**COPELAND** 

**Acid & Cement** 

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

Invoice

Page: 1

BURRTON, KS (620) 463-5161 FAX (620) 463-2104 GREAT BEND, KS (620) 793-3366 FAX (620) 793-3536

INVOICE NUMBER: C45524-IN

BILL TO:

CARMEN SCHMITT, INC. P.O. BOX 47 GREAT BEND, KS 67530 **LEASE: WP UNIT 3-7** 

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE O	PURCHASE ORDER		NSTRUCTIONS	
-08/30/2017	C45524	08/22/2017			NET 30			
QUANTITY	U/M	ITEM NO./DESCRIPTION			D/C	PRICE	EXTENSION	
1.00	SK	PIPE	HARGE, CEMENT, 8 5/8		0.00	2,999.00	2,999.00	
	,	/900 Ve /1 Cem	7/0/43 04.0307 all Alle ent Serbace	/I				
REMIT TO: P.O. BOX HAYSVIL	438 LE, KS 67060	MILEAGE, PUMP	COP E IS NOT TAXABLE AND AND OR DELIVERY CHA	RGES ONLY.	TRE	Net Invoice: CO Sales Tax: Invoice Total:	2,999.00 0.00 <b>2,999.00</b>	

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



Remarks

## FIELD ORDER Nº C 45524

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

		DATE 8 -	-12	20/7			
IS AUTHORI	ZÈD BY:	ARMEN SCHMITT INC					
Address		City	State				
To Treat Well As Follows:	Lease W	PUNIT Well No. 3-7 Custo	omer Order No				
Sec. Twp. ~ Range/	7-145-	-25W County TREGO	State,/	ts			
not to be held it implied, and no treatment is pay our invoicing de The undersi	able for any da representations vable. There will partment in acc gned represents	consideration hereof it is agreed that Copeland Acid Service is to service or treat at owner mage that may accrue in connection with said service or treatment. Copeland Acid Services have been relied on, as to what may be the results or effect of the servicing or treating still be no discount allowed subsequent to such date. 6% interest will be charged after 60 decordance with latest published price schedules.  It is not be duly authorized to sign this order for well owner or operator.	ce has made no repre aid well: The conside	sentation, expressed or ration of said service or			
THIS ORDER MU BEFORE WORK	IST BE SIGNED IS COMMENCED	Well Owner or Operator	Agent				
	04444		UNIT				
CODE	QUANTITY	DESCRIPTION	COST	AMOŲNŢ			
2	1	PRICE AGREED Mileage, Pump Chg.	100	0000 -0			
		CME	2999.00	2999.00			
		85/8" SURFACE PIPE					
			<del></del>				
	<del>                                     </del>						
			<u> </u>				
			**				
, -	-		•				
		Bulk Charge					
<u> </u>	ļ	Bulk Truck Miles					
	<u> </u>	Process License Fee onGallons					
		TOTAL BILLIN	1G	2999.00			
manner i	inder the dir	e material has been accepted and used; that the above service was per ection, supervision and control of the owner, operator or his agent, who	formed in a good se signature appe	and workmanlike ears below.			
Copeland Representative DuANE BROZEK							
Station <u>C</u>	BREAK	Bend, Ks. CARMEN-	Schmitt Operator or Adent	<u> </u>			
-		· · · · · · · · · · · · · · · · · · ·	411. HO.II				

**NET 30 DAYS** 



## TREATMENT REPORT

4	 Mr.

9-1	9-17	CT R	ould -	N. 45594	Type Treatment:		Type Fluid		l'ou <b>nds</b> of Sand		
				•	1		***************************************				
• •					1	•	***************************************				
					1		***************************************				
					i		***************************************				
					1	•	L to				
Casing: Size 8 3/9 Type & Wt. 27 # Set at 2/8 ft					from		L 10				
_					i .		L to				
							ıd Hole:				
				. Bottom atft.	Dump Trucks No	o Hand Had S	80 <u>80 </u>	<b>T</b> 111	da.		
				.ft. toft.	Anelliane Famine	367	- 3081		/R		
	-			ft.	Nacker:			Sat ut	94		
					1 4 1/2 (2 1/2 0 1/2 1/4 -						
Per	TOFALEG IFOTO				Pluming or Heali	ng Muteriale: Type		7			
		<b>5</b> 15	6 U	B. to		_	<u></u>	Clade	fl <sub>2</sub>		
Hun Hole His	<b></b>	Teller group		D. 10			4				
<i>0</i> -	D4-41	•••			Townson T	UAUL					
	Representati	SURES			Titawi						
TIME s.m /p.m.	Tubing	Casing	Total Fluid Pumped	i		REMAR	K 8				
		+		ONKO							
435		+	<del> </del>	CAN NOC							
-: \		<del> </del>	5	RREAKC	in ce	NEI QUI	95'				
		<del>                                     </del>	<del>  -/</del>	KUAL	V//	W E . (4)	1-1				
<del>-:/-</del>		25 D	10	MIX CM7	7 8.5	BAM		· · · · · · · · · · · · · · · · · · ·			
	<del>                                     </del>	13.7.6		77177 1222							
			42 REK	CME MI	V ~ 1		<del></del>	-			
:)		+	70.200	7.77	<del></del>						
		1	(2)	CHADT DI	SA/Ace	neit	9 RPM				
•		<del>                                     </del>	-6/	3////	Pince						
: \		400	13RA14	DISNACE	no at T	11					
: (		1	7 - 7 - 7 - 7 - 7		ــــــــــــــــــــــــــــــــــــــ						
: (				Close WE	11 7-11						
: 7					77		•				
6377				JOH COM	Aleter						
							<u> </u>				
:							•				
:											
:			<u> </u>	L							
:			<u></u>	ļ				_			
:											
:		<del></del>	1					<del></del>			
:		<u> </u>	<del> </del>								
:	ļ	<del> </del>	<b></b>								
		<del> </del>	<del> </del> -			<del></del> -					
	ļ	<del> </del>	<del>                                     </del>								
		<del> </del>	<del>                                     </del>								
	<del>                                       </del>	<del> </del>	<del> </del>								
		<del> </del>	<del>                                     </del>			<del></del>					
		<del> </del>	<del> </del>								
		<del>                                      </del>	<del>                                     </del>		<del> </del>		<u></u>		<del></del>		
	<del> </del>	<del> </del>	<del>                                     </del>	<del> </del>							
-:-	<del> </del>	+	<del> </del> -		·	<del></del>		· <u> </u>	<del></del>		
	<u> </u>	ļ	ļ <u></u>								