

COPELAND

Acid & Cement

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

Invoice

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

INVOICE NUMBER:
C46972-IN

BILL TO:
CARMEN SCHMITT, INC.
PO BOX 47
GREAT BEND, KS 67530

LEASE: ~~TATE~~ #1

Kate #1

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE ORDER	SPECIAL INSTRUCTIONS	
07/15/2019	46972		07/11/2019	TATE #1	NET 30	
QUANTITY	U/M	ITEM NO./DESCRIPTION		D/C	PRICE	EXTENSION
10.00	MI	MILEAGE CEMENT PUMP TRUCK		15.00	4.00	34.00
1.00	EA	PUMP CHARGE-PTA		15.00	650.00	552.50
215.00	SK	60/40 POZ MIX 2% GEL		15.00	11.25	2,055.94
4.00	SK	2% ADDITIONAL GEL		15.00	22.00	74.80
100.00	LB	COTTONSEED HULLS		15.00	0.40	34.00
221.00	EA	BULK CHARGE		15.00	1.25	234.81
1.00	MI	BULK TRUCK - TON MILES-MIN CHG		15.00	150.00	127.50
		<p><i>7/10/43</i> <i>16,375.0001</i> <i>Well Rite</i> <i>Cement to Plug Well</i></p>				
REMIT TO: P.O. BOX 438 HAYSVILLE, KS 67060		COP		Net Invoice:		3,113.55
		FUEL SURCHARGE IS NOT TAXABLE AND IS ADDED TO MILEAGE, PUMP AND OR DELIVERY CHARGES ONLY.		STFCO Sales Tax:		233.52
RECEIVED BY		NET 30 DAYS		Invoice Total:		3,347.07

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 46972

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

DATE 7-11 2019

IS AUTHORIZED BY: Carmen Schmitt Inc
(NAME OF CUSTOMER)

Address _____ City _____ State _____

To Treat Well As Follows: Lease 79c Well No. 1 Customer Order No. _____

Sec. Twp. Range _____ County Stafford 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	10	Mileage Pump Truck	4 ⁰⁰	40 ⁰⁰
2	10	Pump Charge - PTA		650 ⁰⁰
2	215	Sacks 60/40 2% Gel	11 ²⁵	2418 ⁷⁵
2	4	Additional 2% Gel	22 ⁰⁰	88 ⁰⁰
2	100	Pounds Cotton Seed Hulls	0 ⁴⁰	40 ⁰⁰
2	221	Bulk Charge	1 ²⁵	276 ²⁵
2		Bulk Truck Miles 9.7247 x 10 miles = 97.247	Min	150 ⁰⁰
		Process License Fee on _____ Gallons		
		TOTAL BILLING		3663 ⁰⁰

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 Greg Li
Station 6B

Discount 3113.55
Amount
Danny Schultz
Well Owner, Operator or Agent

Remarks _____

NET 30 DAYS

