

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)</i> <i>(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:	
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## DRILL STEM TEST REPORT

Prepared For: **Triple Crown Operating Llc.**

2201 S Utica ste 100  
Tulsa, OK 74114

ATTN: Pat Deenihan

**Cox #3-35**

**35-20s-22w Ness,KS**

Start Date: 2022.04.25 @ 01:11:00

End Date: 2022.04.25 @ 09:03:02

Job Ticket #: 69076                      DST #: 1

Trilobite Testing, Inc  
PO Box 362 Hays, KS 67601  
ph: 785-625-4778 fax: 785-625-5620

Printed: 2022.04.28 @ 09:07:07

Triple Crown Operating Llc.  
35-20s-22w Ness,KS  
Cox #3-35  
DST # 1  
Miss  
2022.04.25



**TRILOBITE TESTING, INC**

# DRILL STEM TEST REPORT

Triple Crown Operating Llc.

**35-20s-22w Ness,KS**

2201 S Utica ste 100  
Tulsa, OK 74114

**Cox #3-35**

Job Ticket: 69076

**DST#: 1**

ATTN: Pat Deenihan

Test Start: 2022.04.25 @ 01:11:00

## GENERAL INFORMATION:

Formation: **Miss**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 04:13:17

Time Test Ended: 09:03:02

Test Type: Conventional Bottom Hole (Initial)

Tester: Kevin Webster

Unit No: 72

**Interval: 4257.00 ft (KB) To 4326.00 ft (KB) (TVD)**

Reference Elevations: 2171.00 ft (KB)

Total Depth: 4326.00 ft (KB) (TVD)

2166.00 ft (CF)

Hole Diameter: 7.78 inches Hole Condition: Fair

KB to GR/CF: 5.00 ft

**Serial #: 8365 Outside**

Press@RunDepth: 988.00 psig @ 4318.00 ft (KB)

Capacity: psig

Start Date: 2022.04.25

End Date:

2022.04.25

Last Calib.:

2022.04.25

Start Time: 01:11:01

End Time:

09:03:02

Time On Btm:

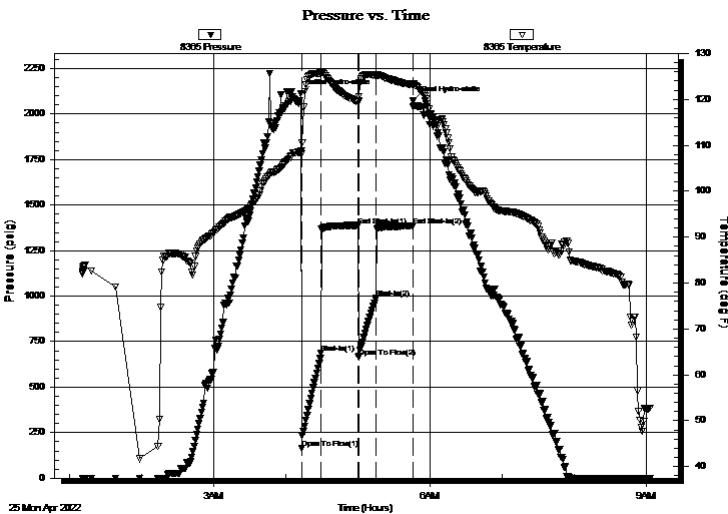
2022.04.25 @ 04:13:02

Time Off Btm:

2022.04.25 @ 05:46:02

**TEST COMMENT:** 15 min IF- Strong blow , BOB 1 min  
30 min IS- No returns  
15 min FF- Strong blow , BOB 1.5 min  
30 min FSI- No returns

## PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2113.05	108.78	Initial Hydro-static
1	165.32	108.16	Open To Flow (1)
17	686.26	125.76	Shut-In(1)
47	1388.67	119.52	End Shut-In(1)
48	663.18	119.62	Open To Flow (2)
62	988.00	125.31	Shut-In(2)
93	1384.04	123.23	End Shut-In(2)
93	2070.90	123.35	Final Hydro-static

## Recovery

Length (ft)	Description	Volume (bbl)
434.00	WCM 40% W 60% M	5.04
1178.00	MCW 95% W 5% M	16.52

## Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE TESTING, INC**

# DRILL STEM TEST REPORT

Triple Crown Operating LLC.

**35-20s-22w Ness, KS**

2201 S Utica ste 100  
Tulsa, OK 74114

**Cox #3-35**

ATTN: Pat Deenihan

Job Ticket: 69076

**DST#: 1**

Test Start: 2022.04.25 @ 01:11:00

## GENERAL INFORMATION:

Formation: **Miss**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 04:13:17

Time Test Ended: 09:03:02

**Interval: 4257.00 ft (KB) To 4326.00 ft (KB) (TVD)**

Total Depth: 4326.00 ft (KB) (TVD)

Hole Diameter: 7.78 inches Hole Condition: Fair

Test Type: Conventional Bottom Hole (Initial)

Tester: Kevin Webster

Unit No: 72

Reference Elevations: 2171.00 ft (KB)

2166.00 ft (CF)

KB to GR/CF: 5.00 ft

**Serial #: 6752 Outside**

Press@RunDepth: psig @ 4318.00 ft (KB)

Start Date: 2022.04.25

End Date:

2022.04.25

Start Time: 01:11:01

End Time:

09:03:02

Capacity: psig

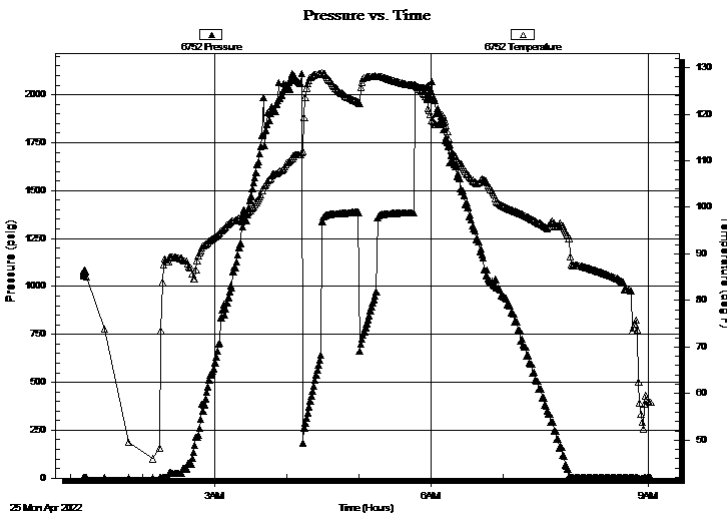
Last Calib.:

2022.04.25

Time On Btm:

Time Off Btm:

**TEST COMMENT:** 15 min IF- Strong blow , BOB 1 min  
30 min ISI- No returns  
15 min FF- Strong blow , BOB 1.5 min  
30 min FSI- No returns



## PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation

## Recovery

Length (ft)	Description	Volume (bbl)
434.00	WCM 40% W 60% M	5.04
1178.00	MCW 95% W 5% M	16.52

## Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE  
TESTING, INC**

# DRILL STEM TEST REPORT

**TOOL DIAGRAM**

Triple Crown Operating Llc.

**35-20s-22w Ness,KS**

2201 S Utica ste 100  
Tulsa, OK 74114

**Cox #3-35**

Job Ticket: 69076

**DST#: 1**

ATTN: Pat Deenihan

Test Start: 2022.04.25 @ 01:11:00

## Tool Information

Drill Pipe:	Length: 4145.00 ft	Diameter: 3.80 inches	Volume: 58.14 bbl	Tool Weight:	2000.00 lb
Heavy Wt. Pipe:	Length: 0.00 ft	Diameter: inches	Volume: 0.00 bbl	Weight set on Packer:	25000.00 lb
Drill Collar:	Length: 115.00 ft	Diameter: 2.25 inches	Volume: 0.57 bbl	Weight to Pull Loose:	78000.00 lb
			<u>Total Volume: 58.71 bbl</u>	Tool Chased	0.00 ft
Drill Pipe Above KB:	30.00 ft			String Weight: Initial	68000.00 lb
Depth to Top Packer:	4257.00 ft			Final	74000.00 lb
Depth to Bottom Packer:	ft				
Interval between Packers:	64.00 ft				
Tool Length:	91.00 ft				
Number of Packers:	2	Diameter: 6.75 inches			
Tool Comments:					

## Tool Description

Tool Description	Length (ft)	Serial No.	Position	Depth (ft)	Accum. Lengths
Shut In Tool	5.00			4235.00	
Hydraulic tool	5.00			4240.00	
Jars	5.00			4245.00	
Safety Joint	3.00			4248.00	
Packer	5.00			4253.00	27.00 Bottom Of Top Packer
Packer	4.00			4257.00	
Stubb	1.00			4258.00	
Perforations	27.00			4285.00	
Change Over Sub	1.00			4286.00	
Drill Pipe	31.00			4317.00	
Change Over Sub	1.00			4318.00	
Recorder	0.00	8365	Outside	4318.00	
Recorder	0.00	6752	Outside	4318.00	
Bullnose	3.00			4321.00	64.00 Bottom Packers & Anchor

**Total Tool Length: 91.00**



**TRILOBITE  
TESTING, INC**

# DRILL STEM TEST REPORT

## FLUID SUMMARY

Triple Crown Operating Llc.

**35-20s-22w Ness,KS**

2201 S Utica ste 100  
Tulsa, OK 74114

**Cox #3-35**

Job Ticket: 69076

**DST#: 1**

ATTN: Pat Deenihan

Test Start: 2022.04.25 @ 01:11:00

### Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

ppm

Viscosity: 48.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 7.19 in<sup>3</sup>

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 4300.00 ppm

Filter Cake: inches

### Recovery Information

Recovery Table

Length ft	Description	Volume bbl
434.00	WCM 40% W 60% M	5.040
1178.00	MCW 95% W 5% M	16.524

Total Length: 1612.00 ft

Total Volume: 21.564 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #:

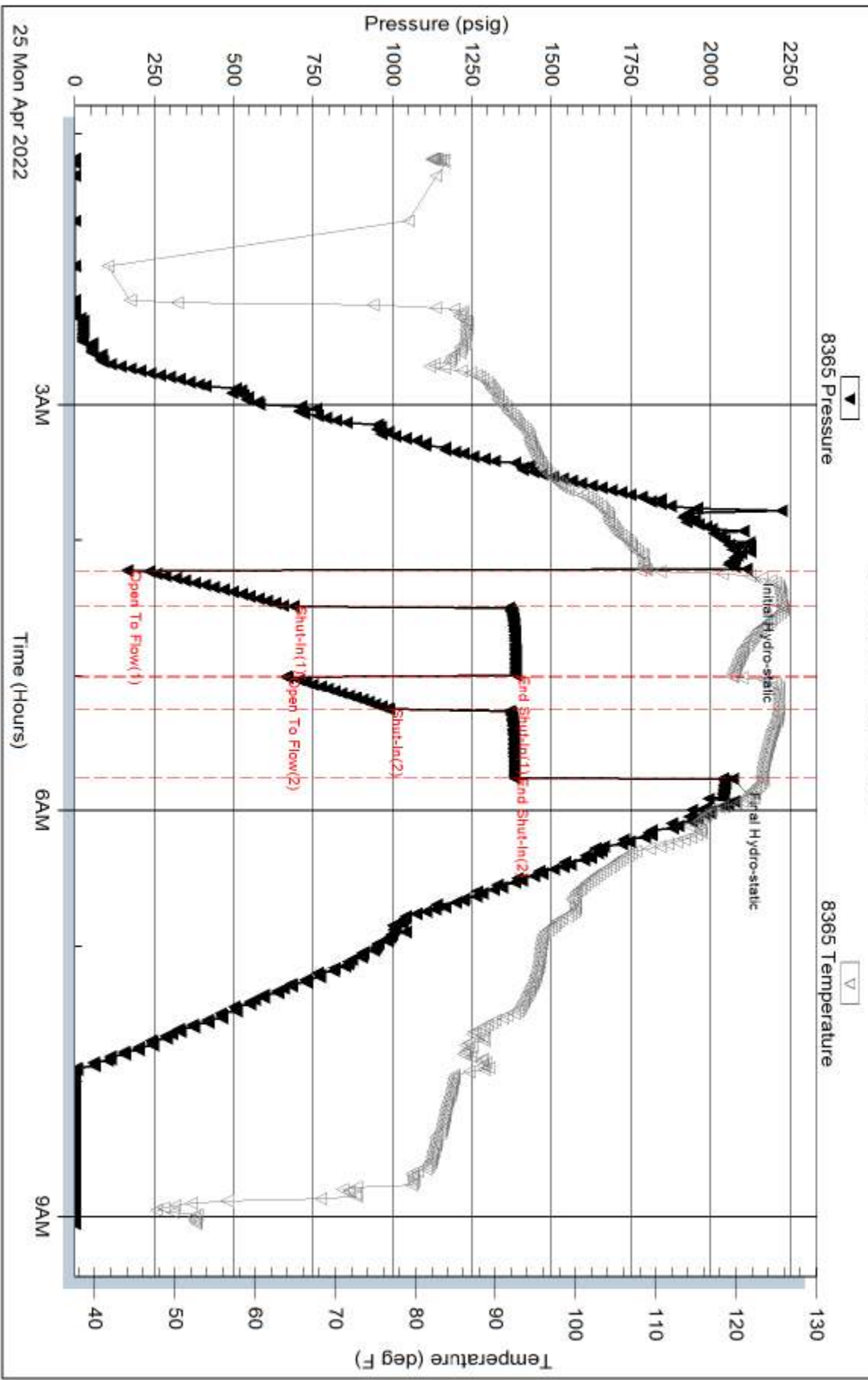
Laboratory Name:

Laboratory Location:

Recovery Comments: 1# LCM



### Pressure vs. Time

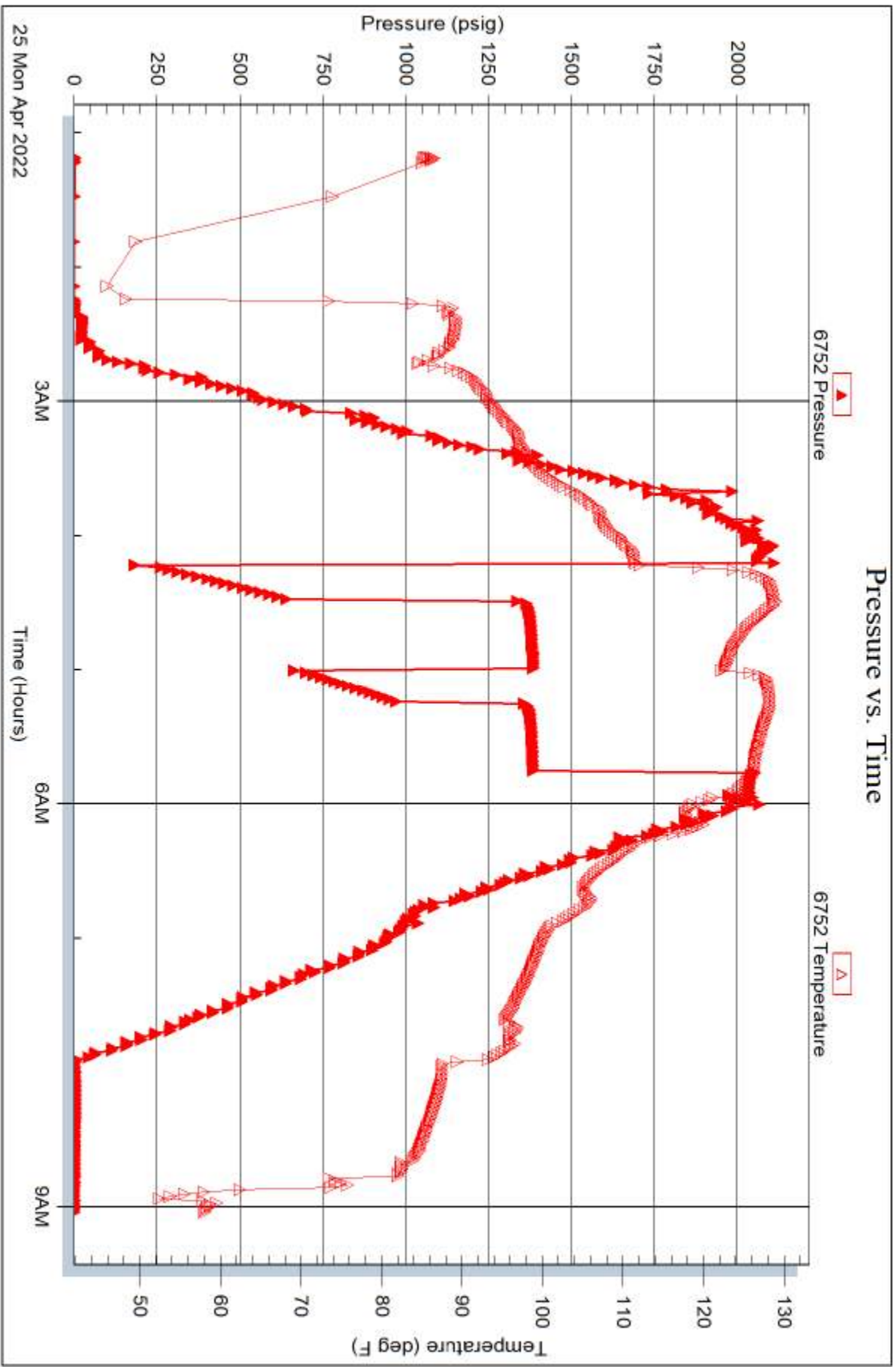


Serial #: 6752

Outside Triple Crown Operating Llc.

Cox #3-35

DST Test Number: 1



Trilobite Testing, Inc

Ref. No: 69076

Printed: 2022.04.28 @ 09:07:09



# TRILOBITE TESTING INC.

1515 Commerce Parkway • Hays, Kansas 67601

## Test Ticket

NO. 69076

Well Name & No. CLX #3-39 Test No. 1 Date 4/24/22  
 Company Triple Crown Operations Elevation 2171 KB 2166 GL  
 Address 2201 S Utica Pl Ste 100 Tulsa, OK 74114  
 Co. Rep / Geo. Pat Deenihan Rig Pickwell #10  
 Location: Sec. 99 Twp 209 Rge. 22W Co. Ness State OK

Interval Tested 4297-4326 Zone Tested MISS  
 Anchor Length 64 Drill Pipe Run 4145 Mud Wt. 9.1  
 Top Packer Depth 4292 Drill Collars Run 115 Vis 48  
 Bottom Packer Depth 4297 Wt. Pipe Run 0 WL 7.2  
 Total Depth 4326 Chlorides 4300 ppm System LCM 1#

Blow Description FF- strong blow, bob 1 min  
1st- NO returns  
FF- strong blow bob 1.5 min  
FF- NO returns

Rec	Feet of	%gas	%oil	%water	%mud
<u>434</u>	<u>WCM</u>		<u>40</u>	<u>60</u>	
<u>1178</u>	<u>MCM</u>		<u>95</u>	<u>5</u>	
Rec	Feet of	%gas	%oil	%water	%mud
Rec	Feet of	%gas	%oil	%water	%mud
Rec	Feet of	%gas	%oil	%water	%mud

Rec Total 1612 BHT Gravity API RW -466 @ 40° F Chlorides 26,000 ppm

(A) Initial Hydrostatic 2113  Test 1950 T-On Location 21:15  
 (B) First Initial Flow 165  Jars 300 T-Started 01:11  
 (C) First Final Flow 686  Safety Joint T-Open 04:15  
 (D) Initial Shut-In 1388  Circ Sub T-Pulled 05:45  
 (E) Second Initial Flow 663  Hourly Standby T-Out 09:00  
 (F) Second Final Flow 984  Mileage 133rt 199.50 Comments  
 (G) Final Shut-In 1384  Sampler  
 (H) Final Hydrostatic 2070  Straddle  EM Tool

Initial Open 15  Shale Packer 250  Ruined Shale Packer  
 Initial Shut-In 30  Extra Packer  Ruined Packer  
 Final Flow 15  Extra Recorder  Extra Copies  
 Final Shut-In 30  Day Standby Sub Total 0  
 Sub Total 2699.50  Accessibility Total 2699.50 MP/DST Disc't

Approved By \_\_\_\_\_ Our Representative lh

Trilobite Testing Inc. shall not be liable for damaged of any kind of the property or personnel of the one for whom a test is made, or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statements or opinion concerning the results of any test, tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.

# FRANKS Oilfield Service

◆ 815 Main Street Victoria, KS 67671 ◆ 24 Hour Phone (785) 639-7269  
 ◆ Office Phone (785) 639-3949 ◆ Email: franksoilfield@yahoo.com

TICKET NUMBER 0568  
 LOCATION Hoxie  
 FOREMAN Tom Williams

## FIELD TICKET & TREATMENT REPORT CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
4-19-22	34876	602 3-35	35	20	22	Ness

CUSTOMER Triple Crown Operating LLC  
 MAILING ADDRESS 2201 S. Utica PL STE 100  
 CITY Tulsa STATE OK ZIP CODE 74114

TRUCK #	DRIVER	TRUCK #	DRIVER
101	Tom W		
102	Jack T		
	Proton D		

JOB TYPE Long String Surface HOLE SIZE 12 1/4" HOLE DEPTH 1376' CASING SIZE & WEIGHT 8 5/8" 23#  
 CASING DEPTH 1375' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 13.2/14.8 SLURRY VOL 2.3 / 1.4 WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 49'  
 DISPLACEMENT 86 Bbl DISPLACEMENT PSI 6000PSI MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: Safe meeting & set up on Pickrell Drilling. Ran in float equipment. Circulated hole mix 375 sack 60/40 8 5/8 w 3% cc followed by 150 sacks class A 3% cc 2% gel. Released plug & displaced 86 Bbl. Release pressure - dead. Rack up move off plug down 10:00 pm

*Thanks Tom + crew*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
PC003	1	PUMP CHARGE <u>Long String Surface</u>	\$1850 <sup>00</sup>	\$1850 <sup>00</sup>
MA01	9.5	MILEAGE	\$450	\$4275 <sup>00</sup>
MA02	25.51	Top Mileage Delivery	\$3635 <sup>18</sup>	\$92825 <sup>18</sup>
LB004	150 sacks	Class A 3% cc 2% gel	\$2450	\$3675 <sup>00</sup>
	375 sacks	60/40 8 5/8 3% cc 1/4# S/S	\$1775	\$6656 <sup>25</sup>
FE036	1	8 5/8" Guide shoe	\$475 <sup>00</sup>	\$475 <sup>00</sup>
FE063	1	8 5/8" AFU insert	\$485 <sup>00</sup>	\$485 <sup>00</sup>
FE017	3	8 5/8" Centralizers	\$140 <sup>00</sup>	\$420 <sup>00</sup>
FE06	1	8 5/8" Top rubber plug	\$215 <sup>00</sup>	\$215 <sup>00</sup>
C				
			subtotal	\$18,078 <sup>93</sup>
			less 15% disc.	\$2711 <sup>94</sup>
			subtotal	\$15,367 <sup>09</sup>
			SALES TAX	661.69
			ESTIMATED TOTAL	16028.78

AUTHORIZATION *Scott P. Lind* TITLE \_\_\_\_\_ DATE \_\_\_\_\_

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.

# FRANKS Oilfield Service

◆ 815 Main Street Victoria, KS 67671 ◆ 24 Hour Phone (785) 639-7269  
 ◆ Office Phone (785) 639-3949 ◆ Email: franksoilfield@yahoo.com

TICKET NUMBER 0576  
 LOCATION Haye  
 FOREMAN Tom Williams

## FIELD TICKET & TREATMENT REPORT CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
4-26-22	34876	Cox J-35	35	20	22	NESS
CUSTOMER Triple Crown Operating LLC			TRUCK #			
MAILING ADDRESS 2201 S Union Pl Ste 100			DRIVER			
CITY Tulsa			TRUCK #			
STATE OK			DRIVER			
ZIP CODE 74114			TRUCK #			
			DRIVER			

JOB TYPE PTA HOLE SIZE \_\_\_\_\_ HOLE DEPTH \_\_\_\_\_ CASING SIZE & WEIGHT \_\_\_\_\_  
 CASING DEPTH \_\_\_\_\_ DRILL PIPE 4 1/2" TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 12.5 SLURRY VOL 2.3 WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING \_\_\_\_\_  
 DISPLACEMENT \_\_\_\_\_ DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: SAFETY meeting & set up on Pitbull Drilling. Plugged as ordered

1	1410	50	5x
2	570	80	5x
3	60'	30	5x
	RH	30	5x
		180	5x

*Thanks Tom*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
PC005	1	PUMP CHARGE PTA	\$1500.00	\$1500.00
MA001	115	MILEAGE	\$6.50	\$747.50
MA002	6.01 tons	Tan Mileage delivered	\$1381.73	\$1381.73
CB010	180	60/40 4.90 gal 1/4 #510	\$16.75	\$3015.00
			sub total	\$6,144.23
			less 15% disc	\$921.63
			sub total	\$5247.40
			SALES TAX	116.58
			ESTIMATED TOTAL	5814.18

AUTHORIZATION [Signature] TITLE \_\_\_\_\_ DATE \_\_\_\_\_

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.