



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1237188
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: _____

1237188

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)*

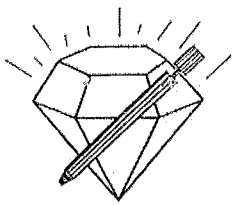
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

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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DIAMOND TESTING, LLC
P.O. Box 157
HOISINGTON, KANSAS 67544
(620) 653-7550 • (800) 542-7313
4-HFoundation1-17DST1

Company Val Energy, Inc. Lease & Well No. 4-H Foundation No. 1-17
Elevation 3079 KB Formation Altamont "A" Effective Pay _____ Ft. Ticket No. JB08
Date 12-5-14 Sec. 17 Twp. 17S Range 33W County Scott State Kansas
Test Approved By Harley K. Sayles Diamond Representative Jeff Brown

Formation Test No. 1 Interval Tested from 4,385 ft. to 4,460 ft. Total Depth 4,460 ft.
Packer Depth 4,380 ft. Size 6 3/4 in. Packer Depth _____ ft. Size _____ in.
Packer Depth 4,385 ft. Size 6 3/4 in. Packer Depth _____ ft. Size _____ in.
Depth of Selective Zone Set _____ ft.

Top Recorder Depth (Inside) 4,366 ft. Recorder Number 0060 Cap. 5,000 psi.
Bottom Recorder Depth (Outside) 4,422 ft. Recorder Number 5517 Cap. 5,000 psi.
Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ psi.

Drilling Contractor Val Energy, Inc. - Rig 4 Drill Collar Length 30 ft I.D. 2 1/4 in.
Mud Type Chemical Viscosity 50 Weight Pipe Length _____ ft I.D. _____ in.
Weight 9.3 Water Loss 8.8 cc. Drill Pipe Length 4,323 ft I.D. 3 1/2 in.
Chlorides 4,100 P.P.M. Test Tool Length 32 ft Tool Size 3 1/2-IF in.
Jars: Make Sterling Serial Number 11 Anchor Length 75 ft. Size 4 1/2-FH in.
Did Well Flow? No Reversed Out No Surface Choke Size 1 in. Bottom Choke Size 5/8 in.
Main Hole Size 7 7/8 in. Tool Joint Size 4 1/2-XH in.

Blow: 1st Open: Good blow increasing. Off bottom of bucket in 19 mins. No blow back during shut-in.
2nd Open: Good blow increasing. Off bottom of bucket in 30 mins. No blow back during shut-in.

Recovered 31 ft. of mud w/ oil spots = .441130 bbls.
Recovered 126 ft. of slightly water cut mud w/ oil spots = 1.792980 bbls. (Grind out: 5%-water; 95%-mud)
Recovered 189 ft. of watery mud = 2.689470 bbls. (Grind out: 30%-water; 70%-mud)
Recovered 189 ft. of slightly mud cut water = 2.410170 bbls. (Grind out: 95%-water; 5%-mud)
Recovered 535 ft. of TOTAL FLUID = 7.333750 bbls.

Recovered _____ ft. of _____
Remarks Tool Sample Grind Out: Mud w/ oil spots

Time Set Packer(s) 12:52 P.M. Time Started off Bottom 4:37 P.M. Maximum Temperature 124°
Initial Hydrostatic Pressure.....(A) 2070 P.S.I.
Initial Flow Period.....Minutes 45 (B) 23 P.S.I. to (C) 135 P.S.I.
Initial Closed In Period.....Minutes 60 (D) 1160 P.S.I.
Final Flow Period.....Minutes 60 (E) 139 P.S.I. to (F) 251 P.S.I.
Final Closed In Period.....Minutes 60 (G) 1107 P.S.I.
Final Hydrostatic Pressure.....(H) 2070 P.S.I.



Hoisington, Kansas

JEFF BROWN
620-617-6373
brown.dtlc@gmail.com

General Information

Company Name VAL ENERGY, INC

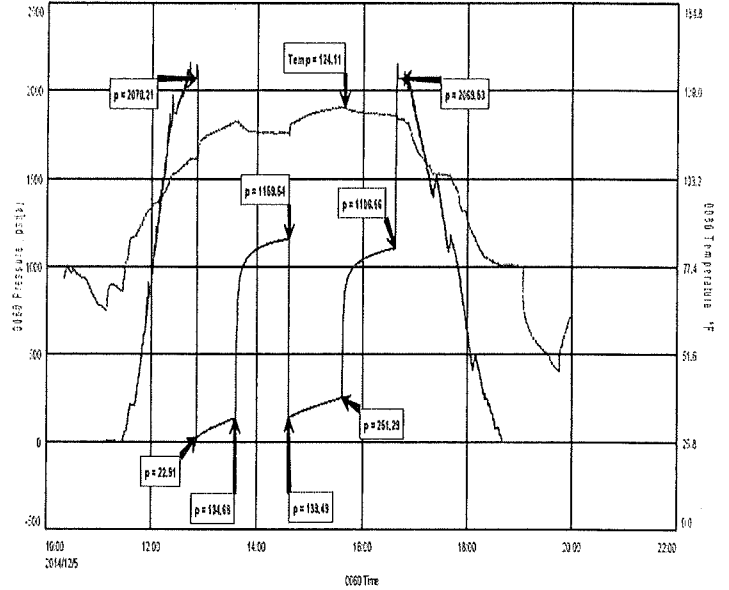
Test Information

Contact	DUSTIN WYER
Well Name	4-H FOUNDATION 1-17
Unique Well ID	DST 1 ALTAMONT A 4385-4460
Surface Location	SEC 17-17S-33W SCOTT CNTY, KS
Field	WILDCAT
Well Operator	VAL ENERGY, INC
Test Type	Drill Stem Test
Formation	DST 1 ALTAMONT A 4385-4460
Well Fluid Type	01 Oil
Test Purpose (AEUB)	Initial Test
Start Test Date	2014/12/05
Start Test Time	10:20:00
Final Test Date	2014/12/05
Final Test Time	20:01:00
Job Number	JB08
Representative	JEFF BROWN
Prepared By	JEFF BROWN
Report Date	2014/12/05

VAL ENERGY, INC
 DST 1 ALTAMONT A 4385-4460
 Start Test Date: 2014/12/05
 Final Test Date: 2014/12/05

4H FOUNDATION 1-17
 Formation: DST 1 ALTAMONT A 4385-4460
 Pool: WILDCAT
 Job Number: JB08

4-H FOUNDATION 1-17

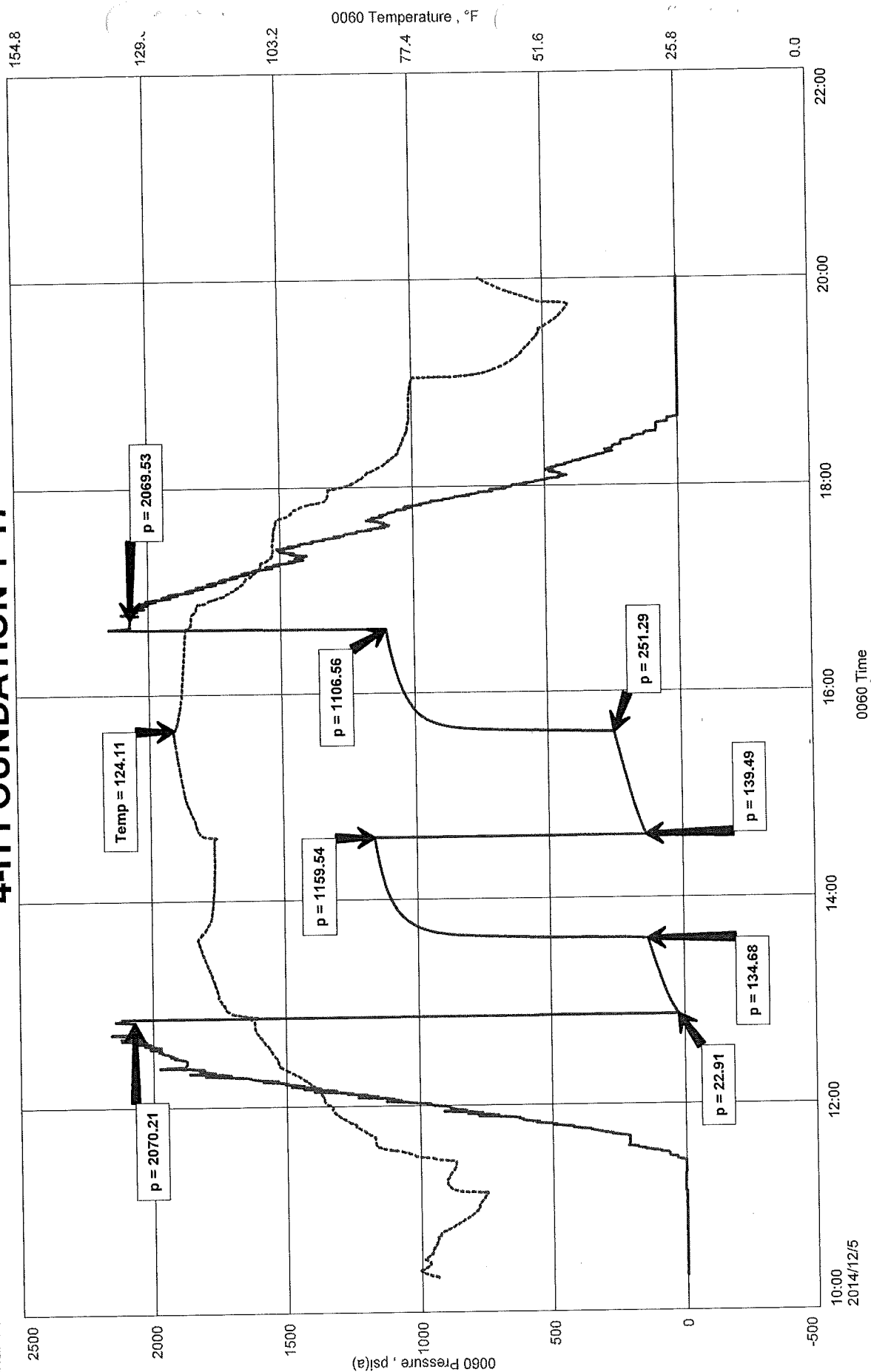


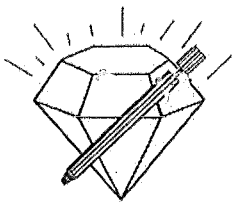
FLUID RECOVERY

FLUID RECOVERY: 31' MUD WITH OIL SPOTS
 126' SLWCM WITH OIL SPOTS 5% W, 95% M
 189' WM 30% W, 70% M
 189' SLMCW 95% W, 5% M
 535' TOTAL FLUID

TOOL SAMPLE: MUD WITH OIL SPOTS

4-H FOUNDATION 1-17





DIAMOND TESTING, LLC
P.O. Box 157
HOISINGTON, KANSAS 67544
(620) 653-7550 • (800) 542-7313
4-HFoundation1-17DST2

Company Val Energy, Inc. Lease & Well No. 4-H Foundation No. 1-17
Elevation 3079 KB Formation Altamont "B & C"/Pawnee/Fort Scott Effective Pay _____ Ft. Ticket No. JB09
Date 12-6-14 Sec. 17 Twp. 17S Range 33W County Scott State Kansas
Test Approved By Harley K. Sayles Diamond Representative Jeff Brown

Formation Test No. 2 Interval Tested from 4,470 ft. to 4,590 ft. Total Depth 4,590 ft.
Packer Depth 4,465 ft. Size 6 3/4 in. Packer Depth _____ ft. Size _____ in.
Packer Depth 4,470 ft. Size 6 3/4 in. Packer Depth _____ ft. Size _____ in.
Depth of Selective Zone Set _____ ft.

Top Recorder Depth (Inside) 4,451 ft. Recorder Number 0060 Cap. 5,000 psi.
Bottom Recorder Depth (Outside) 4,570 ft. Recorder Number 5517 Cap. 5,000 psi.
Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ psi.

Drilling Contractor Val Energy, Inc. - Rig 4 Drill Collar Length 30 ft I.D. 2 1/4 in.
Mud Type Chemical Viscosity 47 Weight Pipe Length _____ ft I.D. _____ in.
Weight 9.3 Water Loss 8.8 cc. Drill Pipe Length 4,408 ft I.D. 3 1/2 in.
Chlorides 6,000 P.P.M. Test Tool Length 32 ft Tool Size 3 1/2-IF in.
Jars: Make Sterling Serial Number 11 Anchor Length 120 ft. Size 4 1/2-FH in.
Did Well Flow? No Reversed Out No Surface Choke Size 1 in. Bottom Choke Size 5/8 in.
Main Hole Size 7 7/8 in. Tool Joint Size 4 1/2-XH in.

Blow: 1st Open: Weak blow increasing to 1/4 in. No blow back during shut-in.

2nd Open: No blow. No blow back during shut-in.

Recovered 5 ft. of mud = .024600 bbls.
Recovered _____ ft. of _____
Recovered _____ ft. of _____
Recovered _____ ft. of _____
Recovered _____ ft. of _____
Recovered _____ ft. of _____

Remarks Tool Sample Grind Out: Mud

Time Set Packer(s) 3:25 P.M. Time Started off Bottom 5:40 P.M. Maximum Temperature 112°
Initial Hydrostatic Pressure.....(A) 2113 P.S.I.
Initial Flow Period.....Minutes 30 (B) 13 P.S.I. to (C) 15 P.S.I.
Initial Closed In Period.....Minutes 30 (D) 90 P.S.I.
Final Flow Period.....Minutes 30 (E) 15 P.S.I. to (F) 15 P.S.I.
Final Closed In Period.....Minutes 45 (G) 101 P.S.I.
Final Hydrostatic Pressure.....(H) 2085 P.S.I.



Hoisington, Kansas

JEFF BROWN
 620-617-6373
 brown.dtlc@gmail.com

General Information

Company Name VAL ENERGY, INC

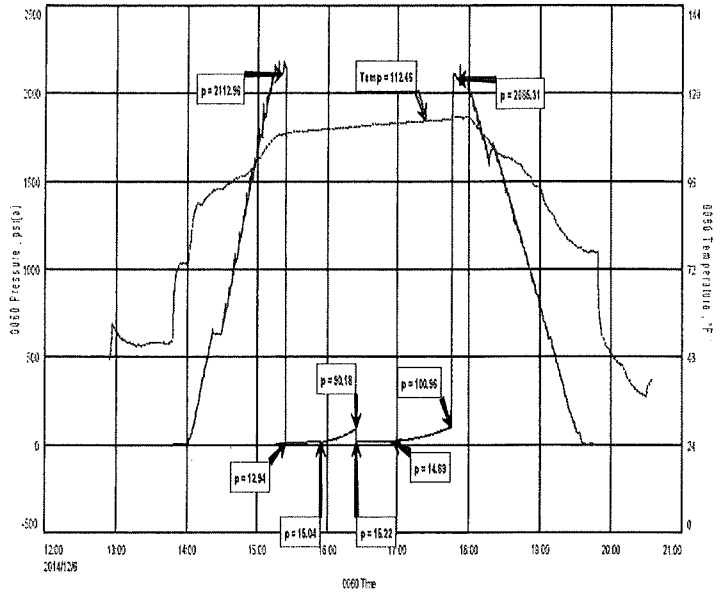
Test Information

Contact	DUSTIN WYER
Well Name	4-H FOUNDATION 1-17
Unique Well ID	DST 2 ALT "B&C",PAWNEE,FT SCOTT 4470-4590
Surface Location	SEC 17-17S-33W SCOTT CNTY, KS
Field	WILDCAT
Well Operator	VAL ENERGY, INC
Test Type	Drill Stem Test
Formation	DST 2 ALT "B&C",PAWNEE,FT SCOTT 4470-4590
Well Fluid Type	01 Oil
Test Purpose (AEUB)	Initial Test
Start Test Date	2014/12/06
Start Test Time	12:54:00
Final Test Date	2014/12/06
Final Test Time	20:35:00
Job Number	JB09
Representative	JEFF BROWN
Prepared By	JEFF BROWN
Report Date	2014/12/06

VAL ENERGY, INC
 DST 2 ALT "B&C",PAWNEE,FT SCOTT 4470-4590
 Start Test Date: 2014/12/06
 Final Test Date: 2014/12/06

4H FOUNDATION 1-17
 Formation DST 2 ALT "B&C",PAWNEE,FT SCOTT 4470-4590
 Pool WILDCAT
 Job Number JB09

4-H FOUNDATION 1-17

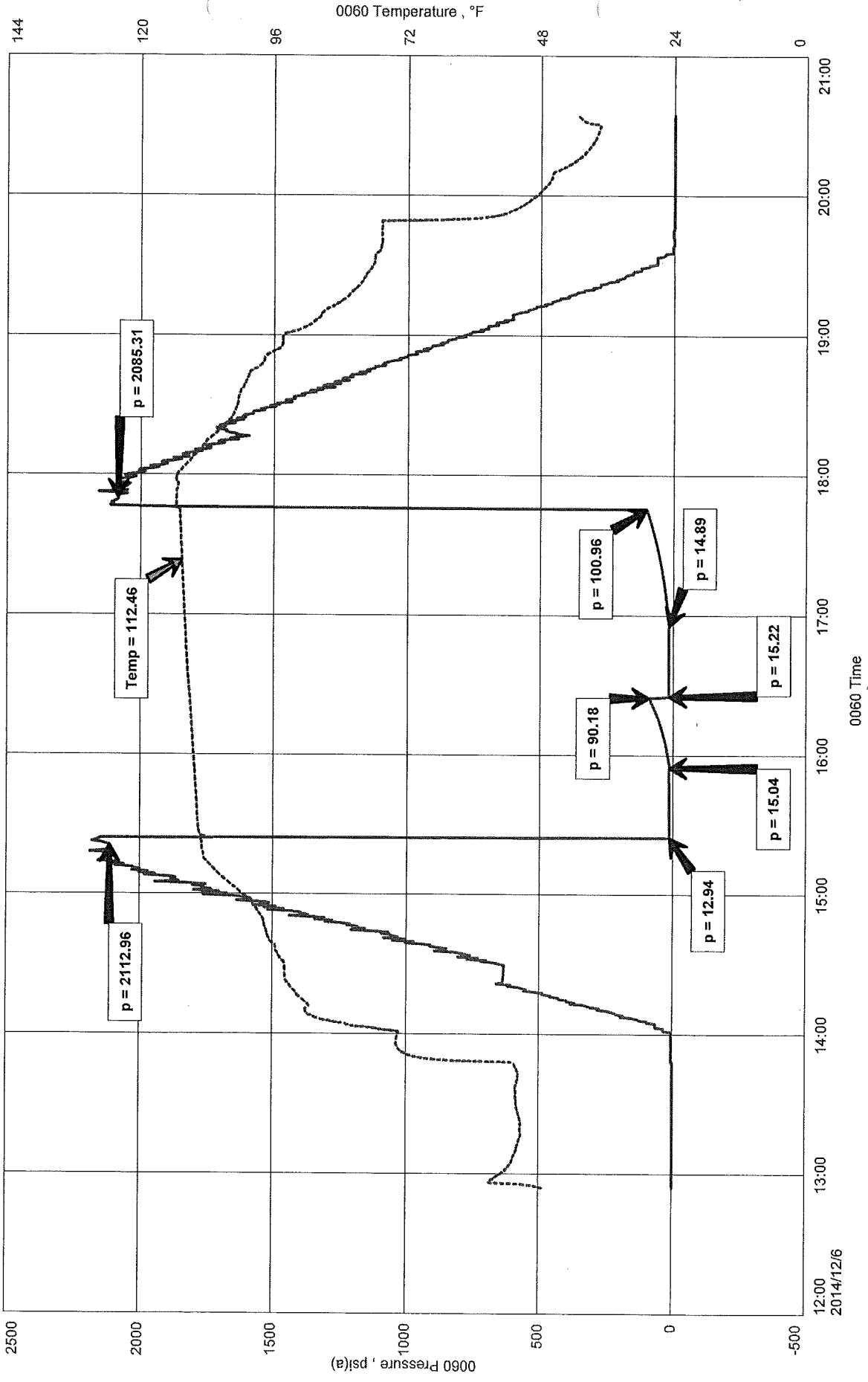


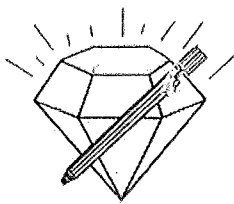
FLUID RECOVERY

TEST RESULTS: 5' OF MUD

TOOL SAMPLE: MUD

4-H FOUNDATION 1-17





DIAMOND TESTING, LLC
P.O. Box 157
HOISINGTON, KANSAS 67544
(620) 653-7550 • (800) 542-7313
4-HFoundation1-17DST3

Company Val Energy, Inc. Lease & Well No. 4-H Foundation No. 1-17
Elevation 3079 KB Formation Johnson & Atoka Sand Effective Pay Ft. Ticket No. JB10
Date 12-7-14 Sec. 17 Twp. 17S Range 33W County Scott State Kansas
Test Approved By Harley K. Sayles Diamond Representative Jeff Brown

Formation Test No. 3 Interval Tested from 4,668 ft. to 4,730 ft. Total Depth 4,730 ft.
Packer Depth 4,663 ft. Size 6 3/4 in. Packer Depth ft. Size in.
Packer Depth 4,668 ft. Size 6 3/4 in. Packer Depth ft. Size in.
Depth of Selective Zone Set ft.

Top Recorder Depth (Inside) 4,649 ft. Recorder Number 0060 Cap. 5,000 psi.
Bottom Recorder Depth (Outside) 4,705 ft. Recorder Number 5517 Cap. 5,000 psi.
Below Straddle Recorder Depth ft. Recorder Number Cap. psi.

Drilling Contractor Val Energy, Inc. - Rig 4 Drill Collar Length 30 ft I.D. 2 1/4 in.
Mud Type Chemical Viscosity 54 Weight Pipe Length ft I.D. in.
Weight 9.2 Water Loss 8.0 cc. Drill Pipe Length 4,606 ft I.D. 3 1/2 in.
Chlorides 6,200 P.P.M. Test Tool Length 32 ft Tool Size 3 1/2-IF in.
Jars: Make Sterling Serial Number 11 Anchor Length 62 ft. Size 4 1/2-FH in.
Did Well Flow? No Reversed Out No Surface Choke Size 1 in. Bottom Choke Size 5/8 in.
Main Hole Size 7 7/8 in. Tool Joint Size 4 1/2-XH in.

Blow: 1st Open: Weak, surface blow. No blow back during shut-in.
2nd Open: No blow. No blow back during shut-in.

Recovered 2 ft. of mud w/ oil spots = .009840 bbls.
Recovered ft. of
Recovered ft. of
Recovered ft. of
Recovered ft. of
Recovered ft. of

Remarks Tool Sample Grind Out: Mud w/ oil spots

Time Set Packer(s) 4:48 P.M. Time Started off Bottom 7:03 P.M. Maximum Temperature 116°
Initial Hydrostatic Pressure.....(A) 2230 P.S.I.
Initial Flow Period.....Minutes 30 (B) 11 P.S.I. to (C) 13 P.S.I.
Initial Closed In Period.....Minutes 30 (D) 31 P.S.I.
Final Flow Period.....Minutes 30 (E) 13 P.S.I. to (F) 12 P.S.I.
Final Closed In Period.....Minutes 45 (G) 24 P.S.I.
Final Hydrostatic Pressure.....(H) 2192 P.S.I.



Hoisington, Kansas

JEFF BROWN
620-617-6373
brown.dtlc@gmail.com

General Information

Company Name VAL ENERGY, INC

Test Information

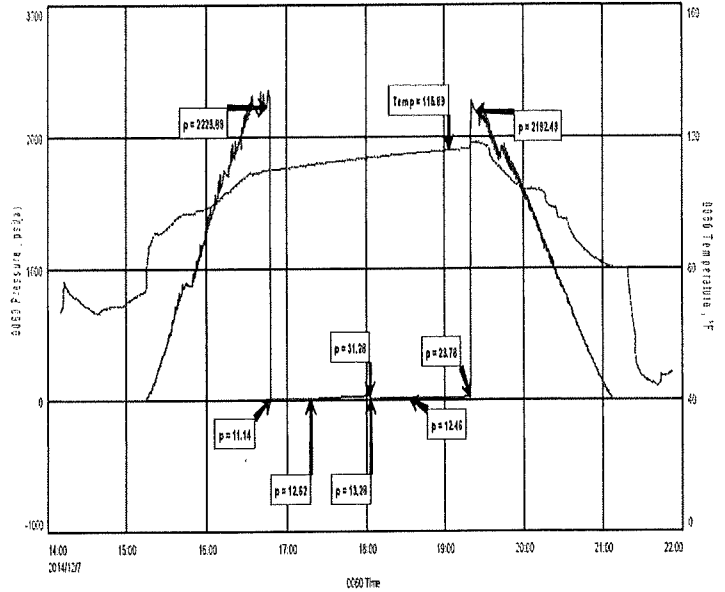
Contact
 Well Name
 Unique Well ID
 Surface Location
 Field
 Well Operator
 Test Type
 Formation
 Well Fluid Type
 Test Purpose (AEUB)
 Start Test Date
 Start Test Time
 Final Test Date
 Final Test Time
 Job Number
 Representative
 Prepared By
 Report Date

DUSTIN WYER
 4-H FOUNDATION 1-17
 DST 3 JOHNSON & ATOKA SD 4668-4730
 SEC 17-17S-33W SCOTT CNTY, KS
 WILDCAT
 VAL ENERGY, INC
 Drill Stem Test
 DST 3 JOHNSON & ATOKA SD 4668-4730
 01 Oil
 Initial Test
 2014/12/07
 14:10:00
 2014/12/07
 21:53:00
 JB10
 JEFF BROWN
 JEFF BROWN
 2014/12/07

VAL ENERGY, INC
 DST 3 JOHNSON & ATOKA SD 4668-4730
 Start Test Date: 2014/12/07
 Final Test Date: 2014/12/07

4H FOUNDATION 1-17
 Formation: DST 3 JOHNSON & ATOKA SD 4668-4730
 Field: WILDCAT
 Job Number: JB10

4-H FOUNDATION 1-17



FLUID RECOVERY

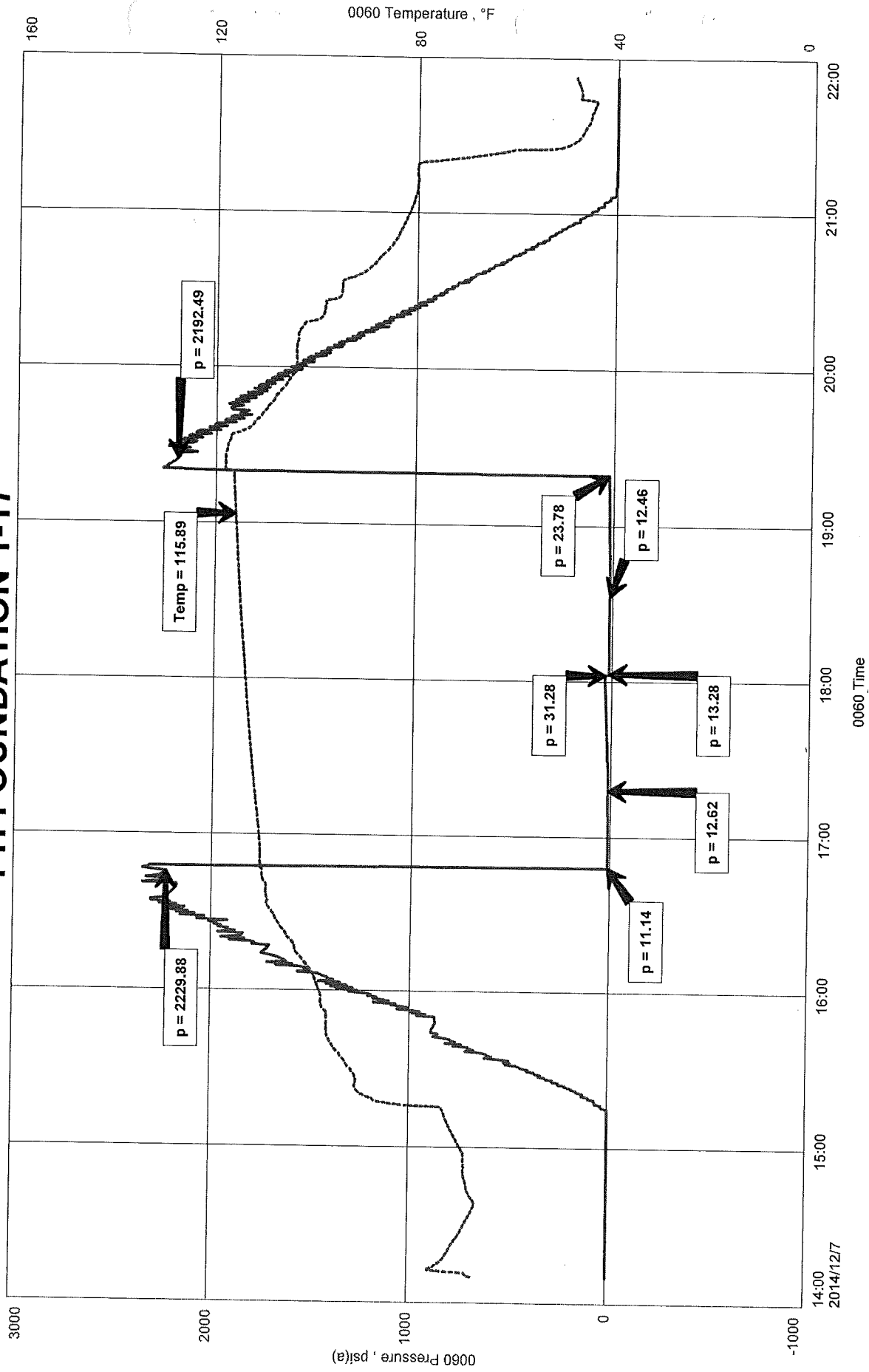
RECOVERY: 2' OF MUD WITH OIL SPOTS

TOOL SAMPLE: MUD WITH OIL SPOTS

VAL ENERGY, INC
DST 3 JOHNSON & ATOKA SD 4668-4730
Start Test Date: 2014/12/07
Final Test Date: 2014/12/07

4-H FOUNDATION 1-17
Formation: DST 3 JOHNSON & ATOKA SD 4668-4730
Pool: WILDCAT
Job Number: JB10

4-H FOUNDATION 1-17





CONSOLIDATED
Oil Well Services, LLC

REMIT TO
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#

802544

Invoice Date: 12/10/14

Terms: Net 30

Page 1

VAL ENERGY

125 N. Market, Ste. 1710
WICHITA KS 67202
USA

RECEIVED

4H FOUNDATION 1-17

DEC 12 2014

9233 - Plug Cement

Tax: 385.78

Total: 7,501.66



CONSOLIDATED
Oil Well Services, LLC

JM 1391
FT 1343

TICKET NUMBER 47877
LOCATION Ogkley Ks
FOREMAN Jerry Y

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

FIELD TICKET & TREATMENT REPORT
CEMENT INVOICE #802544 Ks

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
128-14	8576	4H Foundation 147	17	17	33W	Scott
CUSTOMER			4083 job			
Mailing Address			TRUCK #	DRIVER	TRUCK #	DRIVER
Val Energy			399	Jeremy R		
			5307129	Bill S		
CITY		STATE	ZIP CODE			

JOB TYPE PTA HOLE SIZE 7 7/8 HOLE DEPTH 4670 CASING SIZE & WEIGHT _____
 CASING DEPTH _____ DRILL PIPE 4 1/2 TUBING _____ OTHER _____
 SLURRY WEIGHT 13.8 SLURRY VOL 1.42 WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting & rig upon Val 4 plugs ordered with 300 sks 60/40
POZ mix 406 gal 1/4 4 fld seal
50 @ 2430'
80 @ 1440'
50 @ 720'
50 @ 240'
20 @ 60'
20 mh 30 Rh

Thank you
Jerry & Crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405	1	PUMP CHARGE	1395.00	1395.00
5406	45	MILEAGE	5.2	236.25
5407	12.5	ton mileage delivery	12	1015.88
1131	300 sks	60/40 poz mix	15.86	4758.00
1186	1032 #	gel	27	27864
1107	75 #	fld seal	292	21900
1111	100 #	solt	NC	NC
			Subtotal	7906.52
			less 10% disc.	790.65
			Subtotal	7115.87
			SALES TAX	385.78
			ESTIMATED TOTAL	7501.66

Revin 3737
 AUTHORIZATION [Signature] 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
Consolidated Oil Well Services, LLC
Dept:970
P.O.Box 4346
Houston, TX 77210-4346

MAIN OFFICE

P.O.Box884
Chanute, KS 66720
620/431-9210, 1-800/467-8676
Fax 620/431-0012

Invoice

Invoice# 802310

Invoice Date: 11/30/14

Terms: Net 30

Page 1

VAL ENERGY
~~125 N. Market, Ste. 1710~~
~~200 WEST DOUGLAS SUITE 520~~
WICHITA KS 67202
USA

4H FOUNDATION #1-17

9208

Surface Cement

Tax: 262.71

Total: 5,286.57



CONSOLIDATED
Oil Well Services, LLC

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

1199 1216 1230
Invoice #802310
FIELD TICKET & TREATMENT REPORT
CEMENT

TICKET NUMBER 47873
LOCATION Oakley, KS
FOREMAN Jerry Y

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11-28-14	8576	4H Foundation 1-17	17	17	35W	Scott
CUSTOMER			4083 jct			
MAILING ADDRESS			4w			
CITY			1/8 smto			
STATE			TRUCK #			
ZIP CODE			DRIVER			
			TRUCK #			
			DRIVER			
			TRUCK #			
			DRIVER			

JOB TYPE Surface HOLE SIZE 12 1/4 HOLE DEPTH 218 CASING SIZE & WEIGHT 8 3/8 24 #
 CASING DEPTH 219 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 14.8 SLURRY VOL 1.24 WATER gal/sk _____ CEMENT LEFT in CASING 20'
 DISPLACEMENT 12 1/2 bbl DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting and upon Val 4 break circulation with rig tree mix 165 sks com class A cement with 3% CC 2% gel washup & displace with 12 1/2 bbl H2O & shut in & circulated approx 4561 ton feet

Cement did circulate

Thank you
Jerry & crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401s	1	PUMP CHARGE	1150.00	1150.00
5406	45	MILEAGE	6.25	286.25
5407	7.8	ton mileage delivery	125	614.25
1109s	165 sks	com class A cement	18.50	3060.75
1102	465 #	calcium chloride	94	4371.00
1118a	310 #	benonite gel	27	837.50
1111	100 #	salt	11	1100.00
			Subtotal	5582.10
			less 10% disc.	558.21
			Subtotal	5023.89
			SALES TAX	262.71
			ESTIMATED TOTAL	5286.57

RAVIN 3737 AUTHORIZATION [Signature] 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.