

Confidentiality Requested:

Yes No

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION**

Form ACO-1

January 2018

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

Gas DH EOR

OG GSW

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 EOR Conv. to SWD

Plug Back Liner Conv. to GSW Conv. to Producer

Commingled Permit #: _____

Dual Completion Permit #: _____

SWD Permit #: _____

EOR Permit #: _____

GSW Permit #: _____

Spud Date or Date Reached TD Completion Date or Recompletion Date

API No.: _____

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 Drill Stem Tests Received

Geologist Report / Mud Logs Received

UIC Distribution

ALT I II III Approved by: _____ Date: _____

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 <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Geologist Report / Mud Logs <input type="checkbox"/> Yes <input type="checkbox"/> No List All E. Logs Run: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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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				

1. Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*
2. Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*
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)*

Date of first Production/Injection or Resumed Production/Injection:	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____				
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) (Submit ACO-4)</i>	PRODUCTION INTERVAL: Top Bottom
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Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid, Fracture, Shot, Cementing Squeeze Record <i>(Amount and Kind of Material Used)</i>

TUBING RECORD:	Size:	Set At:	Packer At:	
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Form	ACO1 - Well Completion
Operator	American Warrior, Inc.
Well Name	DEANNA 1-35
Doc ID	1390837

Tops

Name	Top	Datum
Anhydrite	1339	829
Heebner	3653	1485
Lansing	3704	-1536
BKC	4027	-1859
Pawnee	4144	-1976
Ft. Scott	4216	-2048
Cherokee	4240	-2072
Mississippian	4319	-2151
RTD	4360	-2192



DRILL STEM TEST REPORT

Prepared For: **American Warrior, Inc.**

PO Box 399
Garden City KS 67846

ATTN: Jason Alm

Deanna #1-35

35-20S-22W Ness,KS

Start Date: 2018.02.12 @ 06:30:00

End Date: 2018.02.12 @ 13:17:00

Job Ticket #: 63546 DST #: 1

Trilobite Testing, Inc
1515 Commerce Parkway Hays, KS 67601
ph: 785-625-4778 fax: 785-625-5620

Printed: 2018.02.14 @ 13:46:29



TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

American Warrior, Inc.
 PO Box 399
 Garden City KS 67846
 ATTN: Jason Alm

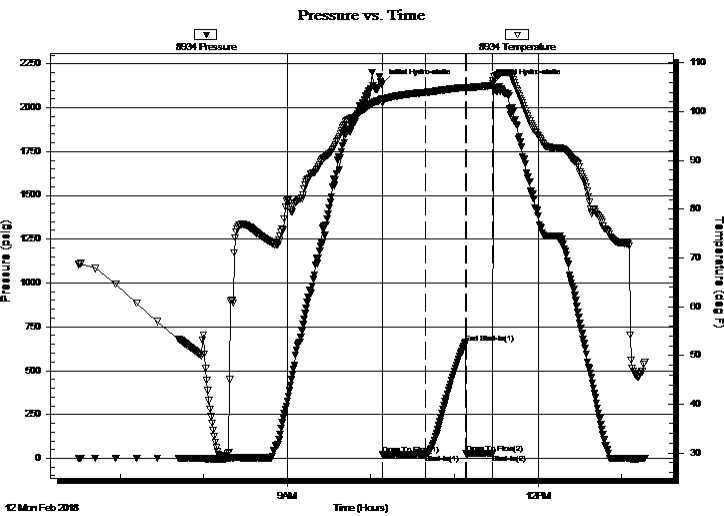
35-20S-22W Ness,KS
Deanna #1-35
 Job Ticket: 63546 **DST#: 1**
 Test Start: 2018.02.12 @ 06:30:00

GENERAL INFORMATION:

Formation: **Mississippi**
 Deviated: No Whipstock: ft (KB)
 Time Tool Opened: 10:08:30
 Time Test Ended: 13:17:00
 Interval: **4260.00 ft (KB) To 4344.00 ft (KB) (TVD)**
 Total Depth: 4344.00 ft (KB) (TVD)
 Hole Diameter: 7.88 inches Hole Condition: Poor
 Test Type: Conventional Bottom Hole (Initial)
 Tester: Spencer J. Staab
 Unit No: 84
 Reference Elevations: 2168.00 ft (KB)
 2160.00 ft (CF)
 KB to GR/CF: 8.00 ft

Serial #: 8934 Inside
 Press@RunDepth: 25.02 psig @ 4264.00 ft (KB) Capacity: 8000.00 psig
 Start Date: 2018.02.12 End Date: 2018.02.12 Last Calib.: 2018.02.12
 Start Time: 06:30:15 End Time: 13:17:00 Time On Btm: 2018.02.12 @ 10:08:15
 Time Off Btm: 2018.02.12 @ 11:27:45

TEST COMMENT: 30-IF-Weak Blow ; Built to 1 1/2"
 30-ISI-No Return
 20-FF-Weak Surface Blow



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2137.04	102.72	Initial Hydro-static
1	21.11	101.86	Open To Flow (1)
32	25.02	103.97	Shut-In(1)
60	659.37	105.02	End Shut-In(1)
60	26.22	104.76	Open To Flow (2)
79	25.29	105.40	Shut-In(2)
80	2135.62	106.35	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
10.00	Mud 100%M	0.05

Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

TOOL DIAGRAM

American Warrior, Inc.

35-20S-22W Ness,KS

PO Box 399
Garden City KS 67846

Deanna #1-35

Job Ticket: 63546

DST#: 1

ATTN: Jason Alm

Test Start: 2018.02.12 @ 06:30:00

Tool Information

Drill Pipe:	Length: 4218.00 ft	Diameter: 3.80 inches	Volume: 59.17 bbl	Tool Weight: 2500.00 lb
Heavy Wt. Pipe:	Length: ft	Diameter: 2.75 inches	Volume: - bbl	Weight set on Packer: 25000.00 lb
Drill Collar:	Length: 31.00 ft	Diameter: 2.25 inches	Volume: 0.15 bbl	Weight to Pull Loose: 70000.00 lb
			<u>Total Volume: - bbl</u>	Tool Chased ft
Drill Pipe Above KB:	17.00 ft			String Weight: Initial 68000.00 lb
Depth to Top Packer:	4260.00 ft			Final 68000.00 lb
Depth to Bottom Packer:	ft			
Interval between Packers:	84.00 ft			
Tool Length:	112.00 ft			
Number of Packers:	1	Diameter: 6.75 inches		

Tool Comments:

Tool Description

Tool Description	Length (ft)	Serial No.	Position	Depth (ft)	Accum. Lengths
Change Over Sub	1.00			4233.00	
Shut In Tool	5.00			4238.00	
Hydraulic tool	5.00			4243.00	
Jars	5.00			4248.00	
Safety Joint	3.00			4251.00	
Packer	5.00			4256.00	28.00 Bottom Of Top Packer
Packer	4.00			4260.00	
Stubb	1.00			4261.00	
Perforations	2.00			4263.00	
Change Over Sub	1.00			4264.00	
Recorder	0.00	9120	Inside	4264.00	
Recorder	0.00	8934	Inside	4264.00	
Drill Pipe	63.00			4327.00	
Change Over Sub	1.00			4328.00	
Perforations	12.00			4340.00	
Bullnose	4.00			4344.00	84.00 Bottom Packers & Anchor
Total Tool Length:	112.00				



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

American Warrior, Inc.

35-20S-22W Ness,KS

PO Box 399
Garden City KS 67846

Deanna #1-35

Job Ticket: 63546

DST#: 1

ATTN: Jason Alm

Test Start: 2018.02.12 @ 06:30:00

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

ppm

Viscosity: 48.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 10.38 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 8600.00 ppm

Filter Cake: inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
10.00	Mud 100%M	0.049

Total Length: 10.00 ft Total Volume: 0.049 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

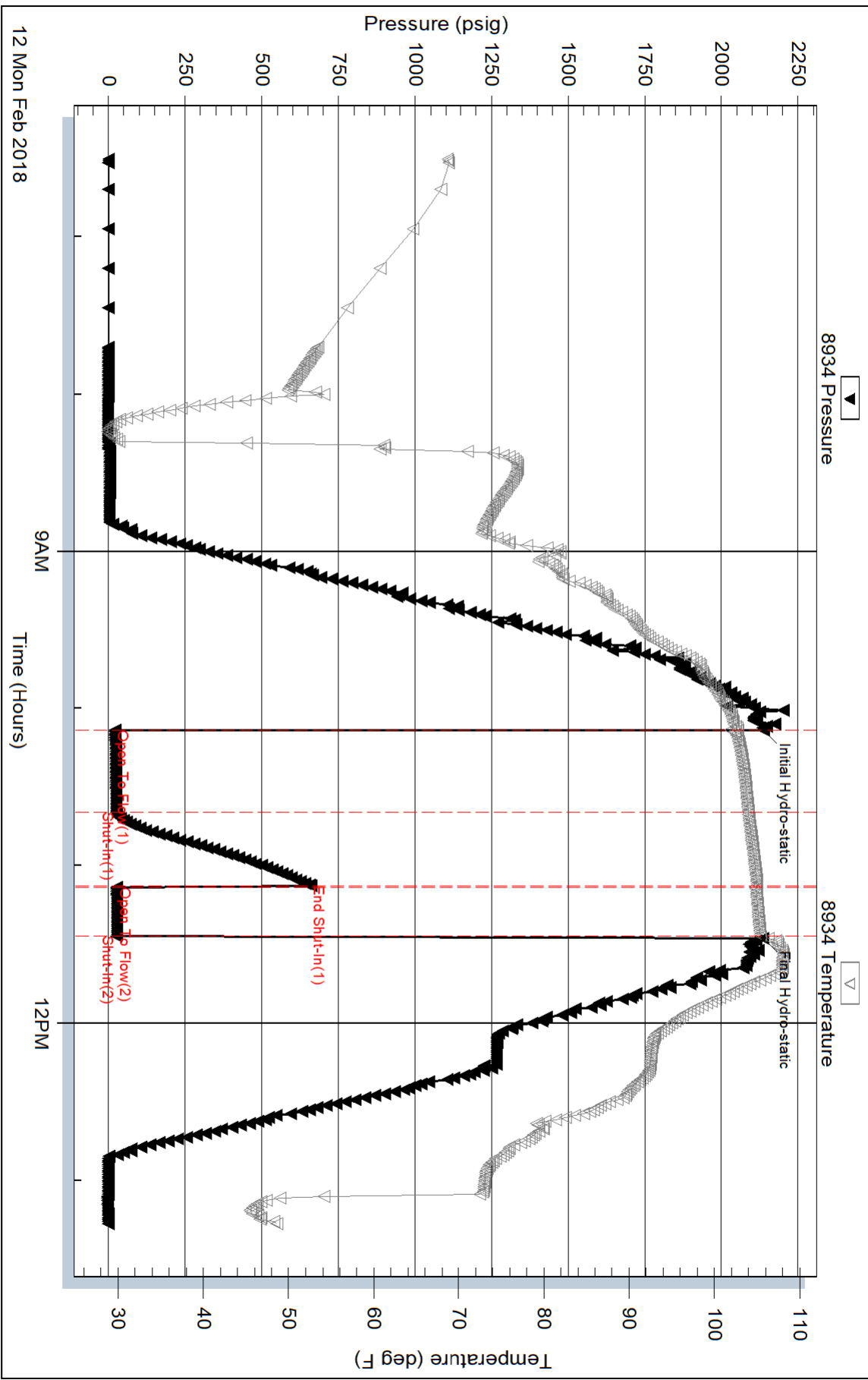
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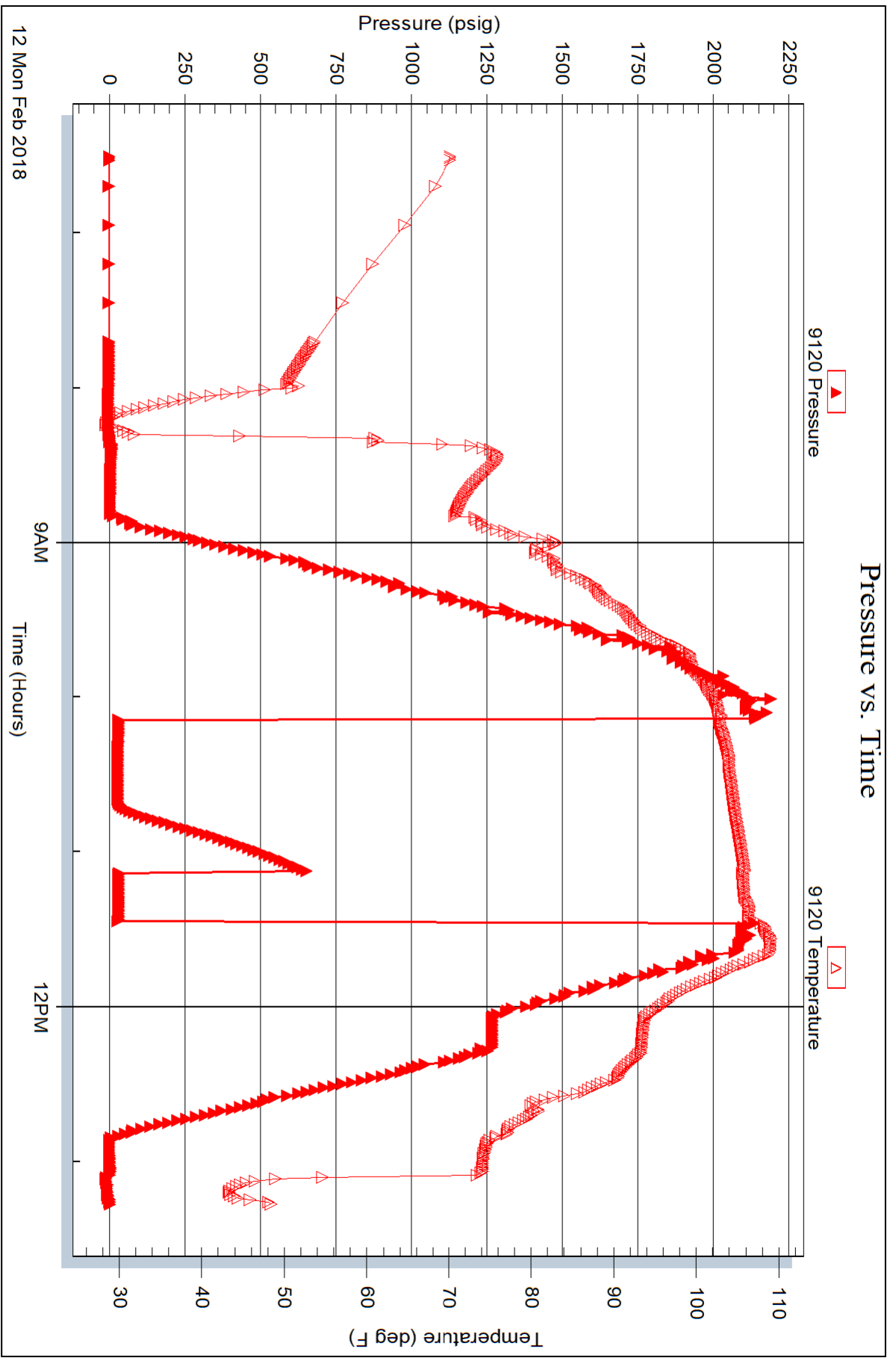
Laboratory Name:

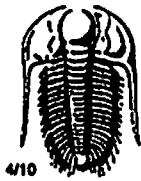
Laboratory Location:

Recovery Comments: 1#LCM

Pressure vs. Time







TRILOBITE TESTING INC.

1515 Commerce Parkway • Hays, Kansas 67601

Test Ticket

NO. 63546

Well Name & No. Deanna # 1-35 Test No. 1 Date 02/12/2018
 Company American Warrior Inc Elevation 2168 KB 2160 GL
 Address PO BOX 399 Garden City Ks 67846
 Co. Rep / Geo. Jason Alm Rig Discovery #4
 Location: Sec. 35 Twp 20s Rge. 22w Co. Wes State Ks

Interval Tested 4260' - 4344' Zone Tested Mississippi
 Anchor Length 84' Drill Pipe Run 4218' Mud Wt. 9.45
 Top Packer Depth 4255' Drill Collars Run 31' Vis 48
 Bottom Packer Depth 4260' Wt. Pipe Run - WL 10.4
 Total Depth 4344' Chlorides 8,600 ppm System LCM 1#

Blow Description 77-Weak Blow; Buill to 1 1/2"
ISD- No Return
77- Weak Surface Blow
7SD- - - -

Rec	Feet of	%gas	%oil	%water	%mud
<u>10'</u>	<u>Mud</u>			<u>100</u>	
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Rec Total 10' BHT 105° Gravity - API RW - @ - ° F Chlorides - ppm

(A) Initial Hydrostatic 2137 Test 1150 T-On Location 05:52
 (B) First Initial Flow 21 Jars 250 T-Started 06:30
 (C) First Final Flow 25 Safety Joint 75 T-Open 10:07
 (D) Initial Shut-In 659 Circ Sub _____ T-Pulled 11:27
 (E) Second Initial Flow 26 Hourly Standby _____ T-Out 13:15
 (F) Second Final Flow _____ Mileage 134 R7 134 Comments graded tools @ 17:40
 (G) Final Shut-In _____ Sampler _____
 (H) Final Hydrostatic 2135 Straddle _____ Ruined Shale Packer _____
 Shale Packer _____ Ruined Packer _____
 Extra Packer _____ Extra Copies _____
 Initial Open 30 Extra Recorder _____ Sub Total 0
 Initial Shut-In 30 Day Standby _____ Total 1609
 Final Flow 20 Accessibility _____ MP/DST Disc't _____
 Final Shut-In - Sub Total 1609

Approved By _____ Our Representative Spencer J. Faust Thanks!
 Trilobite Testing Inc. shall not be liable for damaged or any kind of the property or personnel of the one for whom a test is made, or for any loss suffered or sustained directly or indirectly, through the use of its equipment, or its statements or opinion concerning the results of any test, tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.

785-259-0056

Geological Report

Deanna #1-35

600' FSL & 1000' FEL

Sec. 35 T20s R22w

Ness County, Kansas



American Warrior, Inc.

General Data

Well Data: American Warrior, Inc.
Deanna #1-35
600' FSL & 1000' FEL
Sec. 35 T20s R22w
Ness County, Kansas
API # 15-125-25989-0000

Drilling Contractor: Discovery Drilling Co. Inc. Rig #4

Geologist: Jason T Alm

Spud Date: February 5, 2018

Completion Date: February 13, 2018

Elevation: 2160' Ground Level
2168' Kelly Bushing

Directions: Bazine KS, South 11 mi. to 20 Rd. West 1 mi. to
CC Rd. South 2 mi. to county line Rd. West ½ mi.
North into location.

Casing: 211' 8 5/8" surface casing

Samples: 10' wet and dry, 3950' to RTD

Drilling Time: 3600' to RTD

Electric Logs: None

Drillstem Tests: One, Trilobite Testing, Inc. "Spencer Staab"

Problems: None

Remarks: None

Formation Tops

Formation	American Warrior, Inc.
	Deanna #1-35
	Sec. 35 T20s R22w
	600' FSL & 1000' FEL
Anhydrite	1339' +829
Base	1372' +796
Heebner	3653' -1485
Lansing	3704' -1536
BKC	4027' -1859
Pawnee	4144' -1976
Fort Scott	4216' -2048
Cherokee	4240' -2072
Mississippian	4319' -2151
Osage	4335' -2167
RTD	4336' -2147

Sample Zone Descriptions

Mississippian Osage (4335', -2167): **Covered in DST #1**
 Dolo – Δ – Fine crystalline with scattered poor vuggy porosity, light very scattered spotted oil stain, no show of free oil, light odor, heavy chert, white to light gray, fresh and angular, 8-10 units hotwire.

Drill Stem Tests

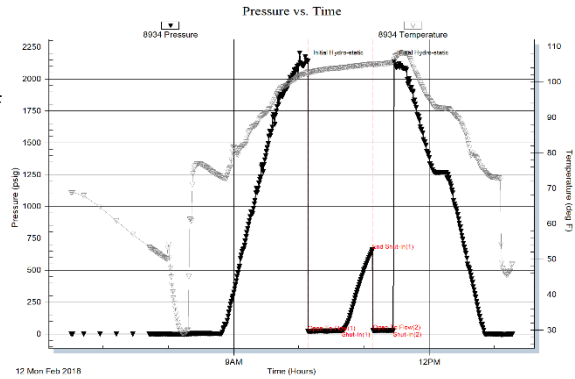
Trilobite Testing, Inc.
"Spencer Staab"

DST #1 Mississippian Osage

Interval (4260' – 4344') Anchor Length 84'

IHP	– 2097 #	
IFP	– 30" – Built to 1 ½ in.	21-25 #
ISI	– 30" – Dead	659 #
FFP	– 20" – W.S.B.	26 #
FHP	– 2136 #	
BHT	– 106°F	

Recovery: 10' Mud



Structural Comparison

	American Warrior, Inc. Deanna #1-35 Sec. 35 T20s R22w 600' FSL & 1000' FEL	Hutchinson Oil Co. Cox #1-35 Sec. 35 T20s R22w 990' FSL & 2970' FEL		Falcon Exploration Shank #1 Sec. 36 T20s R22w 1980' FSL & 2970' FEL
Formation				
Anhydrite	1339' +829	1348' +821	(+8)	1338' +833 (-4)
Base	1372' +796	1382' +787	(+9)	1371' +800 (-4)
Heebner	3653' -1485	3661' -1492	(+7)	3652' -1481 (-4)
Lansing	3704' -1536	3711' -1542	(+6)	3702' -1531 (-5)
BKC	4027' -1859	NA	NA	4020' -1849 (-10)
Pawnee	4144' -1976	NA	NA	NA NA
Fort Scott	4216' -2048	4229' -2060	(+12)	4212' -2041 (-7)
Cherokee	4240' -2072	NA	NA	NA NA
Mississippian	4319' -2151	4306' -2137	(-14)	4282' -2111 (-40)
Osage	4335' -2167	4326' -2157	(-10)	4319' -2148 (-19)

Summary

The location for the Deanna #1-35 was found via 3-D seismic survey. The new well ran structurally as expected via the survey on all datums except the Mississippian. One Drill Stem Test was conducted, results were negative. After all gathered data was examined the decision was made to plug and abandon the Deanna #1-35 well.

Respectfully Submitted,

Jason T Alm
Hard Rock Consulting, Inc.

DATE 2-5-18	PAGE 1
TICKET NO. # 31224	

JOB LOG

SWIFT Services, Inc.

CUSTOMER: *W. W. W. Co. - 6-2-10-10* WELL NO: *17-35* LEASE: *Q. W. W.* JOB TYPE: *Service*

CHART NO.	TIME	RATE (GPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	2000							on location 8 7/8" 2 3/4"
								RID-212" TP-212"
	2015							Start 8 7/8" 2 3/4" casing in well
	2107							Place Circulation
	2150	4 1/2	5		✓		150	Pump SHJ 100-100 Spx
	2125	4 1/2	36		✓		100	mix 150 gal SHJ 2 1/2 Gal 30cc @ 112
	2140	4 1/2	0		✓		100	Start Displacement
		4 1/2	8		✓		250	Circulate Cement to surface - * 2 1/2" d.
	2145	4 1/2	13		✓		200	Kick out Pump * Start in *
								wash up truck
	2215							Job Complete

Thank You
Drew Hodson Texas



CHARGE TO: *Professional Services Inc.*
 ADDRESS:
 CITY, STATE, ZIP CODE:

INVOICE #
 PAGE 1 OF 1

SERVICE LOCATION: *1111 S. 1st St*
 WELLPROVIST NO: *1111* LEASE: *1111* COUNTY/STATE: *1111* STATE: *KS* DATE: *1-13-16* OWNER: *SWIFT*
 TRIST TIME: *1111* CONTRACTOR: *1111* JOB NAME NO: *1111* SHIPPED: *1111* DELIVERED TO: *1111* ORDER NO.: *1111*
 WELL TYPE: *Oil* WELL CATEGORIES: *Development* JOB PURPOSE: *PFA* WELL PERMIT NO.: *1111* WELL LOCATION: *1111*
 INVOICE INSTRUCTIONS:

PRICE REFERENCE	SECONDARY PART NUMBER	ACCOUNTING	DESCRIPTION	QTY	UNIT	QTY	UNIT	QTY	UNIT	UNIT PRICE	AMOUNT
<i>575</i>			<i>MILEAGE</i>	<i>25</i>	<i>mi</i>	<i>25</i>	<i>mi</i>			<i>5.75</i>	<i>143.75</i>
<i>575 P</i>			<i>Permit Charge - PFA</i>	<i>1</i>		<i>1</i>				<i>143.75</i>	<i>143.75</i>
<i>575-11</i>			<i>D-501-C Permit (1-13-16)</i>	<i>1</i>		<i>1</i>				<i>143.75</i>	<i>143.75</i>
<i>576</i>			<i>Excise</i>	<i>3</i>	<i>per</i>	<i>3</i>	<i>per</i>			<i>41.25</i>	<i>123.75</i>
<i>580</i>			<i>D-Air</i>								
<i>581</i>			<i>Service Charge (Permit)</i>								
<i>582</i>			<i>Minimum Design Charge</i>								

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions.

MATERIALS AND SERVICES: The customer hereby acknowledges receipt of the materials and services listed on this invoice.

DATE SIGNED: *1-13-16* TIME SIGNED: *11:30 AM* BY: *1111*

PERMIT PAYMENT TO:
 SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY: YES NO

CUSTOMER DID NOT WANT TO RESPOND: YES NO

PAGE TOTAL: *4651*

TOTAL: *4843.62*

SWIFT OPERATOR: *1111* APPROVAL: *1111*

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE 2-12-18
TICKET NO. 31231

CUSTOMER Adrian W. Jones		WELL NO. #1-35		LEASE C. Jones		JOB TYPE PTA		DESCRIPTION OF OPERATION AND MATERIALS	
CHART NO.	TIME	RATE (GPM)	VOLUME (BBL) (GAL)	PUMPS (C)	PRESSURE (PSI) TUBING CASING				
	2100							can location 4 1/2" x 7 7/8"	
								FSD-4 1/2" DP-1380'	
	2230	4 1/2	13	✓	100			mix 50 lbs @ 1580'	
		4 1/2	16	✓	100			Displace Cement	
	2240							12:11 DP	
	2305	4 1/2	21	✓	100			mix 80 lbs @ 570'	
		4 1/2	3	✓	100			Displace Cement	
	2315							Pull DP	
	2325	4 1/2	13	✓	100			mix 50 lbs @ 270'	
		4 1/2	12	✓	100			Displace Cement	
	2330							Pull DP	
2-12-18	0050	4 1/2	5 1/4	✓	100			mix 20 lbs @ 10'	
	0115		8-5 1/4					Plug 1311-1711 (30 lbs @ 20 min)	
	0100							Job - 250 lbs 60/40 Pumps 4 1/2" (2 1/2" x 1 1/2" x 1/2") Plug complete wash up truck	
	0130							Job Complete	
								Thank You Diane Bralton Kieley	