



FIELD ORDER N° C 42278

BOX 438 • HAYSVILLE, KANSAS 67060
316-524-1225

DATE 11-12-14 20

IS AUTHORIZED BY: VINCENT OIL CORP
(NAME OF CUSTOMER)

Address _____ City _____ State _____

To Treat Well As Follows: Lease THOMPSON Well No. 220 Customer Order No. _____

Sec. Twp. _____ Range _____ County PRATT State KS

CONDITIONS: As a part of the consideration hereof it is agreed that Copeland Acid Service is to service or treat at owners risk, the hereinbefore mentioned well and is not to be held liable for any damage that may accrue in connection with said service or treatment. Copeland Acid Service has made no representation, expressed or implied, and no representations have been relied on, as to what may be the results or effect of the servicing or treating said well. The consideration of said service or treatment is payable. There will be no discount allowed subsequent to such date. 6% interest will be charged after 60 days. Total charges are subject to correction by our invoicing department in accordance with latest published price schedules.

The undersigned represents himself to be duly authorized to sign this order for well owner or operator.

THIS ORDER MUST BE SIGNED BEFORE WORK IS COMMENCED

Well Owner or Operator

By

Agent

| CODE | QUANTITY | DESCRIPTION | UNIT COST | AMOUNT |
|------|----------|---|------------------|--------------------------|
| 2 | 30 | MUSKIE PUMP TRUCK | 420 | 170 ²⁰ |
| 2 | 30 | MUSKIE PUMP | 2 ²⁰ | 60 ²⁰ |
| 2 | 1 | PUMP PUMP CURSES | | 650 ²⁰ |
| 2 | 120 | 60/40 2% GALL | 16 ²⁰ | 700 ²⁰ |
| 2 | 3 | 2% ADD GALL | 22 ²⁰ | 66 ²⁰ |
| 2 | 10 | GALL | 22 ²⁰ | 220 ²⁰ |
| 2 | 133 | Bulk Charge | 125 | 166 ²⁵ |
| 2 | | Bulk Truck Miles $5.8327 \times 30m = 175.567m$ | 120 | 198 ²⁰ |
| | | Process License Fee on _____ Gallons | | |
| | | TOTAL BILLING | | 2675²² |

I certify that the above material has been accepted and used; that the above service was performed in a good and workmanlike manner under the direction, supervision and control of the owner, operator or his agent, whose signature appears below.

Copeland Representative Breiden

Station GB

KELSO
Well Owner, Operator or Agent

Remarks _____

NET 30 DAYS

