

# COPELAND

## Acid & Cement

BURRTON, KS ♦ GREAT BEND, KS  
 (620) 463-5161 (620) 793-3366  
 FAX (620) 463-2104 FAX (620)

POST OFFICE BOX 438  
 HAYSVILLE, KS 67060  
 (316) 524-1225  
 (316) 524-1027 FAX

**Invoice**

INVOICE NUMBER:  
**C43982-IN**

**BILL TO:**  
**CARMEN SCHMITT, INC.**  
**P.O. BOX 47**  
**GREAT BEND, KS 67530**

**LEASE: W.P. UNIT 1-7**

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE ORDER	SPECIAL INSTRUCTIONS	
06/14/2016	C43982		06/08/2016		NET 30	
QUANTITY	U/M	ITEM NO./DESCRIPTION		D/C	PRICE	EXTENSION
1.00	EA	CEMENT 8 5/8" SURFACE PIPE (PRICE AS AGREED)		0.00	3,082.68	3,082.68
		<i>7/10/43</i> <i>19004.0107</i> <i>Well Site</i> <i>Surface Cement</i>				
<b>REMIT TO:</b> P.O. BOX 438 HAYSVILLE, KS 67060		<b>COP</b>		Net Invoice: 3,082.68 TRECO Sales Tax: 246.61 <b>Invoice Total: 3,329.29</b>		
<b>RECEIVED BY</b>		<b>NET 30 DAYS</b>				

There will be a charge of 1.5% "per month" (18% annual rate) on all accounts over 30 days pas

Copeland Acid & Cement is a subsidiary of Gressel Oil Field Service

Gressel Oil Field Service reserves a security interest in the goods sold until the same are paid for in full and reserve all the rights of a secured party under the Uniform Commercial Code.



FIELD ORDER N° C 43982

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

DATE 6-8 2016

IS AUTHORIZED BY: CARMEN Schmitt  
(NAME OF CUSTOMER)

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

To Treat Well As Follows: Lease W. P. Unit Well No. 1-7 Customer Order No. \_\_\_\_\_

Sec. Twp. Range 7-14s-25w County TAE90 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 \_\_\_\_\_ By \_\_\_\_\_  
Well Owner or Operator Agent

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
<u>2</u>		<u>Price AS AGREED Mileage Pump Chg</u> <u>CMT - 85 1/8" SURFACE PIPE</u>		<u>3082.68</u>
		Bulk Charge		
		Bulk Truck Miles		
		Process License Fee on _____ Gallons		
		<b>TOTAL BILLING</b>		<u>3082.68</u>

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 Duane Brozek  
Station Gr. Bend, KS CARMEN Schmitt  
Well Owner, Operator or Agent

Remarks \_\_\_\_\_

**NET 30 DAYS**

