



FIELD ORDER N° C 43402

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

DATE 7-20-15 20\_\_

IS AUTHORIZED BY: LD Drilling (NAME OF CUSTOMER)  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_  
 To Treat Well \_\_\_\_\_ Well No. 2-24 Customer Order No. \_\_\_\_\_  
 As Follows: Lease Ruggan Farm  
 Sec. Twp. \_\_\_\_\_ County Barton State KS  
 Range \_\_\_\_\_

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 \_\_\_\_\_ By \_\_\_\_\_ Agent

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
2	10	MILEAGE Pump Truck	4 <sup>00</sup>	40 <sup>00</sup>
2	10	Mileage Pickup	2 <sup>00</sup>	20 <sup>00</sup>
2	1	Paug Pump Charge		650 <sup>00</sup>
2	355	60/40 2% gel	10 <sup>25</sup>	3816 <sup>25</sup>
2	7	2% acid gel	22 <sup>00</sup>	154 <sup>00</sup>
2	400 <sup>00</sup>	Hours	.40	160 <sup>00</sup>
2	370	Bulk Charge	1 <sup>25</sup>	462 <sup>50</sup>
2		Bulk Truck Miles <u>16.28 TR 10m = 162.8 TR</u>	1 <sup>10</sup>	179 <sup>08</sup>
		Process License Fee on _____ Gallons		
TOTAL BILLING				5481 <sup>83</sup>

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 Brendon  
 Station GB Kelso  
 Well Owner, Operator or Agent

Remarks \_\_\_\_\_

**NET 30 DAYS**

