

ALLIED CEMENTING CO., LLC. 044137

Federal Tax I.D.# 20-5975804

SERVICE POINT: OAKLEY

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

DATE <u>10-19-12</u>	SEC. <u>27</u>	TWP. <u>13S</u>	RANGE <u>31W</u>	CALLED OUT	ON LOCATION <u>3:00 PM</u>	JOB START <u>4:15 PM</u>	JOB FINISH <u>4:45 PM</u>
GLENN'S LEASE	WELL # <u>3-27</u>	LOCATION <u>OAKLEY 115-5E-3S-16-16S</u>		COUNTY <u>GOVE</u>	STATE <u>KS</u>		
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR <u>1.44610 DRLG RES # 24</u>	OWNER <u>SAME</u>
TYPE OF JOB <u>SURFACE</u>	CEMENT AMOUNT ORDERED <u>165 SKS COM 380 CL 280 901</u>
HOLE SIZE <u>12 1/4" TD. 220</u>	COMMON <u>165 SKS</u>
CASING SIZE <u>8 7/8" DEPTH 220</u>	POZ MIX
TUBING SIZE DEPTH	OEL <u>3 SKS</u>
DRILL PIPE DEPTH	CHLORIDE <u>6 SKS</u>
TOOL DEPTH	ASC
PRBS. MAX MINIMUM	
MBAS. LINE SHOE JOINT	
CEMENT LEFT IN CSG. <u>15"</u>	
PERFS.	
DISPLACEMENT <u>13 BALS</u>	

EQUIPMENT	
PUMP TRUCK # <u>422</u>	CEMENTER <u>TERRY HEINRICH</u>
BULK TRUCK # <u>373-308</u>	HELPER <u>BRANDON WILKINSON</u>
BULK TRUCK #	DRIVER <u>THOMAS + PAUL BEAVER</u>
BULK TRUCK #	DRIVER <u>(THIS)</u>
HANDLING <u>178.42 CUFT</u>	
MILEAGE <u>8.142 X 21 X</u>	

REMARKS:
Hook up to 8 7/8" casing. Break circulation + circ 10 min mix 165 SKS COM 380 CL 280 901. DISPLACE with 100% WATER.
Cement did circulate
Thank You

CHARGE TO: Grand Mesa
 STREET _____
 CITY _____ STATE _____ ZIP _____

170.98
 SERVICE
 DEPTH OF JOB 220"
 PUMP TRUCK CHARGE
 EXTRA FOOTAGE @
 MILEAGE 21 @
 MANIFOLD Swedge @
 LIGHT VEHICLE 21 @
 TOTAL _____

PLUG & FLOAT EQUIPMENT
 _____ @
 _____ @
 _____ @
 _____ @
 _____ @
 TOTAL _____

To Allied Cementing Co., LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME Anthony Martin
 SIGNATURE Anthony Martin

SALES TAX (If Any) _____
 TOTAL CHARGES 6,336.08
 DISCOUNT _____ IF PAID IN 30 DAYS
 2570

Pro-Stim Chemicals LLC

Acidizing Report

Date 11/13/12

Customer <u>Grand Mesa</u>	Pro-Stim Chemical Yard <u>Dighton</u>	Pro-Stim Number
Well Name & Number <u>Glenis #3</u>	Field	Formation
County <u>Gove</u> State <u>KS</u>	BHT	YD
		Interval <u>4376-80</u>

Well Type: Completion Recompletion Workover Oil Gas Water Disposal Perf OH

Job Pumped Via: Tubing <input checked="" type="checkbox"/> Casing <input type="checkbox"/> Annulus <input type="checkbox"/> CTU <input type="checkbox"/> Combination <input type="checkbox"/>	Plug Depth <u>NA</u>	Packer Depth <u>4320</u>
Casing Size: <u>5 1/2</u>	GRD	WT
Casing Vol.	Tbg Vol	Ann Vol
Maximum Pressure	Tubing	Casing
	Proposed Pump Time	AOL
		Leave Loc

Special Instructions:
250 15% RWR-1
2 Gal Pas-C
30 BBLs 2% KCL

Treatment Record

Time	Type Fluid	Rate BMP	Increment Vol Ebbs	Cum Vol Ebbs	Pressure		Observations
					Tubing	Casing	
							Safety Meeting
1	Acid						Prs Test to _____ psi
21	Acid	3.0		3	0		
22	Acid	3.0		6	0		Acid gone
24	Flush	3.0		11	0		
26	Flush	3.0		19	0		
28	Flush	3.0		26.6	10		Well loaded
29	Flush	0		26.6	250		
35	Flush	0		26.7	250		
41	Flush	0		26.7	500		
47	Flush	0		26.9	500		
55	Flush	0		27	650		
60	Flush	0		27.1	700		
68	Flush	0		27.3	800		
78	Flush	0		27.3	900		
85	Flush	0		27.4	900		
95	Flush	0		27.5	900		
100	Flush	.30		27.9	600		
105	Flush	1.75		30	0		
110	Flush	1.75		33	0		

Treatment Synopsis

Avg Inj Rate	Fluid BPM <u>1.0</u>	Total Injected		H2O <u>26.6</u>	Acid <u>6</u>	Oil
Treating Prs	Max <u>9:00</u>	Final <u>0</u>	Avg. <u>700</u>	ISIP <u>0</u>	5'SI	10'SI
Customer Representative				Pro-Stim Supervisor		