

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
--	---

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
---	--	------------------------------------

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:	
----------------	-------	---------	------------	--



*Tabling*

# NOVY OIL AND GAS, INC.

## PIPE TALLEY

DATE 3/27/2018 PAGE 1 OF 1

WELL NAME AND NUMBER MURST # 1 SWD

ITEM	SIZE	2 1/2 WT.	6.5	GRADE	API	THREAD	8 RD								
JT NO	FT. IN	JT NO	FT. IN	JT NO	FT. IN	JT NO	FT. IN	JT NO	FT. IN	JT NO	FT. IN	JT NO	FT. IN	JT NO	FT. IN
1	31.85	21	31.98	41	31.82	61	30.92	81	30.95	101	31.23	121	31.11	141	
2	31.46	22	30.95	42	31.12	62	31.24	82	31.15	102	29.20	122	30.95	142	
3	31.51	23	31.45	43	31.27	63	30.95	83	28.30	103	30.78	123	31.31	143	
4	31.11	24	31.40	44	29.14	64	30.93	84	30.94	104	28.37	124	30.98	144	
5	31.50	25	30.95	45	31.16	65	31.17	85	31.41	105	31.79	125	30.94	145	
6	31.42	26	31.76	46	31.80	66	31.42	86	31.15	106	31.44	126	30.94	146	
7	29.35	27	31.41	47	31.45	67	31.08	87	31.13	107	31.42	127	2.95	147	ADL-1
8	31.72	28	31.13	48	31.47	68	30.93	88	31.28	108	30.67	128		148	
9	31.50	29	31.45	49	31.47	69	31.15	89	31.42	109	31.10	129		149	
10	31.53	30	28.17	50	31.55	70	29.60	90	31.13	110	30.95	130		150	
11	31.40	31	30.93	51	31.41	71	31.28	91	31.91	111	30.90	131		151	
12	31.54	32	30.93	52	31.48	72	31.21	92	31.40	112	31.16	132		152	
13	31.44	33	30.89	53	31.55	73	30.95	93	31.18	113	30.96	133		153	
14	31.83	34	31.27	54	32.19	74	31.15	94	31.19	114	28.17	134		154	
15	31.56	35	30.93	55	31.92	75	30.92	95	31.41	115	31.13	135		156	
16	31.47	36	31.19	56	31.57	76	30.93	96	31.76	116	30.93	136		157	
17	30.99	37	32.64	57	31.43	77	30.96	97	31.43	117	31.18	137		158	
18	31.45	38	30.95	58	31.55	78	31.18	98	31.27	118	31.25	138		159	
19	31.38	39	31.45	59	31.50	79	31.51	99	30.93	119	31.00	139		160	
20	30.70	40	30.95	60	31.40	80	30.96	100	31.19	120	31.16	140		161	
TOTAL	626.71		622.78		628.25		620.44		622.53		614.79		189.18		0.00

BHA	TOOLS.		
1	626.71		
2	622.78		
3	628.25		
4	620.44		
5	622.53		
6	614.79		
7	189.18		
8	0.00		

KB 5.00 0  
TOTAL 3929.68

JT NO	JT NO	JT NO	JT NO	JT NO	JT NO	JT NO	JT NO	JT NO	JT NO	JT NO	JT NO	JT NO	JT NO	JT NO	JT NO
1	-31.85	21	-658.69	41	-1281.31	61	-1908.66	81	-2529.13	101	-3151.94	121	-3766.61	141	-3924.68
2	-63.31	22	-689.64	42	-1312.43	62	-1939.90	82	-2560.28	102	-3181.14	122	-3797.56	142	-3924.68
3	-94.82	23	-721.09	43	-1343.70	63	-1970.85	83	-2588.58	103	-3211.92	123	-3828.87	143	-3924.68
4	-125.93	24	-752.49	44	-1372.84	64	-2001.78	84	-2619.52	104	-3240.29	124	-3859.85	144	-3924.68
5	-157.43	25	-783.44	45	-1404.00	65	-2032.95	85	-2650.93	105	-3272.08	125	-3890.79	145	-3924.68
6	-188.85	26	-815.20	46	-1435.80	66	-2064.37	86	-2682.08	106	-3303.52	126	-3921.73	146	-3924.68
7	-218.20	27	-846.61	47	-1467.25	67	-2095.45	87	-2713.21	107	-3334.94	127	-3924.68	147	-3924.68
8	-249.92	28	-877.74	48	-1498.72	68	-2126.38	88	-2744.49	108	-3365.61	128	-3924.68	148	-3924.68
9	-281.42	29	-909.19	49	-1530.19	69	-2157.53	89	-2775.91	109	-3396.71	129	-3924.68	149	-3924.68
10	-312.95	30	-937.36	50	-1561.74	70	-2187.13	90	-2807.04	110	-3427.66	130	-3924.68	150	-3924.68
11	-344.35	31	-968.29	51	-1593.15	71	-2218.41	91	-2838.95	111	-3458.56	131	-3924.68	151	-3924.68
12	-375.89	32	-999.22	52	-1624.63	72	-2249.62	92	-2870.35	112	-3489.72	132	-3924.68	152	-3924.68
13	-407.33	33	-1030.11	53	-1656.18	73	-2280.57	93	-2901.53	113	-3520.68	133	-3924.68	153	-3924.68
14	-439.16	34	-1061.38	54	-1688.37	74	-2311.72	94	-2932.72	114	-3548.85	134	-3924.68	154	-3924.68
15	-470.72	35	-1092.31	55	-1720.29	75	-2342.64	95	-2964.13	115	-3579.98	135	-3924.68	155	-3924.68
16	-502.19	36	-1123.50	56	-1751.86	76	-2373.57	96	-2995.89	116	-3610.91	136	-3924.68	156	-3924.68
17	-533.18	37	-1156.14	57	-1783.29	77	-2404.53	97	-3027.32	117	-3642.09	137	-3924.68	157	-3924.68
18	-564.63	38	-1187.09	58	-1814.84	78	-2435.71	98	-3058.59	118	-3673.34	138	-3924.68	158	-3924.68
19	-596.01	39	-1218.54	59	-1846.34	79	-2467.22	99	-3089.52	119	-3704.34	139	-3924.68	159	-3924.68
20	-626.71	40	-1249.49	60	-1877.74	80	-2498.18	100	-3120.71	120	-3735.50	140	-3924.68	160	-3924.68

COSINS

**NOVY OIL AND GAS, INC.**

**PIPE TALLEY**

DATE 3/22/2018 PAGE 1 OF 1

WELL NAME AND NUMBER Hurst # 2 SWD

ITEM liner SIZE 5-1/2 WT. 15.14 GRADE API THREAD 8 RD

JT NO	FT. IN	JT NO	FT. IN	JT NO	FT. IN	JT NO	FT. IN	JT NO	FT. IN	JT NO	FT. IN	JT NO	FT. IN	JT NO	FT. IN
1	41.67	21	40.40	41	43.02	61	42.21	81	43.26	101		121		141	
2	43.45	22	39.18	42	37.80	62	42.35	82	43.26	102		122		142	
3	40.98	23	41.92	43	38.70	63	42.15	83	43.28	103		123		143	
4	39.74	24	42.28	44	38.75	64	43.44	84	37.09	104		124		144	
5	39.22	25	41.80	45	43.61	65	43.26	85	43.61	105		125		145	
6	43.44	26	39.75	46	40.25	66	43.16	86	43.37	106		126		146	
7	39.89	27	42.20	47	40.77	67	43.27	87	43.26	107		127		147	
8	34.02	28	36.45	48	35.38	68	43.28	88	43.45	108		128		148	
9	42.66	29	41.43	49	39.44	69	40.70	89	43.28	109		129		149	
10	38.38	30	36.50	50	40.76	70	42.23	90	43.28	110		130		150	
11	42.05	31	40.42	51	39.88	71	43.37	91	43.36	111		131		151	
12	42.92	32	43.17	52	42.98	72	43.27	92	43.44	112		132		152	
13	38.33	33	33.28	53	41.19	73	43.22	93	42.98	113		133		153	
14	42.41	34	32.12	54	43.26	74	43.28	94	43.00	114		134		154	
15	42.50	35	32.57	55	43.30	75	39.65	95	43.17	115		135		156	
16	40.66	36	28.27	56	43.13	76	43.31	96	43.41	116		136		157	
17	41.38	37	40.34	57	43.35	77	43.27	97		117		137		158	
18	39.94	38	32.38	58	43.42	78	43.36	98		118		138		159	
19	37.42	39	39.36	59	43.23	79	43.30	99		119		139		160	
20	37.92	40	42.18	60	43.22	80	43.28	100		120		140		161	
TOTAL	808.98		766.00		825.44		855.36		686.50		0.00		0.00		0.00

BHA	TOOLS.
1	808.98
2	766.00
3	825.44
4	855.36
5	686.50
6	0.00
7	0.00
8	0.00

KB 5.00 0  
TOTAL 3947.28

JT NO	FT. IN	JT NO	FT. IN	JT NO	FT. IN	JT NO	FT. IN	JT NO	FT. IN	JT NO	FT. IN	JT NO	FT. IN	JT NO	FT. IN
1	-41.67	21	-849.38	41	-1618.00	61	-2442.63	81	-3299.04	101	-3942.28	121	-3942.28	141	-3942.28
2	-85.12	22	-888.56	42	-1655.80	62	-2484.98	82	-3342.30	102	-3942.28	122	-3942.28	142	-3942.28
3	-126.10	23	-930.48	43	-1694.50	63	-2527.13	83	-3385.58	103	-3942.28	123	-3942.28	143	-3942.28
4	-165.84	24	-972.76	44	-1733.25	64	-2570.57	84	-3422.67	104	-3942.28	124	-3942.28	144	-3942.28
5	-205.06	25	-1014.56	45	-1776.86	65	-2613.83	85	-3466.28	105	-3942.28	125	-3942.28	145	-3942.28
6	-248.50	26	-1054.31	46	-1817.11	66	-2656.99	86	-3509.65	106	-3942.28	126	-3942.28	146	-3942.28
7	-288.39	27	-1096.51	47	-1857.88	67	-2700.26	87	-3552.91	107	-3942.28	127	-3942.28	147	-3942.28
8	-322.41	28	-1132.96	48	-1893.26	68	-2743.54	88	-3596.36	108	-3942.28	128	-3942.28	148	-3942.28
9	-365.07	29	-1174.39	49	-1932.70	69	-2784.24	89	-3639.64	109	-3942.28	129	-3942.28	149	-3942.28
10	-403.45	30	-1210.89	50	-1973.46	70	-2826.47	90	-3682.92	110	-3942.28	130	-3942.28	150	-3942.28
11	-445.50	31	-1251.31	51	-2013.34	71	-2869.84	91	-3726.28	111	-3942.28	131	-3942.28	151	-3942.28
12	-488.42	32	-1294.48	52	-2056.32	72	-2913.11	92	-3769.72	112	-3942.28	132	-3942.28	152	-3942.28
13	-526.75	33	-1327.76	53	-2097.51	73	-2956.33	93	-3812.70	113	-3942.28	133	-3942.28	153	-3942.28
14	-569.16	34	-1359.88	54	-2140.77	74	-2999.61	94	-3855.70	114	-3942.28	134	-3942.28	154	-3942.28
15	-611.66	35	-1392.45	55	-2184.07	75	-3039.26	95	-3898.87	115	-3942.28	135	-3942.28	155	-3942.28
16	-652.32	36	-1420.72	56	-2227.20	76	-3082.57	96	-3942.28	116	-3942.28	136	-3942.28	156	-3942.28
17	-693.70	37	-1461.06	57	-2270.55	77	-3125.84	97	-3942.28	117	-3942.28	137	-3942.28	157	-3942.28
18	-733.64	38	-1493.44	58	-2313.97	78	-3169.20	98	-3942.28	118	-3942.28	138	-3942.28	158	-3942.28
19	-771.06	39	-1532.80	59	-2357.20	79	-3212.50	99	-3942.28	119	-3942.28	139	-3942.28	159	-3942.28
20	-808.98	40	-1574.98	60	-2400.42	80	-3255.78	100	-3942.28	120	-3942.28	140	-3942.28	160	-3942.28



# COPELAND

## Acid & Cement

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

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

**Invoice**

Page: 1

INVOICE NUMBER:  
**C45672-IN**

**BILL TO:**  
 NOVY OIL & GAS, INC.  
 P.O. BOX 559  
 GODDARD, KS 67052

LEASE: HURST #1 SWD

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE ORDER	SPECIAL INSTRUCTIONS	
03/29/2018	C45672		03/23/2018		NET 30	
QUANTITY	U/M	ITEM NO./DESCRIPTION		D/C	PRICE	EXTENSION
40.00	MI	MILEAGE CEMENT PUMP TRUCK		15.00	4.00	136.00
40.00	MI	MILEAGE PICKUP		15.00	2.00	68.00
1.00	EA	PUMP CHARGE		15.00	950.00	807.50
350.00	SK	65/35 POZ MIX 2% GEL		15.00	10.75	3,198.13
21.00	SK	4% ADDITIONAL GEL		15.00	22.00	392.70
200.00	LB	FRICTION REDUCER C-37		15.00	4.00	680.00
1.00	LB	5 1/2 FLOAT SHOE		15.00	285.00	242.25
1.00	LB	5 1/2" WIRE PLUG		15.00	65.00	55.25
390.00	EA	BULK CHARGE		15.00	1.25	414.38
646.00	MI	BULK TRUCK - TON MILES		15.00	1.10	604.01
<b>REMIT TO:</b> P.O. BOX 438 HAYSVILLE, KS 67060		COP		Net Invoice:		6,598.22
RECEIVED BY _____		FUEL SURCHARGE IS NOT TAXABLE AND IS ADDED TO MILEAGE, PUMP AND OR DELIVERY CHARGES ONLY.		RENCO Sales Tax:		129.24
		<b>NET 30 DAYS</b>		Invoice Total:		<b>6,727.46</b>

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

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 45672

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

IS AUTHORIZED BY: Navy Gil DATE 3/23/12 20

Address \_\_\_\_\_ (NAME OF CUSTOMER)

To Treat Well \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

As Follows: Lease Hurst Well No. SWD Customer Order No. \_\_\_\_\_

Sec. Twp. \_\_\_\_\_ Range \_\_\_\_\_

County Reva 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	40	milessc pump truck	4.00	160.00
2	40	milessc pickup	2.00	80.00
2	1	Pump Charge - 6000		950.00
2	350	65/35 ppc. 2% sol.	10.75	3,762.50
2	1821	4% additional gel.	22.00	<del>40,062.00</del>
2	200	(-37)	4.00	800.00
2	1	5 1/2" float shoe		285.00
2	1	5 1/2" Luper Plus		65.00
2	390	Bulk Charge		
2		Bulk Truck Miles 16.15 T x 40 = 646 Tm x 1.19	1.25	487.50
		Process License Fee on _____ Gallons	1.19	710.60
TOTAL BILLING			152	7,526.60
				-1137.99
				6448.61

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 Nathan W.

Station G.O.

Remarks \_\_\_\_\_

Kirk G.  
Well Owner, Operator or Agent

NET 30 DAYS