500

REMIT TO 18048 170RD  
RUSSELL, KS 67665

SERVICE POINT: Russell, KS

DATE <u>10-16-2014</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION <u>9:30AM</u>	JOB START <u>9:45AM</u>	JOB FINISH <u>1:30</u>
LEASE <u>4057</u>	WELL #. <u>3</u>		LOCATION		COUNTY	STATE <u>KS</u>	
OLD OR <input checked="" type="radio"/> NEW (CIRCLE ONE)							

CONTRACTOR Pacific Hawk  
 TYPE OF JOB Port Collar  
 HOLE SIZE 7 7/8" TD.  
 CASING SIZE 5 1/2" DEPTH  
 TUBING SIZE 2 3/8" DEPTH  
 DRILL PIPE DEPTH  
 TOOL DEPTH  
 PRES. MAX MINIMUM  
 MEAS. LINE SHOE JOINT  
 CEMENT LEFT IN CSG.  
 PERFS  
 DISPLACEMENT

OWNER Pioneer Resources  
 CEMENT AMOUNT ORDERED

COMMON 275 SX @ \_\_\_\_\_  
 POZMIX @ \_\_\_\_\_  
 GEL 15 SX @ \_\_\_\_\_  
 CHLORIDE @ \_\_\_\_\_  
 ASC @ \_\_\_\_\_  
 @ \_\_\_\_\_  
 @ \_\_\_\_\_  
 @ \_\_\_\_\_  
 @ \_\_\_\_\_  
 @ \_\_\_\_\_  
 @ \_\_\_\_\_  
 @ \_\_\_\_\_  
 HANDLING @ \_\_\_\_\_  
 MILEAGE @ \_\_\_\_\_  
 TOTAL \_\_\_\_\_

EQUIPMENT  
 PUMP TRUCK CEMENTER BRAD STARKS  
 # P1 HELPER MARK BRYANT  
 BULK TRUCK  
 # B3 DRIVER KEVIN RUPP  
 BULK TRUCK  
 # DRIVER

REMARKS:

LOAD HOLE W/24 BBL, CIRCULATE CLEAN W/76 BBL  
 TOTAL, SPOT SAND W/5.5 BBL + PUT 8 BBL  
 BEHIND IT, PUMP 10 BBL CFC DOWN TUBING, HOOR UP  
 BACKSIDE FINISH MIXING GEL, 15 SX TOTAL, SWITCH  
 TO CEMENT, PUMP 275 SX W/6 BBL WATER  
 BEHIND IT, WASH UP, CIRC. 17.5 BBL H2O, GO  
 DOWN + WASH SAND OFF PLUG W/64 BBL H2O

SERVICE

DEPTH OF JOB \_\_\_\_\_  
 PUMP TRUCK CHARGE \_\_\_\_\_  
 EXTRA FOOTAGE @ \_\_\_\_\_  
 MILEAGE 76 @ \_\_\_\_\_  
 MANIFOLD @ \_\_\_\_\_  
 @ \_\_\_\_\_  
 @ \_\_\_\_\_  
 TOTAL \_\_\_\_\_

PLUG & FLOAT EQUIPMENT

\_\_\_\_\_ @ \_\_\_\_\_  
2-sand @ \_\_\_\_\_  
 @ \_\_\_\_\_  
 @ \_\_\_\_\_  
 @ \_\_\_\_\_  
 @ \_\_\_\_\_  
 TOTAL \_\_\_\_\_

CHARGE TO: Pioneer Resources  
 STREET \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

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PRINTED NAME \_\_\_\_\_  
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SALES TAX (If Any) \_\_\_\_\_  
 TOTAL CHARGES \_\_\_\_\_  
 DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS