

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)*

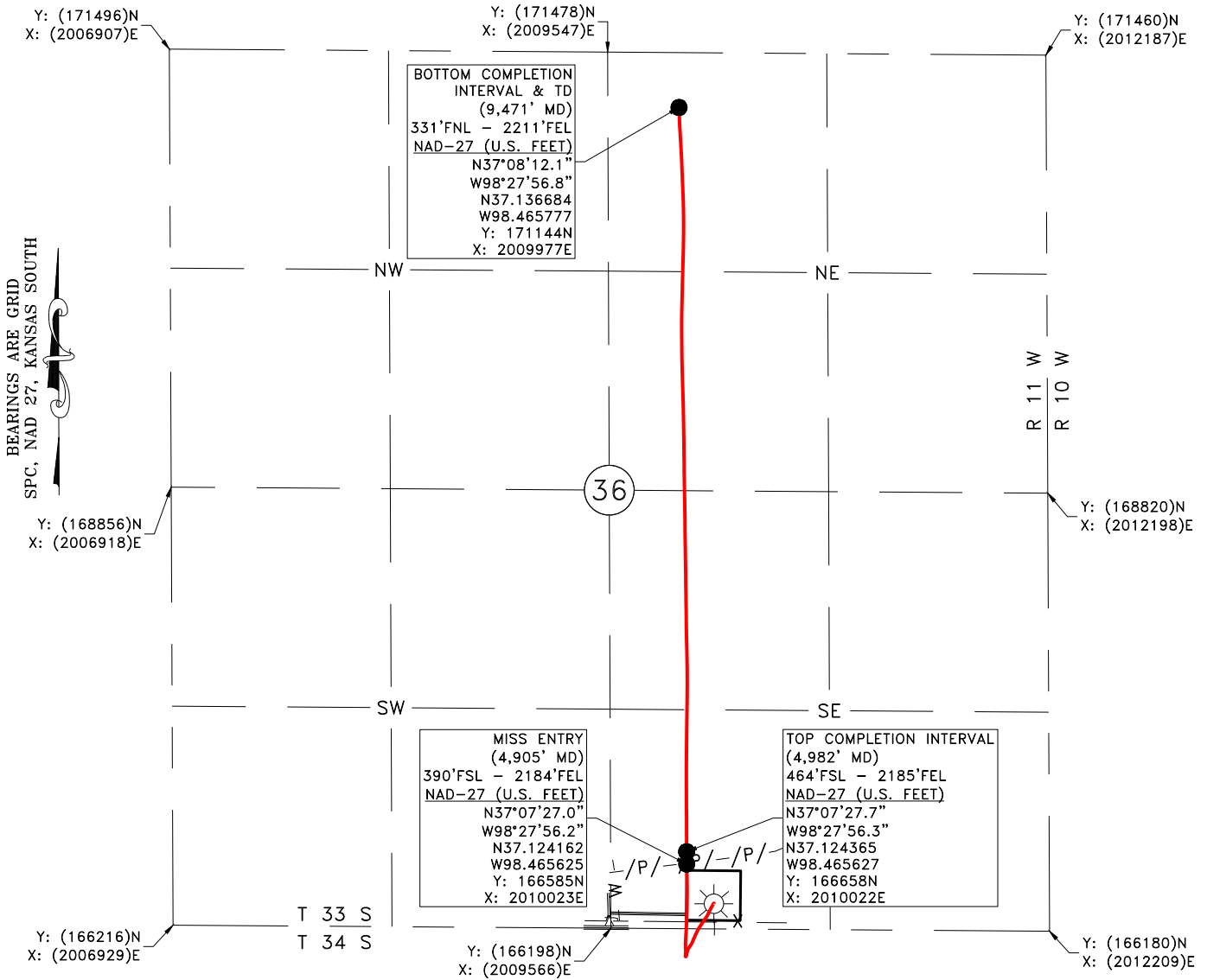
Date of first Production/Injection or Resumed Production/Injection:	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____				
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water 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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BARBER County, Kansas
 151'FSL - 2022'FEL Section 36 Township 33S Range 11W 6th P.M.



GPS OBSERVATION: LATITUDE: N37°07'24.6"
 LONGITUDE: W98°27'54.2" STATE PLANE NAD 27 Y: 166345N
 LATITUDE: N37.123503 KANSAS SOUTH ZONE X: 2010187E
 LONGITUDE: W98.465064

Operator: MACH RESOURCES Date Staked: 2/8/2022
 Lease Name: LUTHI 36-33-11 Well No.: 1H Elevation: 1445'
 Topography and Vegetation: PASTURE
 Good Drill Site? YES Reference or Alt. Location Stakes Set: NONE
 Best Accessibility to Location: FROM COUNTY ROAD

Distance and Direction
 from Hwy. Jct. or town: FROM HAZELTON, HEAD NORTH 2.25 MILES ON 1ST ST./TRI-CITY RD., THEN
HEAD WEST 3.5 MILES ON GERLANE RD., THEN TURN NORTH INTO LOCATION.

MACH
RESOURCES

Gateway

Gateway Services Group, LLC

80 E. 5TH ST., STE 400
 EDMOND, OK 73034
 OFF. (405) 285-5884
 FAX (405) 285-5886
 C.A. NO. 4091 (LS)
 EXP. DATE 6-30-2022

FINAL AS-DRILLED PLAT

All as-drilled information that is shown is based
 upon information and instructions furnished by
 Mach Resources

EXHIBIT "A" AS-DRILLED

LUTHI 36-33-11 1H
 151' FSL - 2022' FEL
 SECTION 36, T 33 S - R 11 W, 6TH P.M.,
 BARBER COUNTY, KANSAS

DRAWN BY: CLC		DATE: 4/13/22	CHK'D: KMC
GATEWAY NO.: 22-0046-201AD		SCALE: 1"=1000'	
LINE NO.:	REV.	DWN.	DATE



Digital Drilling Data
Systems, LLC

Survey Report

Company: SB Directional Services

Location: Hazelton

Well: LUTHI 36-33-11 1H

Rig: Atlas 3

API or UWI: 15007244060000

Job Number: 322697

State: Kansas

Operator: Mach Resources

County: Barber

Magnetic Declination: 0.00

Comment

Proposed Azimuth: 0.00

North Reference: GRID

Tiein Survey Data:

MD	Inclination	Azimuth	TVD	NS	EW
0.00	0.00	0.00	0.00	0.00	0.00

MD	Inclination	Azimuth	TVD	NS	EW	CA	CD	VS	DLS
131.00	0.62	29.07	131.00	0.62	0.34	29.07	0.71	0.62	0.47
221.00	0.66	25.81	220.99	1.51	0.81	28.08	1.71	1.51	0.06
404.00	0.79	352.37	403.98	3.71	1.10	16.48	3.87	3.71	0.24
495.00	1.49	222.34	494.97	3.46	0.22	3.60	3.47	3.46	2.29
585.00	3.65	215.57	584.87	0.26	-2.24	276.70	2.25	0.26	2.42
675.00	5.98	209.20	674.55	-6.16	-6.19	225.14	8.73	-6.16	2.65
765.00	8.88	208.28	763.78	-16.37	-11.77	215.71	20.16	-16.37	3.22
857.00	11.47	209.02	854.33	-30.63	-19.57	212.58	36.35	-30.63	2.82
952.00	10.37	205.20	947.61	-46.62	-27.80	210.80	54.28	-46.62	1.39
1043.00	9.10	203.40	1037.30	-60.64	-34.14	209.38	69.59	-60.64	1.43
1135.00	9.14	211.75	1128.14	-73.53	-40.88	209.07	84.13	-73.53	1.44
1224.00	9.27	216.14	1215.99	-85.33	-48.82	209.78	98.31	-85.33	0.80
1315.00	9.76	213.07	1305.74	-97.71	-57.36	210.41	113.30	-97.71	0.78
1404.00	10.77	215.48	1393.32	-110.81	-66.30	210.89	129.13	-110.81	1.23
1498.00	11.78	213.59	1485.50	-125.95	-76.71	211.34	147.47	-125.95	1.14
1593.00	12.44	213.72	1578.39	-142.54	-87.75	211.62	167.39	-142.54	0.70
1687.00	11.34	206.39	1670.37	-159.24	-97.48	211.47	186.71	-159.24	1.99
1782.00	9.76	204.67	1763.77	-174.93	-104.99	210.97	204.02	-174.93	1.70
1875.00	8.35	203.44	1855.60	-188.29	-110.97	210.51	218.56	-188.29	1.53

MD	Inclination	Azimuth	TVD	NS	EW	CA	CD	VS	DLS
1969.00	7.52	204.32	1948.70	-200.16	-116.22	210.14	231.45	-200.16	0.89
2063.00	7.30	205.81	2041.92	-211.14	-121.35	209.89	243.53	-211.14	0.31
2157.00	6.46	201.33	2135.24	-221.44	-125.87	209.62	254.71	-221.44	1.06
2250.00	5.27	201.77	2227.75	-230.28	-129.36	209.33	264.13	-230.28	1.28
2344.00	5.10	206.08	2321.37	-238.04	-132.80	209.16	272.58	-238.04	0.45
2439.00	5.89	214.87	2415.93	-245.83	-137.44	209.21	281.65	-245.83	1.21
2533.00	6.11	212.49	2509.42	-254.01	-142.89	209.36	291.44	-254.01	0.35
2628.00	5.32	215.13	2603.95	-261.88	-148.14	209.50	300.87	-261.88	0.88
2721.00	4.44	213.37	2696.61	-268.41	-152.60	209.62	308.75	-268.41	0.96
2816.00	5.14	202.21	2791.28	-275.42	-156.23	209.56	316.64	-275.42	1.22
2910.00	4.09	196.32	2884.97	-282.54	-158.76	209.33	324.09	-282.54	1.22
3004.00	3.21	192.68	2978.78	-288.32	-160.28	209.07	329.88	-288.32	0.97
3097.00	3.03	194.83	3071.64	-293.24	-161.48	208.84	334.76	-293.24	0.23
3191.00	2.90	188.28	3165.52	-297.99	-162.46	208.60	339.40	-297.99	0.39
3286.00	2.99	190.30	3260.39	-302.81	-163.25	208.33	344.01	-302.81	0.14
3380.00	3.12	185.78	3354.26	-307.76	-163.95	208.04	348.71	-307.76	0.29
3475.00	2.29	209.77	3449.15	-311.98	-165.15	207.89	353.00	-311.98	1.46
3569.00	1.63	202.43	3543.10	-314.85	-166.59	207.88	356.21	-314.85	0.75
3664.00	1.27	211.09	3638.07	-317.00	-167.65	207.87	358.60	-317.00	0.44
3758.00	0.62	233.10	3732.06	-318.20	-168.60	207.92	360.10	-318.20	0.78
3853.00	0.53	286.45	3827.05	-318.38	-169.43	208.02	360.66	-318.38	0.55
3943.00	0.84	259.25	3917.04	-318.39	-170.48	208.17	361.15	-318.39	0.49
3990.00	0.92	299.55	3964.04	-318.27	-171.14	208.27	361.36	-318.27	1.30
4036.00	5.32	0.68	4009.97	-315.95	-171.44	208.49	359.47	-315.95	10.74
4083.00	11.21	4.90	4056.46	-309.21	-171.02	208.95	353.36	-309.21	12.59
4131.00	16.35	3.31	4103.06	-297.81	-170.23	209.75	343.03	-297.81	10.74
4178.00	20.70	359.10	4147.62	-282.89	-169.98	211.00	330.03	-282.89	9.68
4225.00	24.22	356.64	4191.05	-264.96	-170.68	212.79	315.17	-264.96	7.75
4272.00	27.38	1.25	4233.36	-244.52	-171.01	214.97	298.39	-244.52	7.96
4319.00	31.82	2.48	4274.22	-221.33	-170.24	217.57	279.22	-221.33	9.53
4366.00	37.14	4.15	4312.95	-194.78	-168.67	220.89	257.66	-194.78	11.50
4413.00	41.63	3.23	4349.26	-165.02	-166.76	225.30	234.61	-165.02	9.63
4460.00	45.01	1.73	4383.45	-132.81	-165.38	231.23	212.11	-132.81	7.52
4507.00	48.75	2.30	4415.57	-98.54	-164.17	239.03	191.47	-98.54	8.01
4554.00	52.09	2.00	4445.52	-62.34	-162.81	249.05	174.34	-62.34	7.12

MD	Inclination	Azimuth	TVD	NS	EW	CA	CD	VS	DLS
4602.00	54.77	0.94	4474.11	-23.81	-161.83	261.63	163.57	-23.81	5.86
4649.00	58.46	0.55	4499.97	15.43	-161.32	275.46	162.06	15.43	7.88
4696.00	59.52	0.37	4524.18	55.71	-161.00	289.09	170.37	55.71	2.28
4743.00	59.69	359.93	4547.96	96.25	-160.90	300.89	187.49	96.25	0.88
4790.00	59.69	358.70	4571.68	136.82	-161.38	310.29	211.57	136.82	2.26
4837.00	60.75	358.30	4595.03	177.60	-162.45	317.55	240.69	177.60	2.37
4882.00	66.11	359.14	4615.15	217.82	-163.34	323.13	272.26	217.82	12.03
4907.00	69.67	359.23	4624.56	240.97	-163.67	325.82	291.30	240.97	14.24
4947.00	75.43	359.45	4636.55	279.12	-164.11	329.55	323.79	279.12	14.41
4954.00	76.48	359.45	4638.25	285.91	-164.17	330.13	329.69	285.91	15.00
5003.00	83.21	0.11	4646.88	334.11	-164.36	333.81	372.35	334.11	13.80
5034.00	86.33	0.37	4649.71	364.98	-164.23	335.77	400.22	364.98	10.10
5065.00	87.65	359.80	4651.33	395.93	-164.18	337.48	428.62	395.93	4.64
5074.00	88.26	359.89	4651.65	404.93	-164.20	337.93	436.95	404.93	6.85
5083.00	89.19	359.36	4651.85	413.92	-164.26	338.35	445.33	413.92	11.89
5097.00	90.86	359.49	4651.85	427.92	-164.40	338.98	458.42	427.92	11.96
5117.00	92.48	0.19	4651.27	447.91	-164.46	339.84	477.15	447.91	8.82
5129.00	92.66	0.15	4650.73	459.90	-164.42	340.33	488.41	459.90	1.54
5160.00	92.88	359.89	4649.23	490.87	-164.41	341.48	517.67	490.87	1.10
5192.00	92.79	359.40	4647.65	522.83	-164.61	342.52	548.13	522.83	1.56
5223.00	93.01	359.62	4646.08	553.78	-164.88	343.42	577.81	553.78	1.00
5255.00	93.10	359.54	4644.37	585.74	-165.11	344.26	608.56	585.74	0.38
5301.00	91.52	359.93	4642.52	631.70	-165.32	345.33	652.97	631.70	3.54
5349.00	91.38	359.93	4641.30	679.68	-165.38	346.32	699.51	679.68	0.29
5396.00	91.74	359.80	4640.02	726.67	-165.49	347.17	745.27	726.67	0.81
5444.00	92.53	0.02	4638.24	774.63	-165.57	347.94	792.13	774.63	1.71
5491.00	93.45	0.02	4635.78	821.57	-165.55	348.61	838.08	821.57	1.96
5535.00	91.30	0.68	4633.96	865.53	-165.28	349.19	881.17	865.53	5.11
5582.00	89.01	0.50	4633.83	912.52	-164.80	349.76	927.28	912.52	4.89
5625.00	89.32	0.28	4634.46	955.51	-164.51	350.23	969.57	955.51	0.88
5716.00	90.20	0.81	4634.84	1046.51	-163.64	351.11	1059.23	1046.51	1.13
5808.00	90.90	0.81	4633.96	1138.50	-162.34	351.88	1150.01	1138.50	0.76
5899.00	91.91	0.99	4631.73	1229.46	-160.91	352.54	1239.94	1229.46	1.13
5989.00	89.23	359.84	4630.83	1319.44	-160.26	353.07	1329.14	1319.44	3.24
6079.00	89.14	359.49	4632.11	1409.43	-160.79	353.49	1418.57	1409.43	0.40

MD	Inclination	Azimuth	TVD	NS	EW	CA	CD	VS	DLS
6109.00	89.10	359.10	4632.57	1439.42	-161.15	353.61	1448.42	1439.42	1.31
6123.00	89.19	358.96	4632.78	1453.42	-161.39	353.66	1462.35	1453.42	1.19
6138.00	89.89	358.96	4632.90	1468.42	-161.66	353.72	1477.29	1468.42	4.67
6170.00	90.37	358.92	4632.83	1500.41	-162.26	353.83	1509.16	1500.41	1.51
6216.00	90.77	358.52	4632.37	1546.40	-163.28	353.97	1554.99	1546.40	1.23
6261.00	91.16	358.66	4631.61	1591.38	-164.39	354.10	1599.84	1591.38	0.92
6307.00	90.64	358.83	4630.89	1637.36	-165.40	354.23	1645.69	1637.36	1.19
6352.00	90.95	359.14	4630.27	1682.35	-166.19	354.36	1690.54	1682.35	0.97
6398.00	89.36	359.62	4630.14	1728.34	-166.69	354.49	1736.36	1728.34	3.61
6443.00	89.54	359.40	4630.58	1773.34	-167.08	354.62	1781.19	1773.34	0.63
6489.00	89.89	359.32	4630.80	1819.34	-167.59	354.74	1827.04	1819.34	0.78
6535.00	90.07	359.10	4630.82	1865.33	-168.23	354.85	1872.90	1865.33	0.62
6581.00	90.90	359.27	4630.43	1911.32	-168.88	354.95	1918.77	1911.32	1.84
6624.00	91.08	359.32	4629.69	1954.32	-169.41	355.05	1961.64	1954.32	0.43
6670.00	90.24	359.23	4629.16	2000.31	-169.99	355.14	2007.52	2000.31	1.84
6715.00	90.46	359.10	4628.88	2045.30	-170.65	355.23	2052.41	2045.30	0.57
6761.00	90.59	359.05	4628.46	2091.29	-171.39	355.31	2098.31	2091.29	0.30
6804.00	91.16	359.23	4627.81	2134.28	-172.03	355.39	2141.21	2134.28	1.39
6851.00	90.73	358.88	4627.03	2181.27	-172.81	355.47	2188.11	2181.27	1.18
6899.00	89.58	359.40	4626.90	2229.26	-173.53	355.55	2236.01	2229.26	2.63
6946.00	89.32	359.71	4627.35	2276.26	-173.89	355.63	2282.89	2276.26	0.86
6993.00	89.45	359.54	4627.86	2323.26	-174.20	355.71	2329.78	2323.26	0.46
7040.00	89.23	359.23	4628.40	2370.25	-174.71	355.78	2376.68	2370.25	0.81
7088.00	89.32	358.83	4629.00	2418.24	-175.52	355.85	2424.60	2418.24	0.85
7135.00	89.93	358.70	4629.31	2465.23	-176.53	355.90	2471.54	2465.23	1.33
7182.00	90.29	359.14	4629.22	2512.22	-177.42	355.96	2518.48	2512.22	1.21
7229.00	90.15	358.70	4629.04	2559.21	-178.30	356.01	2565.42	2559.21	0.98
7277.00	90.33	359.76	4628.84	2607.21	-178.95	356.07	2613.34	2607.21	2.24
7324.00	91.12	359.67	4628.25	2654.20	-179.18	356.14	2660.24	2654.20	1.69
7371.00	91.12	359.23	4627.33	2701.19	-179.63	356.20	2707.16	2701.19	0.94
7418.00	91.69	359.45	4626.17	2748.17	-180.18	356.25	2754.07	2748.17	1.30
7464.00	92.22	359.27	4624.60	2794.14	-180.69	356.30	2799.98	2794.14	1.22
7511.00	92.18	358.83	4622.80	2841.10	-181.47	356.35	2846.89	2841.10	0.94
7558.00	90.77	359.14	4621.59	2888.08	-182.30	356.39	2893.82	2888.08	3.07
7605.00	91.25	359.18	4620.76	2935.06	-182.99	356.43	2940.76	2935.06	1.02

MD	Inclination	Azimuth	TVD	NS	EW	CA	CD	VS	DLS
7653.00	91.03	358.52	4619.81	2983.05	-183.95	356.47	2988.71	2983.05	1.45
7700.00	89.23	358.39	4619.70	3030.03	-185.22	356.50	3035.68	3030.03	3.84
7747.00	89.10	358.13	4620.39	3077.00	-186.65	356.53	3082.66	3077.00	0.62
7794.00	89.63	358.30	4620.91	3123.97	-188.11	356.55	3129.63	3123.97	1.18
7842.00	90.46	358.48	4620.87	3171.95	-189.46	356.58	3177.61	3171.95	1.77
7889.00	90.59	358.66	4620.44	3218.94	-190.63	356.61	3224.58	3218.94	0.47
7936.00	89.93	358.39	4620.23	3265.92	-191.84	356.64	3271.55	3265.92	1.52
7983.00	89.93	358.52	4620.28	3312.90	-193.11	356.66	3318.53	3312.90	0.28
8030.00	90.46	359.32	4620.12	3359.90	-193.99	356.70	3365.49	3359.90	2.04
8077.00	91.87	359.76	4619.17	3406.88	-194.37	356.73	3412.42	3406.88	3.14
8124.00	91.60	359.54	4617.74	3453.86	-194.66	356.77	3459.34	3453.86	0.74
8171.00	91.03	0.50	4616.67	3500.85	-194.64	356.82	3506.25	3500.85	2.37
8218.00	91.52	0.77	4615.62	3547.83	-194.12	356.87	3553.14	3547.83	1.19
8265.00	90.77	1.34	4614.68	3594.81	-193.26	356.92	3600.01	3594.81	2.00
8313.00	90.90	1.43	4613.98	3642.80	-192.10	356.98	3647.86	3642.80	0.33
8360.00	90.95	1.07	4613.22	3689.78	-191.07	357.04	3694.72	3689.78	0.77
8407.00	90.86	1.29	4612.48	3736.76	-190.10	357.09	3741.59	3736.76	0.51
8454.00	88.48	1.64	4612.75	3783.74	-188.90	357.14	3788.46	3783.74	5.12
8501.00	86.68	1.60	4614.73	3830.68	-187.57	357.20	3835.27	3830.68	3.83
8532.00	87.47	1.78	4616.32	3861.63	-186.66	357.23	3866.13	3861.63	2.61
8548.00	87.87	1.25	4616.97	3877.61	-186.24	357.25	3882.08	3877.61	4.15
8562.00	88.66	1.43	4617.39	3891.60	-185.91	357.26	3896.03	3891.60	5.79
8595.00	89.89	1.51	4617.81	3924.58	-185.06	357.30	3928.94	3924.58	3.74
8627.00	90.07	0.81	4617.82	3956.58	-184.42	357.33	3960.87	3956.58	2.26
8658.00	90.59	0.85	4617.64	3987.57	-183.97	357.36	3991.81	3987.57	1.68
8689.00	90.68	0.90	4617.30	4018.57	-183.49	357.39	4022.75	4018.57	0.33
8721.00	90.68	0.68	4616.92	4050.56	-183.05	357.41	4054.70	4050.56	0.69
8784.00	91.30	359.80	4615.83	4113.55	-182.79	357.46	4117.61	4113.55	1.71
8826.00	89.98	359.10	4615.36	4155.54	-183.19	357.48	4159.58	4155.54	3.56
8865.00	89.27	358.44	4615.62	4194.53	-184.03	357.49	4198.57	4194.53	2.49
8878.00	89.19	358.70	4615.79	4207.53	-184.35	357.49	4211.57	4207.53	2.09
8893.00	89.98	358.48	4615.90	4222.52	-184.72	357.50	4226.56	4222.52	5.47
8909.00	90.86	358.26	4615.78	4238.52	-185.18	357.50	4242.56	4238.52	5.67
8926.00	92.53	358.35	4615.28	4255.50	-185.68	357.50	4259.55	4255.50	9.84
8941.00	93.10	357.65	4614.54	4270.47	-186.20	357.50	4274.53	4270.47	6.01

MD	Inclination	Azimuth	TVD	NS	EW	CA	CD	VS	DLS
8972.00	93.58	357.60	4612.74	4301.40	-187.49	357.50	4305.48	4301.40	1.56
9004.00	93.01	357.47	4610.90	4333.31	-188.86	357.50	4337.43	4333.31	1.83
9019.00	92.66	357.56	4610.15	4348.28	-189.51	357.50	4352.41	4348.28	2.41
9035.00	92.57	357.51	4609.42	4364.25	-190.20	357.50	4368.39	4364.25	0.64
9066.00	90.46	357.34	4608.61	4395.20	-191.59	357.50	4399.38	4395.20	6.83
9087.00	87.38	357.91	4609.00	4416.18	-192.46	357.50	4420.37	4416.18	14.92
9113.00	87.08	358.04	4610.26	4442.13	-193.38	357.51	4446.34	4442.13	1.26
9129.00	86.77	357.65	4611.12	4458.10	-193.98	357.51	4462.32	4458.10	3.11
9160.00	88.31	357.12	4612.45	4489.04	-195.39	357.51	4493.29	4489.04	5.25
9191.00	89.76	357.25	4612.97	4519.99	-196.91	357.51	4524.28	4519.99	4.70
9223.00	93.32	356.77	4612.11	4551.93	-198.58	357.50	4556.26	4551.93	11.23
9238.00	94.15	356.77	4611.13	4566.88	-199.42	357.50	4571.23	4566.88	5.53
9254.00	94.59	356.85	4609.91	4582.81	-200.31	357.50	4587.18	4582.81	2.79
9269.00	92.57	356.46	4608.98	4597.75	-201.19	357.49	4602.15	4597.75	13.71
9300.00	91.16	356.37	4607.97	4628.67	-203.12	357.49	4633.13	4628.67	4.56
9317.00	91.91	356.55	4607.51	4645.64	-204.17	357.48	4650.12	4645.64	4.54
9331.00	92.40	356.59	4606.99	4659.60	-205.01	357.48	4664.11	4659.60	3.51
9355.00	94.24	357.21	4605.60	4683.52	-206.30	357.48	4688.06	4683.52	8.09
9367.00	94.86	357.47	4604.64	4695.47	-206.86	357.48	4700.03	4695.47	5.60
9423.00	94.02	358.17	4600.31	4751.26	-208.98	357.48	4755.86	4751.26	1.95
9471.00	93.40	358.17	4597.20	4799.14	-210.51	357.49	4803.75	4799.14	1.29

Mach III LLC
Luthi 36-33-11 1H
Barber County
3/3/2022
Surface

Ticket # P-4519



COMPANY Mach III LLC		PROJECT NUMBER P-4519	AFE/WORK ORDER DC22011	DATE 3/3/2022
CONTRACTOR Spinnaker Oil	Owner Same	LEGAL DESCRIPTION Sec 36, T33N, R11W		API 15-007-24406
LEASE & WELL # Luthi 36-33-11 1H		COUNTY Barber County	STATE Kansas	MILEAGE 300
DIRECTIONS				

From Hazelton, KS - Head North 2.25 miles on 1st St./Tri-City Rd., then head West 3.5 miles on Gerlane Rd. Turn North into location. Atlas 3

Pumping Services	<input checked="" type="checkbox"/> Surface <input type="checkbox"/> Intermediate <input type="checkbox"/> Long String <input type="checkbox"/> Plug Back <input type="checkbox"/> Squeeze <input type="checkbox"/> Acid <input type="checkbox"/> PTA <input type="checkbox"/> Other									
	Casing Size 9 5/8	Casing Weight 40.00	Thread LTC	Csng Grade J-55	Thread	Plug. Cont. Yes	Swage Yes	Top Plug Yes	Bottom Plug N/A	% Excess 225%
	Number and Type Units Pump Truck, 1 ea. 660 Bulk Truck					BHST - F 83	Casing Dept 300	Depth - TVD - FT 300	Hole Size - Inches 12 1/4	
	Remarks 9 5/8" Top Plug, Head , 200 lbs Sugar					BHCT - F 80	Tubing Dept	Depth - MD - FT 300	Mud Weight/Type - PPG	

Materials	Spacer	Qty - BBLs 30	Type H2O	SPACER: H2O						
	BBL OF LEAD	# of Sacks 75	Type Class A	LEAD CEMENT 75 Sacks Class A, 3% Gypsum, 0.5% SMS, 2.5% Calcium Chloride, 0.25 lb/sk Poly						
	H2O REQUIRED	Weight PPG 11.40	Yield Ft3/Sk 2.94	Water Gal/S 18.10						
	BBL OF TAIL	# of Sacks 95	Type Class A	TAIL CEMENT 95 Sacks Class A, 3% Gypsum, 0.5% SMS, 2.5% Calcium Chloride, 0.25 lb/sk Poly						
	H2O REQUIRED	Weight PPG 13.20	Yield Ft3/Sk 1.85	Water Gal/S 9.95						
	Displacement	Qty - BBLs 20	Type H2O	DISPLACEMENT H2O						

Notes:

**SINGLE Variable Density Slurry. Please go by bbl counter. All cement in Front pot only.
Lead - 6 hrs; Tail - 2.5 hrs**

Sales Items	Casing Size 9 5/8	Casing Weight 40.00	Thread LTC
	Guide Shoe	Float Shoe	Float Collar Insert Float Valve
	Centralizers - Number	Size	Type
	Wall Cleaners - Number	Type	MSC (DV Tool) MSC Plug Set
	Limit Clamps	Thread lock	Other
	Remarks 300 lbs Sugar		

Mach III LLC
 Luthi 36-33-11 1H
 Barber County
 3/3/2022
 Surface

Ticket # P-4519



Customer: Mach III LLC
 Well Name: Luthi 36-33-11 1H
 County: Barber County
 State: Kansas
 API #: 15-007-24406
 Legals: Sec. 36-T33N-R11W

Customer Rep: Tim Mills
 Mobile:
 Job Type: Surface
 Casing: 9 5/8
 Field Supervisor: Scott Applebee
 Date: 3/3/2022
 Proposal #: 31580001

Ref. #	Description	Quantity	Unit Price	Sub Total	Total
***** Cementing Services *****					
MLPU1	Pickup Mileage 1 unit (roundtrip miles)	300	\$3.94	\$1,182.00	\$472.80
MLHE3	Heavy Vehicle Mileage 3 units (roundtrip miles)	300	\$20.34	\$6,102.00	\$2,440.80
MLTN	Bulk Cement Delivery/Return (per Ton-Mile)	1,274	\$2.73	\$3,478.02	\$1,391.21
MXBK	Bulk Material Mixing Service Charge (Per cu.ft.)	170	\$3.03	\$515.10	\$206.04
CMTD	Cement Head with manifold (per Job)	1	\$1,895.00	\$1,895.00	\$758.00
PC1K	Pump Charge 0-1000' (Per 4 hrs)	1	\$1,887.60	\$1,887.60	\$755.04
DAQ	Data Acquisition System	1	\$1,331.00	\$1,331.00	\$532.40
FLSCG	Fuel Surcharge (per unit/per job)	3	\$605.00	\$1,815.00	\$726.00
ENVFEE	Environmental Fee	1	\$211.75	\$211.75	\$84.70
DAMSS	Data Monitoring System/Supervisor	1	\$800.00	\$800.00	\$320.00
CIRON	Circulation Equipment (40' of equipment per job)	1	\$1,512.50	\$1,512.50	\$605.00
***** Cementing Materials *****					
CSTD	Class A Type Standard Cement (per sack)	170	\$31.81	\$5,407.70	\$2,163.08
CEXTGYP	Gypsum (per lb)	480	\$0.54	\$259.20	\$103.68
CACCSMS	SMS (per lb)	80	\$3.86	\$308.80	\$123.52
CACCCC	Calcium Chloride (per lb)	400	\$1.45	\$580.00	\$232.00
CLCMPF	Poly Flake (per lb)	43	\$3.23	\$138.89	\$55.56
Additional Items (As Required)					
PCADD	Primary Pump Unit Addl Hours	0.0	\$594.50	\$0.00	\$0.00
BKADD	Bulk Unit Additional Hours (per unit/per hour)	0.0	\$121.00	\$0.00	\$0.00
VALV12	1" to 2" valves	2	\$393.25	\$786.50	\$314.60
SG36	Swage, 4 1/2" - 13 3/8" (per day)	1	\$423.50	\$423.50	\$169.40
FTRP958	9 5/8" Top Rubber Plug	0	\$220.00	\$0.00	\$0.00
CSUGAR	Sugar (per lb)	0	\$1.47	\$0.00	\$0.00
CFDIAL	ATF Cement Defoamer (per gal)	10	\$29.50	\$295.00	\$295.00
DERKC	Derrick Charge (Cement Head Stabbing Above 8 ft)	0	\$726.00	\$0.00	\$0.00
WTCMT	Waiting on Cement Head after job (per hours)	0	\$95.00	\$0.00	\$0.00
CACCCC	Calcium Chloride (per lb)	0	\$1.45	\$0.00	\$0.00
	Book Price			\$28,929.56	
	Estimated Job Cost (Exclusive of Sales Tax)				\$11,748.82

Signature: 
 Field Supervisor: Scott Applebee

Signature: 
 Customer Rep: Tim Mills

DC 22011
 \$11,748.82

Mach III LLC
 Luthi 36-33-11 1H
 Barber County
 3/3/2022
 Surface

Ticket # P-4519



COMPANY Mach III LLC	PROJECT NUMBER P-4519	CUSTOMER REP: Tim Mills	DATE 3/3/2022
CONTRACTOR Spinnaker Oil	Owner Same	LEGAL DESCRIPTION Sec 36, T33N, R11W	
LEASE & WELL # Luthi 36-33-11 1H	COUNTY Barber County	STATE OK	MILEAGE 300

Customer Job Satisfaction Sheet

We will greatly appreciate if you can fill out a short survey regarding our performance today. Safety and service quality are our top priorities and we want to ensure that we are continually providing the best service possible in the safest manner as possible. These surveys are regularly reviewed and we highly value your opinion. Thank you for your business.

	Poor	Fair	Satisfactory	Great	Outstanding
HSE					
Performance of Crew					
Performance of Equipment					
Service Quality					
Job Completed as Agreed					

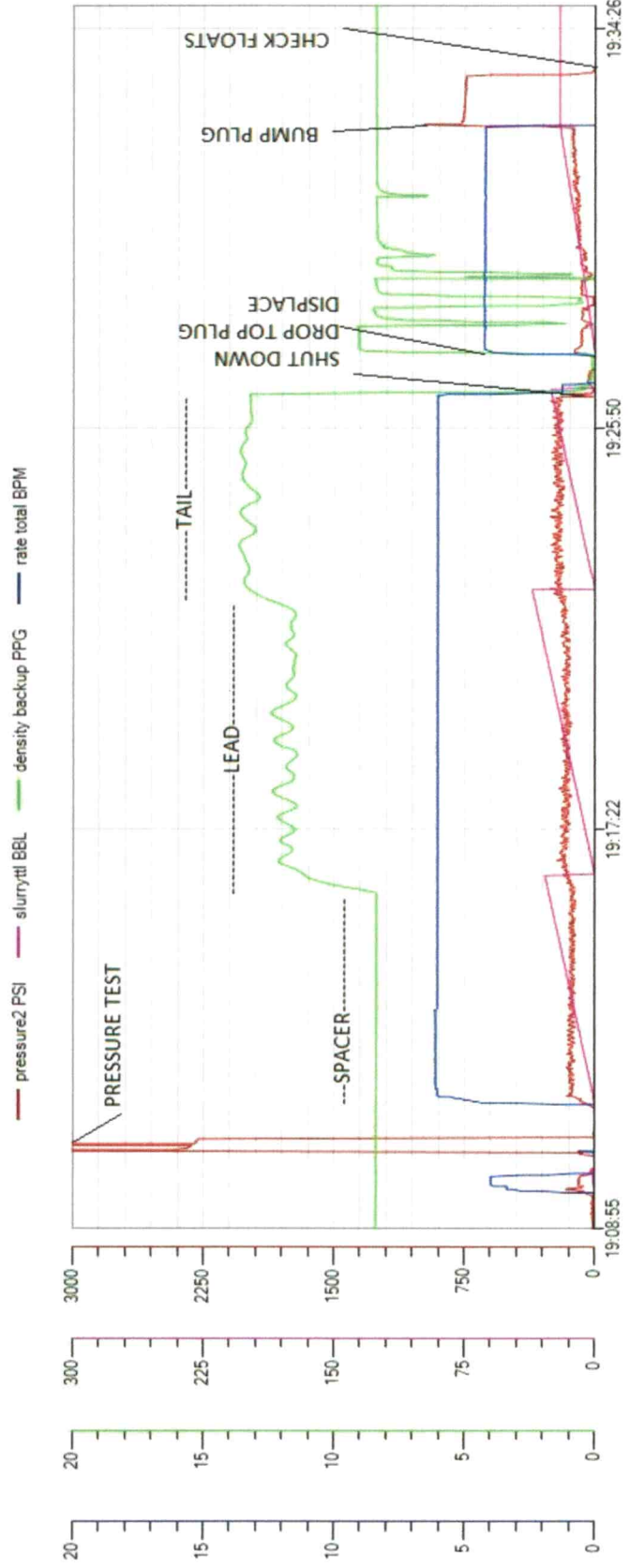
Customer Name (Printed)

Customer Signature: 

Date: _____



Chart Report





JOB LOG

PROJECT NUMBER	TICKET DATE
P-4519	03/03/22

COMPANY Mach III LLC	COUNTRY USA	STATE KS	COUNTY Barber County
LEASE NAME Luthi 36-33-11 1H	Well No.	EMPLOYEE NAME Scott Applebee	CUSTOMER REP Tim Mills
FIELD	SEC / TWP / RNG Sec 36, T33N, R11W	TICKET AMOUNT	
API/UWI # 15-007-24406	JOB PURPOSE Surface	WELL TYPE	
PUMP #1	313		
PUMP #2			
PUMP #3			

Date	Time	Rate (BPM)	Volume (BBL)(GAL)	Press.(PSI)		Job Description / Remarks
				CSG.	Tbg	
3-3						PRE DEPARTURE MEETING
3-3						DEPART FOR LOCATION, CUSTOMER REQUESTED ARRIVEL TIME SET AT 18:00
3-3						ARRIVE ON LOCATION- RIG STARTING TO RUN CASING
3-3						MEET WITH CUSTOMER AND SPOT ALL SPINNAKER EQUIPMENT
3-3						PRE RIG UP SAFETY MEETING
3-3						RIG UP ALL IRON ON GROUND AND HEAD SO RIG CAN CIRCULATE CAPACITY AND A HALF
3-3	19:00					SAFETY MEETING DISCUSS CEMENT PROCEDURE AND STOP WORK AUTHORITY
3-3	19:09				1500	PRIME LINES, DROP BOTTOM PLUG AND PRESSURE TEST TO 1500 PSI
3-3	19:10	6.0	30.0		150	PUMP 30 BBLs OF FRESH WATER SPACER
3-3	19:16	6.0	39.3		180	PUMP 75 SACKS OF CLASS A LEAD CEMENT @ 11.4 PPG (39.3 BBLs)
3-3	19:21	6.0	31.3		200	PUMP 95 SACKS OF CLASS A TAIL CEMENT @ 13.2 PPG (31.3 BBLs)
3-3	19:26					SHUT DOWN FROM PUMPING, LOAD TOP PLUG, DROP RUBBER TOP PLUG
3-3	19:27	4.0	19.0		70	WASH PUMP ON TOP OF PLUG AND BEGIN DISPLACEMENT

Supervisor Signature: 

Print Name: Scott Applebee

Thank You For Using
Spinnaker Oilfield Services



JOB LOG

PROJECT NUMBER	TICKET DATE
P-4519	03/03/22

COMPANY Mach III LLC	COUNTRY USA	STATE KS	COUNTY Barber County
LEASE NAME Luthi 36-33-11 1H	Well No.	EMPLOYEE NAME Scott Applebee	CUSTOMER REP Tim Mills
FIELD	SEC / TWP / RNG Sec 36, T33N, R11W	TICKET AMOUNT	
API/UWI # 15-007-24406	JOB PURPOSE Surface	WELL TYPE	

Date	Time	Rate (BPM)	Volume (BBL)(GAL)	Press.(PSI)		Job Description / Remarks
				CSG.	Tbg	
3-3						
3-3						
3-3	19:32	4.0	19.0		750	BUMP TOP PLUG, PUMP 500 PSI OVER LIFT PRESSURE TO 100 PSI, HOLD FOR 1 MIN.
3-3	19:33		0.5			BLEED PRESSURE OFF TO CHECK FLOATS, FLOATS HELD 1/2 BBL BACK
3-3	19:45					PRE RIG DOWN SAFETY MEETING
3-3	20:00					RIG DOWN ALL SPINNAKER EQUIPMENT
3-3	21:00					DEPART FROM LOCATION
3-3						***ESTIMATED HOT = 268 FT TOT = 28 FT***
3-3						***ESTIMATED HOL = 28 FT TOL = 0 FT***
3-3						30 BBS CEMENT TO SURFACE
3-3						
3-3						
3-3						

Supervisor Signature:

Print Name: Scott Applebee

Thank You For Using
Spinnaker Oilfield Services

EQUIPMENT CHECKLIST

UNIT # 313

1. BEFORE THE JOB – PREPARE

- Power up the unit, ensuring all electronics are functioning, and recalibrate all console pressure gauges to atmospheric pressure
- Check the cement head (visually inspect), vacuum breakers, and dry cement line.
- Prime the truck up and pressure test. Test for Global kick-out, and check martin decker gauges. Note any difference between console and martin decker pressures.
- Function test and pump through the entire plumbing, checking all lines as well as centrifugal and triplex pumps. Check for any packing leaks on the pumping unit. Chart the test.
- Check the bulk equipment; compressors, valves, pop-offs, to make sure it airs up and hold pressure.
- Check the casing cement head, O-rings, adapters (sizes and thread types).
- Check the bulk paperwork, ensuring all correct cement and volumes are on location.
- Check to make sure all chemicals and plugs are on location. Check the auxiliary boost pump, if any.
- Perform a Water Analysis.

2. DURING THE JOB

- Note any pumping issues or any discrepancies on outputs
- Check for any leaks and contain accordingly if any

3. AFTER THE JOB

- Turn in the check list to customer, if requested, and include a copy with packet, and make detailed note of any issues

Supervisor Comments:

Good

Scott Applebee

(Supervisor Name and Signature)

Scott Applebee

Brennan Seaman

(Operator Name and Signature)



SERVICE ORDER CONTRACT

Customer Name Mach III LLC

Ticket Number P-4519

Lease & Well Number Luthi 36-33-11 1H

Date 3/3/2022

As consideration, The Above Named customer Agrees:

Spinnaker Oilfield Services Company LLC ("Spinnaker") shall not be responsible for and customer shall secure Spinnaker against any liability for damage to property of customer and of the well owner (if different from customer),

unless caused by the willful misconduct or gross negligence of Spinnaker, this provision applying to

but not limited to subsurface damage and surface damage arising from subsurface damage, unless an MSA between Spinnaker and above named customer specifies otherwise.

Spinnaker makes no guarantee to the effectiveness of the products, supplies, or materials, nor of the results of any treatment or services.

Because of the uncertainty of variable well conditions and the necessity of relying on facts and supporting services furnished by others,

Spinnaker personnel will use their best efforts in gathering such information and their best judgment in interpreting it, but because of the uncertainty of variable well conditions and the necessity of relying on facts and supporting services furnished by others except where due to Spinnaker gross negligence or willful misconduct in the preparation or furnishing it.

Invoices payable NET 10 days following the date on the invoice.

Upon customers default in payment of the customers account 15 days past due.

Customer agrees to pay interest thereon after at the highest lawful contract rate applicable but never to exceed 18% per annum in the event it becomes necessary to employ an attorney to enforce collection of said account.

Customer agrees to pay all collection costs and attorney fees in the amount of 25% of the unpaid account.

Service order: I authorize work to begin per service instructions in accordance with terms and conditions printed on this form and represent that I have authority to accept and sign this order.

I HAVE READ AND UNDERSTAND THIS CONTRACT AND REPRESENT THAT I AM AUTHORIZED TO SIGN THE SAME AS CUSTOMERS AGENT.

Customer Authorized Agent: *[Signature]*

Mach III LLC
Luthi 36-33-11 1H
Barber County
3/3/2022
Surface

Ticket # P-4519



LOCATION WATER TEST

General Information

Customer: Mach III LLC Date: 3/3/2022
Ticket #: P-4519 Time: 18:00
Lease Name & #: Luthi 36-33-11 1H Water Source: Rig Tank
Cementer: Scott Applebee

Test Results Sample #1

		Standard Range
Temp	<u>62</u> ° F	50° to 100° F
pH	<u>7.0</u>	6.0 - 8.0
Sulfates	<u>Pass</u> mg/L	Less Than 1500 mg/L
Chlorides	<u>Pass</u> mg/L	Less Than 3000 mg/L
Lignins & Tannins	<u>No</u> Yes/No	No

Test Results Sample #2

		Standard Range
Temp	<u> </u> ° F	50° to 100° F
pH	<u> </u>	6.0 - 8.0
Sulfates	<u> </u> mg/L	Less Than 1500 mg/L
Chlorides	<u> </u> mg/L	Less Than 3000 mg/L
Lignins & Tannins	<u> </u> Yes/No	No

Remarks:

JOB SAFETY ANALYSIS (JSA)

DATE 3/3/2022	TICKET NUMBER P-4519	CUSTOMER Mach III LLC	LEASE AND WELL NO. Luthi 36-33-11 1H
List of Employees on site (In case of evacuation, check boxes as employees are accounted for - use additional paper if needed)			
<input type="checkbox"/>	Scott Applebee	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Brennan Seaman	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Ian Roberts	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

2. Discussion of Hazards Found at the Job Site

- | | |
|---|---|
| <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Electrical Discuss location of electrical lines and power sources in relation to equipment and lines. PSW, QA. Light Plant. <input checked="" type="checkbox"/> Chemicals Discuss possible exposures to substances such as dusts, Chemicals, vapors, radioactive materials, explosives, and Fla./combustible materials. Provide MSDS sheets, H2S, Gas Flammable gasses. SEE MSDS <input checked="" type="checkbox"/> Overhead Discuss overhead hazards (e.g. guy wires, DME, chains, pulleys hazards while on the rig floor or under the rig floor).Rig guy wires. <input checked="" type="checkbox"/> Cranes, Masts, Booms Discuss hazards associated with overhead lifting devices. CRANE TRUCK. <input checked="" type="checkbox"/> Weather Discuss weather conditions (e.g. heat, cold, ice, snow, rain, wind, dust, visibility, etc.) <input checked="" type="checkbox"/> Chemical spills & releases Tote tanks, frac tanks, drums, hose connections and pumps. USE DIAPERS. <input checked="" type="checkbox"/> Ignition Sources Discuss possible ignition sources (e.g. engines, electrical equipment, open flames, smoking, etc.) SMOKING, EQUIP, DIESEL. <input checked="" type="checkbox"/> Well bore fluids or gasses Discuss shale shaker, frac tanks, return lines and vent lines. <input type="checkbox"/> Explosives Handling Discuss hazards of working with and around explosive materials. Restrict the work area to those that have propper training. Follow approved procedures. | <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Confined Spaces Discuss any required entry into confined spaces (e.g. cellars, tanks, pits.). TANKS, Mt. Mover.LGC Bldr. <input checked="" type="checkbox"/> Noise Discuss areas with high noise levels and avoid these areas or provide hearing protection. EQUIP. <input checked="" type="checkbox"/> Walking / working surfaces Discuss the terrain where the rig up and job will occur (e.g. boards, limestone, mud, stairways, walkways, the derrick, and the rig floor). HOSES, IRON, EQUIP. <input checked="" type="checkbox"/> Lifting Discuss proper lifting techniques and ways to eliminate or reduce heavy lifting such as forklifts, cranes, and sharing the load. CRANE, BUDDY SYS. <input checked="" type="checkbox"/> Falling Discuss job procedures requiring work at heights greater than 10 ft. (3.3 m). FALL PROTECTION.Fall protection for tanks. <input checked="" type="checkbox"/> Pressure Discuss pressure hazards such as DME and bulk tanks. 10.000 psi <input checked="" type="checkbox"/> LO / TO Discuss equipment that has been locked or tagged out. <input type="checkbox"/> RA Handling Discuss hazards working around different types of radiation. Restrict the work area to those with the proper training. Follow approved Procedures |
|---|---|

3. Hazard Controls

- | | |
|---|---|
| <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Personal protective equipment Discuss required PPE such as respirators, head protection, hearing protection, protective footwear, hand and skin protection, and fall protection. PROPER PPE. <input checked="" type="checkbox"/> Physical barriers Discuss items such as hose covers, line tiedowns, guards, railings, and inert gas blankets. <input checked="" type="checkbox"/> Weather Discuss control measures for weather factors such as temperature, wind, ice, rain, snow, etc. <input checked="" type="checkbox"/> Ignition source controls Discuss control measures for ignition sources such as the use of spark arrestors, emergency shutdown procedures, and NO SMOKING rules.Equip. & Smoking. <input checked="" type="checkbox"/> Crane, Masts, Booms Safe working capacities have been calculated per charts on equipment and will not be overloaded. <input checked="" type="checkbox"/> Safety equipment Discuss safety items such as pop-off valves, fire extinguishers, and communication devices. FIRE EXT. AIR PACKS. | <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Vents Discuss vent lines for frac tanks and bulk tanks. <input checked="" type="checkbox"/> Equipment monitored for leaks during job and contained <input checked="" type="checkbox"/> Equipment wash-up per customers instructions. <input checked="" type="checkbox"/> Equipment drain pans drained in approved containers prior to leaving location. <input checked="" type="checkbox"/> All empty containers must be returned to facility i.e. empty sacks, pails, and drums. <input checked="" type="checkbox"/> Waste handling Discussion of chemical and waste handling procedures. |
|---|---|

4. Contingency Plans for Emergencies

- | | |
|--|--|
| <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Location of eyewash/safety shower station Discuss the location of the eyewash/safety shower station and how to use it.PU, QA, PSW. <input checked="" type="checkbox"/> Assembly points Discuss where to gather in the event of an emergency. LEASE ROAD. <input checked="" type="checkbox"/> Fire fighting Discuss fire fighting responsibilities with the appropriate personnel (trained and equipped personnel only). <input checked="" type="checkbox"/> Wind direction Discuss the wind direction and how it may change the contingency plan such as the assembly area location, and discuss how to detect wind direction on the job site (e.g. windsocks, streamers, etc.). <input checked="" type="checkbox"/> First aid station Point out the location of the first aid kit and who is responsible for administering first aid. PU, QA, PSW. <input checked="" type="checkbox"/> Reporting Spills Discuss measures used for spill reporting. <input checked="" type="checkbox"/> Spill Response Kit Review location of Spill Response Kit. | <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Contaminated soil Discuss procedures for spill / leak cleanup. <input checked="" type="checkbox"/> Injury and accident procedures Discuss personnel responsibilities and procedures in the event of an injury or accident.NOTIFY IMMEDIATELY. <input checked="" type="checkbox"/> Rescue procedures Discuss rescue procedures with the appropriate personnel (trained and equipped). <input checked="" type="checkbox"/> Emergency shut down procedures Discuss when, how, and what to shut down in the event of an emergency. <input checked="" type="checkbox"/> Recovery procedures Discuss how to return to normal operating procedures after an emergency. <input checked="" type="checkbox"/> Nearest hospital The best rout of travel along with everyone understanding which vehicle will be used as the ambulance. |
|--|--|
-
- | | | |
|-------------------|-----------|----------|
| Head count | Employees | 3 |
| | Other | |
| | Total | |

5. Roles and Responsibilities

Communicated Assigned

6. Emergency Escape Procedures (Communicate the following information with all employees on location).

Safe Refuge Area and / or Meeting Point:

Entrance to Location

Note: If wind direction changes do not proceed to gathering point, but rather proceed upwind after observing wind direction indicator.

Evacuation may occur on site because of: (Check appropriate boxes)	The following equipment is required on location: (Check appropriate boxes)
<input type="checkbox"/> Release of H2S above 10 ppm	<input type="checkbox"/> H2S monitors
<input checked="" type="checkbox"/> Blowout	<input type="checkbox"/> Combustible gas monitors
<input checked="" type="checkbox"/> Release of flammable gasses	<input checked="" type="checkbox"/> Wind direction indicator (windsocks, streamers, etc.)
<input checked="" type="checkbox"/> Release of other gasses	<input checked="" type="checkbox"/> Escape respirators (one for each employee)
<input checked="" type="checkbox"/> Fire	<input checked="" type="checkbox"/> Full facepiece positive pressure SCBA

7. Emergency Telephone Numbers and / or Method of Contact

Sheriff:	Hospital (Actual phone numbers other than 911):
Supervisor: Scott Applebee	Customer: Mach III LLC
First Aid Responders on this site (Names):	Designated emergency vehicle & mobile phone # Supervisor PU

Rescue Procedures If emergency rescue is necessary, the following is required: (Check appropriate boxes)

<input checked="" type="checkbox"/> Full facepiece SCBA (30 Minute)	<input checked="" type="checkbox"/> Escape respirators
<input checked="" type="checkbox"/> Protective clothing:	<input type="checkbox"/> Monitoring Equipment:
List: Hard Hat, Steel Toe Boots, Safety Glasses, Ear Plugs, Coveralls, & Gloves	List:

Site Plan (Draw the location, indicate the wind direction, and mark the safe area / meeting point.)

Safety Meeting

10. Postjob Safety Meeting (Note: Enter information into IJR) Date: Time:

Check Appropriate box for each incident event Vehicle Accident No Vehicle Accident

Injury No Injury Spill Near Miss No Near Miss

Location is as clean as when we arrived.

Is follow up with customer needed? Yes No

COMMENTS

Customer Representative Tim Mills	Spinnaker Representative Scott Applebee
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Mach III LLC
Luthi 36-33-11 1H
Barber County
3/7/2022
Intermediate

Ticket # P-4536



COMPANY Mach III LLC	PROJECT NUMBER P-4536	AFE/WORK ORDER DC22011	DATE 3/7/2022
CONTRACTOR Spinnaker Oil	Owner Same	LEGAL DESCRIPTION Sec 36, T33N, R11W	API 15-007-24406
LEASE & WELL # Luthi 36-33-11 1H	COUNTY Barber County	STATE KS	MILEAGE 300
DIRECTIONS			

From Hazelton, KS - Head North 2.25 miles on 1st St./Tri-City Rd., then head West 3.5 miles on Gerlane Rd. Turn North into location. Atlas 3

Pumping Services	<input type="checkbox"/> Surface		<input checked="" type="checkbox"/> Intermediate		<input type="checkbox"/> Long String		<input type="checkbox"/> Plug Back		() H2S	
	<input type="checkbox"/> Squeeze		<input type="checkbox"/> Acid		<input type="checkbox"/> PTA		<input type="checkbox"/> Other			
	Casing Size	Casing Weight	Thread	CSG Grade	Plug. Cont.	Swage	Top Plug	Bottom Plug		% Excess
	7	26.00	TCBC	P-110	Yes	Yes	Yes	Yes		30%
Number and Type Units Pump Truck, 1 ea. 660 Bulk						BHST - F 132	Casing Depth 4908	Depth - TVD - FT 4667	Hole Size - Inches 8 3/4	
Remarks 7" Top & Bottom Plugs, Head, manifold, circulating iron & both adapters						BHCT - F 105	Tubing Depth	Depth - MD - FT 4908	Mud Weight/Type - PPG WBM ~9.2	

BBL OF SPACER	Type		SPACER						
40	Fresh Water		Fresh Water						
BBL OF LEAD	# of Sacks	Type		LEAD CEMENT					
63.6	65	Class A/POZ		65 Sacks 65/35 A/POZ, 12% Gel, 12% Gypsum, 12% SFA, 1.5% SA-2, 0.3 lb/sk Poly Flakes					
H2O REQUIRED	Weight PPG	Yield Ft3/Sk	Water Gal/S						
55.5	10.20	5.49	35.89						
BBL OF TAIL	# of Sacks	Type		TAIL CEMENT					
37.1	150	Class A/POZ		150 Sacks 50/50 A/POZ, 3% Gel, 2% Gypsum, 0.35% SFL-5					
H2O REQUIRED	Weight PPG	Yield Ft3/Sk	Water Gal/S						
23.5	13.80	1.39	6.57						
Displacement	Qty - BBLS	Type	Procedure						
	189.4	Water	Water						

NOTES:

LEAD - BACK POT | TAIL - FRONT POT

Pump time: LEAD - 6:00+ hrs. TAIL - 4:00 hrs

Lead: 1270'-3643' Tail: 3643'-4963

Sales Items	Casing Size	7	Casing Weight	26.00	Thread	
	Guide Shoe		Float Shoe		Float Collar	Insert Float Valve
	Remarks Defoamer, Plugs					

Mach III LLC
 Luthi 36-33-11 1H
 Barber County
 3/7/2022
 Intermediate

Ticket # P-4536



Customer: Mach III LLC
Well Name: Luthi 36-33-11 1H
County: Barber County
State: Kansas
API #: 15-007-24406
Legals: Sec 36, T33N, R11W

Customer Rep:
Mobile:
Job Type: Intermediate
Casing: 7
Field Supervisor:
Date: 3/7/2022
Proposal #: 31580001

Ref. #	Description	Quantity	Unit Price	Sub Total	Total
***** Cementing Service and Materials *****					
MLPU1	Pickup Mileage 1 unit (roundtrip miles)	300	\$3.94	\$1,182.00	\$472.80
MLHE3	Heavy Vehicle Mileage 3 units (roundtrip miles)	300	\$20.34	\$6,102.00	\$2,440.80
MLTN	Bulk Cement Delivery/Return (per Ton-Mile)	1,581	\$2.73	\$4,316.13	\$1,726.45
MXBK	Bulk Material Mixing Service Charge (Per cu.ft.)	215	\$3.03	\$651.45	\$260.58
CMTD	Cement Head with manifold (per Job)	1	\$1,895.00	\$1,895.00	\$758.00
PC6K	Pump Charge 5001-6000' (Per 5 hrs)	1	\$4,325.75	\$4,325.75	\$1,730.30
DAQ	Data Acquisition System	1	\$1,331.00	\$1,331.00	\$532.40
FLSCG	Fuel Surcharge (per unit/per job)	3	\$605.00	\$1,815.00	\$726.00
ENVFEE	Environmental Fee	1	\$211.75	\$211.75	\$84.70
DAMSS	Data Monitoring System/Supervisor	1	\$800.00	\$800.00	\$320.00
CIRON	Circulation Equipment (40' of equipment per job)	1	\$1,512.50	\$1,512.50	\$605.00
CSTD	Class A Type Standard Cement (per sack)	118	\$31.81	\$3,753.58	\$1,501.43
CPOZF	POZ (per sack)	98	\$17.35	\$1,700.30	\$680.12
CEXTGEL	GEL (per lb)	1,100	\$0.63	\$693.00	\$277.20
CEXTGYP	Gypsum (per lb)	931	\$0.54	\$502.74	\$201.10
CEXTSFA	SFA (per lb)	679	\$1.21	\$821.59	\$328.64
CFL5	SFL-5 (per lb)	45	\$18.56	\$835.20	\$334.08
CFWCSA1	SA-2 (per lb)	85	\$19.52	\$1,659.20	\$663.68
CLCMPF	Poly Flake (per lb)	20	\$3.23	\$64.60	\$25.84
Additional Items if used					
PCADD	Primary Pump Unit Addl Hours	0.0	\$594.50	\$0.00	\$0.00
BKADD	Bulk Unit Additional Hours (per unit/per hour)	0.0	\$121.00	\$0.00	\$0.00
VALV12	1" to 2" valves	1	\$393.25	\$393.25	\$157.30
SG36	Swage, 4 1/2" - 13 3/8" (per day)	1	\$423.50	\$423.50	\$169.40
FTRP7	7" Top Rubber Plug	0	\$140.00	\$0.00	\$0.00
CACCCC	Calcium Chloride (per lb)	0	\$1.45	\$0.00	\$0.00
RADIO	Radios (per job)	0	\$135.00	\$0.00	\$0.00
CSUGAR	Sugar (per lb)	0	\$1.47	\$0.00	\$0.00
CDFDIAL	ATF Cement Defoamer (per gal)	10	\$29.50	\$295.00	\$295.00
DERKC	Derrick Charge (Cement Head Stabbing Above 8 ft)	0	\$726.00	\$0.00	\$0.00
WTCMT	Waiting on Cement Head after job (per hours)	0	\$95.00	\$0.00	\$0.00
	Book Price			\$35,284.54	
	Estimated Job Cost (Exclusive of Sales Tax)				\$14,290.82

Signature: _____
 Field Supervisor: **Charles Spracklen**
 Signature: _____
 Customer Rep: _____

Carlos Rendon
Carlos Rendon
 DC22011
 14,290.82

Mach III LLC
 Luthi 36-33-11 1H
 Barber County
 3/7/2022
 Intermediate

Ticket # P-4536



COMPANY Mach III LLC		PROJECT NUMBER P-4536	CUSTOMER REP: 0	DATE 3/7/2022
CONTRACTOR Spinner Oil	Owner Same	LEGAL DESCRIPTION Sec 36, T33N, R11W		
LEASE & WELL # Luthi 36-33-11 1H	COUNTY Barber County	STATE KS	MILEAGE 300	

Customer Job Satisfaction Sheet

We will greatly appreciate if you can fill out a short survey regarding our performance today. Safety and service quality are our top priorities and we want to ensure that we are continually providing the best service possible in the safest manner as possible. These surveys are regularly reviewed and we highly value your opinion. Thank you for your business.

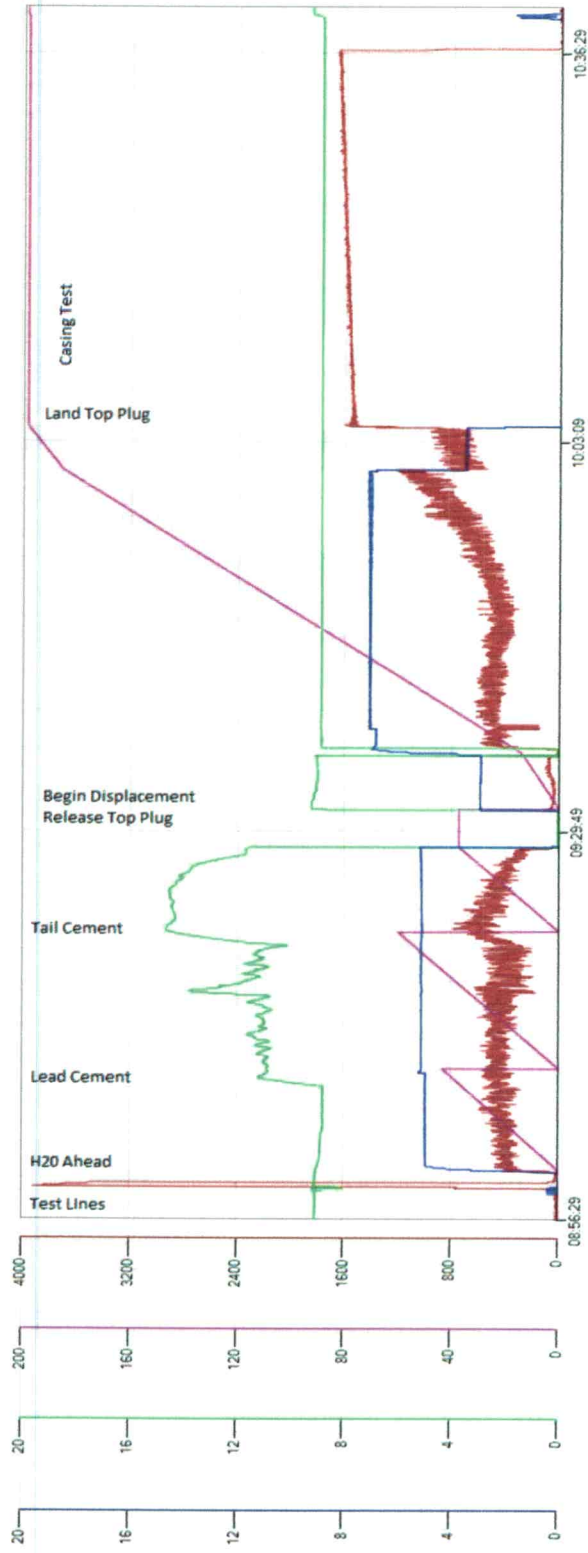
	Poor	Fair	Satisfactory	Great	Outstanding
HSE					✓
Performance of Crew					✓
Performance of Equipment					✓
Service Quality					✓
Job Completed as Agreed					✓

Customer Name (Printed) _____

Customer Signature:  Date: _____

Chart Report

— pressure2 PSI
 — slurryfill EEL
 — density backup PPG
 — rate total BPM



JOB LOG

PROJECT NUMBER	TICKET DATE
P-4536	03/07/22

COMPANY	COUNTRY	STATE	COUNTY
Mach III LLC	USA	KS	Barber County
LEASE NAME	Well No.	EMPLOYEE NAME	CUSTOMER REP
Luthi 36-33-11 1H			
FIELD	SEC / TWP / RNG	TICKET AMOUNT	
	Sec 36, T33N, R11W		
API/UWI #	JOB PURPOSE	WELL TYPE	
15-007-24406	Intermediate		
PUMP #1	309		
PUMP #2			
PUMP #3			

Date	Time	Rate (BPM)	Volume (BBL)(GAL)	Press.(PSI)		Job Description / Remarks
				CSG.	Tbg	
3/6/22	2100					Arrive in yard, Pre travel meeting
	0330					Arrive on location, Pre rig up meeting
	0600					test pump 309
	0800					Safety & Pump Procedure Meeting
	0900				4000	Test Lines
	0902	5.0	40.0		400	Pump 40bbl H2O Ahead 5bpm @ 400psi
	0910	5.0	63.0		460	Pump 63bbl Lead Cement, 5bpm @ 460psi
	0920	5.0	37.0		380	Pump 37bbl Tail Cement, 5bpm @ 380
	0928					Shut Down, Release Top Plug
	0930	7.0			514	Begin Displacement, 7bpm @ 514psi
	0950	7.0	100.0		578	100bbl Pumped, 7bpm @ 578
	0957	7.0	150.0		890	150bbl Pumped, 7bpm @ 890psi
	1000	3.5	170.0		720	Slow Rate to 3.5bpm @ 720psi
	1004		189.0	830	1520	Bump Plug, Final Pressure 830psi, bump to 1520psi hold for 30 min. Casing Test
	1035		2.5			Release Pressure, Floats held with 2.5bbl returns
3/7/2022	1200					Rig down, Leave location

Supervisor Signature: 

Print Name: Charles Spracklen

Thank You For Using
Spinnaker Oilfield Services

EQUIPMENT CHECKLIST

UNIT # 309

1. BEFORE THE JOB – PREPARE

- Power up the unit, ensuring all electronics are functioning, and recalibrate all console pressure gauges to atmospheric pressure
- Check the cement head (visually inspect), vacuum breakers, and dry cement line.
- Prime the truck up and pressure test. Test for Global kick-out, and check martin decker gauges. Note any difference between console and martin decker pressures.
- Function test and pump through the entire plumbing, checking all lines as well as centrifugal and triplex pumps. Check for any packing leaks on the pumping unit. Chart the test.
- Check the bulk equipment; compressors, valves, pop-offs, to make sure it airs up and hold pressure.
- Check the casing cement head, O-rings, adapters (sizes and thread types).
- Check the bulk paperwork, ensuring all correct cement and volumes are on location.
- Check to make sure all chemicals and plugs are on location. Check the auxiliary boost pump, if any.
- Perform a Water Analysis.

2. DURING THE JOB

- Note any pumping issues or any discrepancies on outputs
- Check for any leaks and contain accordingly if any

3. AFTER THE JOB

- Turn in the check list to customer, if requested, and include a copy with packet, and make detailed note of any issues

Supervisor Comments:



(Supervisor Name and Signature)

(Operator Name and Signature)



SERVICE ORDER CONTRACT

Customer Name Mach III LLC

Ticket Number P-4536

Lease & Well Number Luthi 36-33-11 1H

Date 3/7/2022

As consideration, The Above Named customer Agrees:
Spinnaker Oilfield Services Company LLC ("Spinnaker") shall not be responsible for and customer shall secure Spinnaker against any liability for damage to property of customer and of the well owner (if different from customer), unless caused by the willful misconduct or gross negligence of Spinnaker, this provision applying to but not limited to subsurface damage and surface damage arising from subsurface damage, unless an MSA between Spinnaker and above named customer specifies otherwise.

Spinnaker makes no guarantee to the effectiveness of the products, supplies, or materials, nor of the results of any treatment or services. Because of the uncertainty of variable well conditions and the necessity of relying on facts and supporting services furnished by others, Spinnaker personnel will use their best efforts in gathering such information and their best judgment in interpreting it, but because of the uncertainty of variable well conditions and the necessity of relying on facts and supporting services furnished by others except where due to Spinnaker gross negligence or willful misconduct in the preparation or furnishing it.

Invoices payable NET 10 days following the date on the invoice.

Upon customers default in payment of the customers account 15 days past due. Customer agrees to pay interest thereon after at the highest lawful contract rate applicable but never to exceed 18% per annum in the event it becomes necessary to employ an attorney to enforce collection of said account. Customer agrees to pay all collection costs and attorney fees in the amount of 25% of the unpaid account.

Service order: I authorize work to begin per service instructions in accordance with terms and conditions printed on this form and represent that I have authority to accept and sign this order.

I HAVE READ AND UNDERSTAND THIS CONTRACT AND REPRESENT THAT I AM AUTHORIZED TO SIGN THE SAME AS CUSTOMERS AGENT.

Customer Authorized Agent:  _____

Mach III LLC
Luthi 36-33-11 1H
Barber County
3/7/2022
Intermediate

Ticket # P-4536



LOCATION WATER TEST

General Information

Customer: Mach III LLC Date: _____
Sales Order #: P-4536 Time: _____
Lease Name & #: Luthi 36-33-11 1H Water Source: _____
Tested By: Charles Spracklen

Test Results Sample #1

		Standard Range
Temp	_____ ° F	50° to 100° F
pH	<u>6.0</u>	6.0 - 8.0
Sulfates	<u>500</u> mg/L	Less Than 1500 mg/L
Chlorides	<u>1500</u> mg/L	Less Than 3000 mg/L
Lignins & Tannins	<u>NO</u> Yes/No	No

Test Results Sample #2

		Standard Range
Temp	_____ ° F	50° to 100° F
pH	_____	6.0 - 8.0
Sulfates	_____ mg/L	Less Than 1500 mg/L
Chlorides	_____ mg/L	Less Than 3000 mg/L
Lignins & Tannins	_____ Yes/No	No

Remarks:

JOB SAFETY ANALYSIS (JSA)

DATE 3/7/2022	TICKET NUMBER 31580001	CUSTOMER Mach III LLC	LEASE AND WELL NO. Luthi 36-33-11 1H
List of Employees on site (In case of evacuation, check boxes as employees are accounted for - use additional paper if needed)			
<input type="checkbox"/>	Charles Spracklen	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Troy Corley	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Tez Bell	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

2. Discussion of Hazards Found at the Job Site

<p><input checked="" type="checkbox"/> Electrical Discuss location of electrical lines and power sources in relation to equipment and lines. PSW, QA, Light Plant.</p> <p><input checked="" type="checkbox"/> Chemicals Discuss possible exposures to substances such as dusts, Chemicals, vapors, radioactive materials, explosives, and Fla./combustible materials. Provide MSDS sheets, H2S, Gas Flammable gasses. SEE MSDS</p> <p><input checked="" type="checkbox"/> Overhead Discuss overhead hazards (e.g. guy wires, DME, chains, pulleys hazards while on the rig floor or under the rig floor).Rig guy wires.</p> <p><input checked="" type="checkbox"/> Cranes, Masts, Booms Discuss hazards associated with overhead lifting devices. CRANE TRUCK.</p> <p><input checked="" type="checkbox"/> Weather Discuss weather conditions (e.g. heat, cold, ice, snow, rain, wind, dust, visibility, etc.)</p> <p><input checked="" type="checkbox"/> Chemical spills & releases Tote tanks, frac tanks, drums, hose connections and pumps. USE DIAPERS.</p> <p><input checked="" type="checkbox"/> Ignition Sources Discuss possible ignition sources (e.g. engines, electrical equipment, open flames, smoking, etc.) SMOKING, EQUIP, DIESEL.</p> <p><input checked="" type="checkbox"/> Well bore fluids or gasses Discuss shale shaker, frac tanks, return lines and vent lines.</p> <p><input type="checkbox"/> Explosives Handling Discuss hazards of working with and around explosive materials. Restrict the work area to those that have proaper training. Follow approved procedures.</p>	<p><input checked="" type="checkbox"/> Confined Spaces Discuss any required entry into confined spaces (e.g. cellars, tanks, pits.). TANKS, Mt. Mover.LGC Bldr.</p> <p><input checked="" type="checkbox"/> Noise Discuss areas with high noise levels and avoid these areas or provide hearing protection. EQUIP.</p> <p><input checked="" type="checkbox"/> Walking / working surfaces Discuss the terrain where the rig up and job will occur (e.g. boards, limestone, mud, stairways, walkways, the derrick, and the rig floor). HOSES, IRON, EQUIP.</p> <p><input checked="" type="checkbox"/> Lifting Discuss proper lifting techniques and ways to eliminate or reduce heavy lifting such as forklifts, cranes, and sharing the load. CRANE, BUDDY SYS.</p> <p><input checked="" type="checkbox"/> Falling Discuss job procedures requiring work at heights greater than 10 ft. (3.3 m). FALL PROTECTION.Fall protection for tanks.</p> <p><input checked="" type="checkbox"/> Pressure Discuss pressure hazards such as DME and bulk tanks.</p> <p><input checked="" type="checkbox"/> LO / TO Discuss equipment that has been locked or tagged out.</p> <p><input type="checkbox"/> RA Handling Discuss hazards working around different types of radiation. Restrict the work area to those with the proper training. Follow approved Procedures</p>
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3. Hazard Controls

<p><input checked="" type="checkbox"/> Personal protective equipment Discuss required PPE such as respirators, head protection, hearing protection, protective footwear, hand and skin protection, and fall protection. PROPER PPE.</p> <p><input checked="" type="checkbox"/> Physical barriers Discuss items such as hose covers, line tiedowns, guards, railings, and inert gas blankets.</p> <p><input checked="" type="checkbox"/> Weather Discuss control measures for weather factors such as temperature, wind, ice, rain, snow, etc.</p> <p><input checked="" type="checkbox"/> Ignition source controls Discuss control measures for ignition sources such as the use of spark arrestors, emergency shutdown procedures, and NO SMOKING rules.Equip. & Smoking.</p> <p><input checked="" type="checkbox"/> Crane, Masts, Booms Safe working capacities have been calculated per charts on equipment and will not be overloaded.</p> <p><input checked="" type="checkbox"/> Safety equipment Discuss safety items such as pop-off valves, fire extinguishers, and communication devices. FIRE EXT. AIR PACKS.</p>	<p><input checked="" type="checkbox"/> Vents Discuss vent lines for frac tanks and bulk tanks.</p> <p><input checked="" type="checkbox"/> Equipment monitored for leaks during job and contained</p> <p><input checked="" type="checkbox"/> Equipment wash-up per customers instructions.</p> <p><input checked="" type="checkbox"/> Equipment drain pans drained in approved containers prior to leaving location.</p> <p><input checked="" type="checkbox"/> All empty containers must be returned to facility i.e. empty sacks, pails, and drums.</p> <p><input checked="" type="checkbox"/> Waste handling Discussion of chemical and waste handling procedures.</p>
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4. Contingency Plans for Emergencies

<p><input checked="" type="checkbox"/> Location of eyewash/safety shower station Discuss the location of the eyewash/safety shower station and how to use it.PU, QA, PSW.</p> <p><input checked="" type="checkbox"/> Assembly points Discuss where to gather in the event of an emergency. LEASE ROAD.</p> <p><input checked="" type="checkbox"/> Fire fighting Discuss fire fighting responsibilities with the appropriate personnel (trained and equipped personnel only).</p> <p><input checked="" type="checkbox"/> Wind direction Discuss the wind direction and how it may change the contingency plan such as the assembly area location, and discuss how to detect wind direction on the job site (e.g. windsocks, streamers, etc.).</p> <p><input checked="" type="checkbox"/> First aid station Point out the location of the first aid kit and who is responsible for administering first aid. PU, QA, PSW.</p> <p><input checked="" type="checkbox"/> Reporting Spills Discuss measures used for spill reporting.</p> <p><input checked="" type="checkbox"/> Spill Response Kit Review location of Spill Response Kit.</p>	<p><input checked="" type="checkbox"/> Contaminated soil Discuss procedures for spill / leak cleanup.</p> <p><input checked="" type="checkbox"/> Injury and accident procedures Discuss personnel responsibilities and procedures in the event of an injury or accident.NOTIFY IMMEDIATELY.</p> <p><input checked="" type="checkbox"/> Rescue procedures Discuss rescue procedures with the appropriate personnel (trained and equipped).</p> <p><input checked="" type="checkbox"/> Emergency shut down procedures Discuss when, how, and what to shut down in the event of an emergency.</p> <p><input checked="" type="checkbox"/> Recovery procedures Discuss how to return to normal operating procedures after an emergency.</p> <p><input checked="" type="checkbox"/> Nearest hospital The best rout of travel along with everyone understanding which vehicle will be used as the ambulance.</p>
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Head count	Employees	3
	Other	9
	Total	12

5. Roles and Responsibilities

Communicated Assigned

6. Emergency Escape Procedures (Communicate the following information with all employees on location).

Safe Refuge Area and / or Meeting Point:
Entrance to Location

Note: If wind direction changes do not proceed to gathering point, but rather proceed upwind after observing wind direction indicator.

Evacuation may occur on site because of: (Check appropriate boxes)	The following equipment is required on location: (Check appropriate boxes)
<input type="checkbox"/> Release of H2S above 10 ppm	<input type="checkbox"/> H2S monitors
<input checked="" type="checkbox"/> Blowout	<input type="checkbox"/> Combustible gas monitors
<input checked="" type="checkbox"/> Release of flammable gasses	<input checked="" type="checkbox"/> Wind direction indicator (windsocks, streamers, etc.)
<input checked="" type="checkbox"/> Release of other gasses	<input checked="" type="checkbox"/> Escape respirators (one for each employee)
<input checked="" type="checkbox"/> Fire	<input checked="" type="checkbox"/> Full facepiece positive pressure SCBA

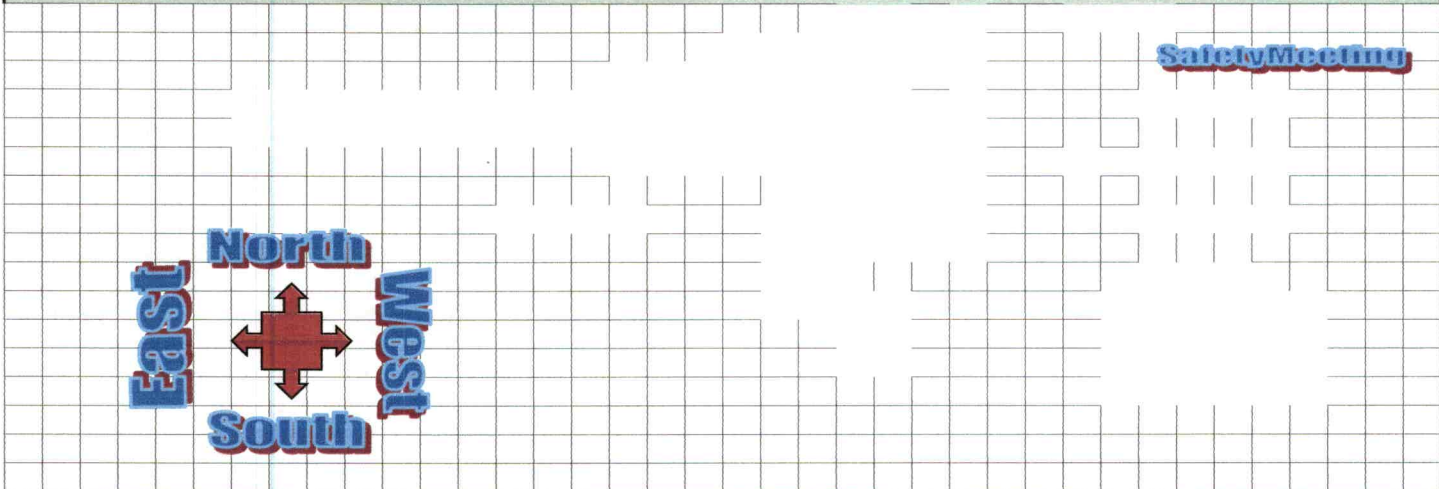
7. Emergency Telephone Numbers and / or Method of Contact

Sheriff: _____ Hospital (Actual phone numbers other than 911): _____
 Supervisor: _____ Customer: **Mach III LLC**
 First Aid Responders on this site (Names): _____ Designated emergency vehicle & mobile phone # **Supervisor PU**

Rescue Procedures If emergency rescue is necessary, the following is required: (Check appropriate boxes)

<input checked="" type="checkbox"/> Full facepiece SCBA (30 Minute)	<input checked="" type="checkbox"/> Escape respirators
<input checked="" type="checkbox"/> Protective clothing:	<input type="checkbox"/> Monitoring Equipment:
List: Hard Hat, Steel Toe Boots, Safety Glasses, Ear Plugs, Coveralls, & Gloves	List:

Site Plan (Draw the location, indicate the wind direction, and mark the safe area / meeting point.)



10. Postjob Safety Meeting (Note: Enter information into IJR) Date: _____ Time: _____

Check Appropriate box for each incident event Vehicle Accident No Vehicle Accident
 Injury No Injury Spill Near Miss No Near Miss
 Location is as clean as when we arrived.
 Is follow up with customer needed? Yes No

COMMENTS

Customer Representative _____ Spinnaker Representative **Charles Spracklen**