

FIELU ORDER

N° C

47162

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

Sec. Twp. Range		County RUSH	State	KS
TO TREAT WELL AS FOLLOWS Lease	TORREY TWIN	Well No. 2	Customer Order No.	
Address		City	State	
IS AUTHORIZED BY:	BEAR PETRO	(NAME OF CUSTOMER)		
		010 024 1220	DATE	30-Aug 20 19

CONDITIONS: As a part of the consideration hereof it is agreed that Copaland Acid is to service or treat at owners risk, the hardindeline maniform maniform and is not to be held liable for any damage that may accrue in connection with said service or treatment. Copaland 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 slowed subsequent to such date. 8% Interest will be charged after 60 days. Total charges are subject to correction by our trivioling 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

		Well Owner or Operator	Agent		
CODE	QUANTITY	DESCRIPTION	COST	AMOUNT	
20.0002	30	Mileage P.T.	\$4.00	\$120.00	
20.0003	1.	Pump Charge Plug	\$650.00	\$650.00	
20.1002	125	60/40 Poz 2% Gel	\$11.25	\$1,406.28	
20.1004	2	Add. Gel after 2% Per Sack	\$22.00	\$44.00	
20.1017	200	Hulls per tb.	\$0.40	\$80.00	
20.0011	131	Bulk Charge	\$ 1.25	\$163.75	
20.0012	172.92		\$1.10	\$103.75 \$190.21	
		Process License Fee on Gellons	V 1. 10	\$ 180.21	
		TOTAL BILLING		\$2,654.21	

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.

Copelan	d Representative	GREG C.		
Station	GB		DICK S.	
Remarks	i			Well Owner, Operator or Agent

NET 30 DAYS



TREATMENT REPORT

Acid (& Cemer	it 🕿							Acid Stage 16	o	
					Type Treatment:	Amt.		Type Fluid	Sand Size	Poun	ds of Send
Dete 8	3/30/2019	District GB	F.O. 9	to. C47162	Blidown	8b	i./Gal.				
	BEAR PETRO				<u> </u>		i./Gal.				
Well Nam	e & No. TORRE	Y TWIN #2									
Location			Field		<u> </u>	66	i./Gal.			_	
County	RUSH		State KS		Flush	8t	il./Gal.				
					Treated from		1	ft. to	ft.	No. R.	0
Casing:	Size 41/	/2 Type & Wt.		Set at ft.	from			ft. to		No. ft.	0
Formation			Perf.		from			ft. to	ft.	No. ft.	0
Formation	ı.		Perf.	to	Actual Volume of C	Oil / Water to L	Loed Hol	e :			Bbi./Gal.
						 					=
Formation			Perf.	Bottom atft.	Puma Tourks	No lited: St	nd.	320 Sa		Twin	
			from		ft. Pump Trucks. No. Used: Std. 320 Sp. Twin						
			Swung at		Personnel GREG			•			
	Perforated		ft. to		Auditory Tools						_
					Plugging or Sealing	Materials:	Time			•	
Open Hok	e fine	T.D.	4	.8. to ft.	4	; resultation seems;	TYPE _		Gals	·	lb.
		1.0.		.5. 0	<u> </u>						
·.			DICK S		Treater			GREG	: c		
TOME	Representative		T DICK ;). 				GREG	<u>. </u>		
		Casing	Total Fluid Fumped	<u> </u>		RE	MARKS				
e-m/p.m	100000	Came	+	ONLOCATION							
10:45				ON LOCATION							
		_				7001 70					
		-	ļ	CIRCULATE CEM		700. 10 :	SUKF	ACE. PUM	PED 100 S	KS 60/	40 4%
	<u> </u>			GEL AND 200# H	ULLS.						
				TOP OFF 4 1/2 W	/ITH 25 SKS						
		<u>.</u>									
				TIED ON TO 8 5/	B. PRESSURI	ED RIGH	T UP	TO 300#			
					- 						
4:30				JOB COMPLETE		·					_
					· ···						
				THANK YOU!!!				· · · · · · · · · · · · · · · · · · ·			
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