

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1  
September 1999  
Form Must Be Typed

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 32638  
Name: Nadel and Gussman, L.L.C.  
Address: 15 E. 5th St., Suite 3200  
City/State/Zip: Tulsa, OK 74103  
Purchaser: NA  
Operator Contact Person: James Piland  
Phone: (918) 583-3333  
Contractor: Name: Murfin Drilling Co.  
License: 30606

Wellsite Geologist: \_\_\_\_\_  
Designate Type of Completion:  
 New Well     Re-Entry     Workover  
 Oil     SWD     SLOW     Temp. Abd.  
 Gas     ENHR     SIGW  
 Dry     Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:  
Operator: Nadel and Gussman L.L.C.

Well Name: \_\_\_\_\_  
Original Comp. Date: \_\_\_\_\_ Original Total Depth: \_\_\_\_\_  
 Deepening     Re-perf.     Conv. to Enhr./SWD  
 Plug Back     Plug Back Total Depth  
 Commingled    Docket No. \_\_\_\_\_  
 Dual Completion    Docket No. \_\_\_\_\_  
 Other (SWD or Enhr.?)    Docket No. \_\_\_\_\_

<u>9/21/06</u>	<u>9/21/06</u>	<u>9/21/06</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 129-21789-0000  
County: Morton  
SE SW    Sec. 24    Twp. 32    S. R. 43     East  West  
660 feet from S / N (circle one) Line of Section  
2100 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
(circle one)    NE    SE    NW    SW  
Lease Name: Smith Trust    Well #: 1-24  
Field Name: Wildcat  
Producing Formation: None  
Elevation: Ground: 3568'    Kelly Bushing: 3579'  
Total Depth: 5160'    Plug Back Total Depth: Surface  
Amount of Surface Pipe Set and Cemented at 1469' 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 PA AHI NH 6-18-08  
(Data must be collected from the Reserve Pit)  
Chloride content 10,000 ppm    Fluid volume 3,000 bbls  
Dewatering method used Evaporation  
Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name: \_\_\_\_\_  
Lease Name: RECEIVED    License No.: \_\_\_\_\_  
Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_ East West  
County: JAN 16 2007    Docket No.: \_\_\_\_\_

KCC WICHITA

**INSTRUCTIONS:** An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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.

Signature: James Piland  
Title: Manager of Production    Date: 1/8/07  
Subscribed and sworn to before me this 8th day of January,  
19 2007  
Notary Public: \_\_\_\_\_  
Date Commission Expires: 8-1-07

**KCC Office Use ONLY**  
N Letter of Confidentiality Attached  
If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution

Operator Name: Nadel and Gussman, L.L.C. Lease Name: Smith Trust Well #: 1-24  
 Sec. 24 Twp. 32 S. R. 43 East  West County: Morton

**INSTRUCTIONS:** Show important tops and base 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. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  Cores Taken Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i>  List All E. Logs Run:  Array Compensated Resistivity, Microlog, Spectral Density Dual Spaced Neutron, Long Spaced Sonic	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">Log</th> <th style="text-align: left;">Formation (Top), Depth and Datum</th> <th style="text-align: left;">Sample</th> </tr> <tr> <td></td> <td style="text-align: center;">Name</td> <td style="text-align: center;">Top Datum</td> </tr> <tr> <td></td> <td>Wabaunsee</td> <td style="text-align: center;">2710 +869</td> </tr> <tr> <td></td> <td>Topeka</td> <td style="text-align: center;">2944 +635</td> </tr> <tr> <td></td> <td>Hebner Shale</td> <td style="text-align: center;">3292 +287</td> </tr> <tr> <td></td> <td>Lansing</td> <td style="text-align: center;">3388 +171</td> </tr> <tr> <td></td> <td>Atoka</td> <td style="text-align: center;">4368 -789</td> </tr> <tr> <td></td> <td>Mrw</td> <td style="text-align: center;">4560 -981</td> </tr> <tr> <td></td> <td>Mrw F</td> <td style="text-align: center;">4931 -1352</td> </tr> </table>	Log	Formation (Top), Depth and Datum	Sample		Name	Top Datum		Wabaunsee	2710 +869		Topeka	2944 +635		Hebner Shale	3292 +287		Lansing	3388 +171		Atoka	4368 -789		Mrw	4560 -981		Mrw F	4931 -1352
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CASING RECORD <span style="float: right;">New Used</span>							
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
Surface	12-1/4"	8-5/8"	24	1469'	65/35 Poz 'C'	550	6% gel, 2% CaCl & 1/4 pps flakes
					'C'	150	2% CaCl, 1/4 pps flakes

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				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	
				Depth

TUBING RECORD		Size	Set At	Packer At	Liner Run	Yes	No
NA							
Date of First, Resumed Production, SWD or Enhr.		Producing Method					
		Flowing		Pumping		Gas Lift Other (Explain)	
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio		Gravity	

Disposition of Gas  Vented  Sold  Used on Lease  Open Hole  Perf.  Dually Comp.  Commingled \_\_\_\_\_  
 (If vented, Sumit ACO-18.)  Other (Specify) \_\_\_\_\_

PI No.
OTC/OCC Operator No.

**CEMENTING REPORT**  
To Accompany Completion Report

Form 1002C  
(Rev. 1996)

**OKLAHOMA CORPORATION COMMISSION**  
Oil & Gas Conservation Division  
Post Office Box 52000-2000  
Oklahoma City, Oklahoma 73152-2000  
OAC 165:10-3-4(h)

All operators must include this form when submitting the Completion Report, (Form 1002A). The signature on this statement must be that of qualified employees of the cementing company and operator to demonstrate compliance with OAC 165:10-3-4(h). It may be advisable to take a copy of this form to location when cementing work is performed.

**TYPE OR USE BLACK INK ONLY**

*Field Name				OCC District
*Operator Nadel & Gussman				OCC/OTC Operator No
*Well Name/No. CTL 1-9				County Woodward
*Location	1/4	1/4	1/4	1/4
	Sec	9	Twp	24N
			Rge	21E

Cement Casing Data	Conductor Casing	Surface Casing	Alternative Casing	Intermediate Casing	Production String	Liner
Cementing Date		18-Aug-06				
*Size of Drill Bit (Inches)		17 1/2				
*Estimated % wash or hole enlargement used in calculations						
*Size of Casing (inches O.D.)		13 3/8				
*Top of Liner (if liner used) (ft.)						
*Setting Depth of Casing (ft.) from ground level		350				
Type of Cement (API Class)						
In first (lead) or only slurry		H				
In second slurry		H				
In third slurry						
Sacks of Cement Used						
In first (lead) or only slurry		200				
In second slurry		200				
In third slurry						
Vol of slurry pumped (Cu ft)(14.X15.) in first (lead) or only slurry		304				
In second slurry		304				
In third slurry						
Calculated Annular Height of Cement behind Pipe (ft)						
Cement left in pipe (ft)		40				

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**JAN 16 2007**  
**KCC WICHITA**

*Amount of Surface Casing Required (from Form 1000)	ft.
*Was cement circulated to Ground Surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	*Was Cement Staging Tool (DV Tool) used? <input type="checkbox"/> Yes <input type="checkbox"/> No
*Was Cement Bond Log run? <input type="checkbox"/> Yes <input type="checkbox"/> No (If so, Attach Copy)	*If Yes, at what depth? ft

**CEMENTING COMPANY AND OPERATOR MUST COMPLY WITH THE INSTRUCTIONS ON REVERSE SIDE OF FORM**

\* Designates items to be completed by Operator.  
Items not so designated shall be completed by the Cementing Company.

Remarks

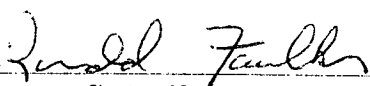
**ADDITIVES**

Lead  
 H+10%A10+.02%Static Free  
 Top Out  
 H+10%A10+.02%Static Free

\*Remarks

**CEMENTING COMPANY**


I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that the cementing of casing in this well as shown in the report was performed by me or under my supervision, and that the cementing data and facts presented on both sides of this form are true, correct and complete to the best of my knowledge. This certification covers cementing data only.



Signature of Cementer or Authorized Representative

**OPERATOR**

I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that I have knowledge of the well data and information presented in this report, and that data and facts presented on both sides of this form are true, correct and complete to the best of my knowledge. This certification covers all well data and information presented herein.



Signature of Operator or Authorized Representative

Name & Title Printed or Typed

Kenneth Massey Service Supervisor  
 Cementing Company

J Services  
 Address

101 Marshal RD.  
 City

Clinton  
 State Zip

OK 73601  
 Telephone (AC) Number

580)323-7070  
 Date

18-Aug-06

Name & Title Printed or Typed

James Piland Manager of Production

\*Operator  
 Nadel and Gussman, LLC

\*Address  
 15 E. 5th St., Suite 3200

\*City  
 Tulsa

\*State Zip

Oklahoma 74103

\*Telephone (AC) Number  
 918/583-3333

\*Date  
 1/11/07

**INSTRUCTIONS**

1. A) This form shall be filed by the operator, at the O.C.C. office in Oklahoma City, as an attachment to the Completion Report (Form 1002A) for a producing well or a dry hole.  
 B) An original of this form shall be filed as an attachment to the Completion Report, (Form 1002A), for each cementing company used on a well.  
 C) The cementing of different casing strings on a well by one cementing company may be consolidated on one form.
2. Cementing Company and Operator shall comply with the applicable portions of OAC 165:10-3-4(h).
3. Set surface casing 50 feet below depth of treatable water to be protected and cement from casing shoe to ground surface or as allowed by OAC 165:10-3-4(h).
4. **IF SETTING ANYTHING OTHER THAN THE FULL AMOUNT OF SURFACE CASING, BE SURE TO FOLLOW CORPORATION COMMISSION RULES.**

PI No.
OTC/OCC Operator No.

**CEMENTING REPORT**  
To Accompany Completion Report

Form 1002  
(Rev. 1996)

**OKLAHOMA CORPORATION COMMISSION**  
Oil & Gas Conservation Division  
Post Office Box 52000-2000  
Oklahoma City, Oklahoma 73152-2000  
OAC 165:10-3-4(h)

All operators must include this form when submitting the Completion Report, (Form 1002A). The signature on this statement must be that of qualified employees of the cementing company and operator to demonstrate compliance with OAC 165:10-3-4(h). It may be advisable to take a copy of this form to location when cementing work is performed.

**TYPE OR USE BLACK INK ONLY**

*Field Name				OCC District	
*Operator <b>Nadel and Gussman</b>				OCC/OTC Operator No	
*Well Name/No. <b>CTL #1-9</b>				County <b>Woodward</b>	
*Location 1/4    1/4    1/4    1/4		Sec <b>9</b>	Twp <b>24N</b>	Rge <b>21E</b>	

Cement Casing Data	Conductor Casing	Surface Casing	Alternative Casing	Intermediate Casing	Production String	Liner
Cementing Date					<b>9-1-2006</b>	
*Size of Drill Bit (Inches)					<b>7 7/8'</b>	
*Estimated % wash or hole enlargement used in calculations						
*Size of Casing (inches O.D.)					<b>5 1/2'</b>	
*Top of Liner (if liner used) (ft.)						
*Setting Depth of Casing (ft.) from ground level						
Type of Cement (API Class) In first (lead) or only slurry					<b>50Poz:50H</b>	
In second slurry					<b>N/A</b>	
In third slurry					<b>N/A</b>	
Sacks of Cement Used In first (lead) or only slurry					<b>240</b>	
In second slurry					<b>N/A</b>	
In third slurry					<b>N/A</b>	
Vol of slurry pumped (Cu ft)(14.X15.) in first (lead) or only slurry					<b>230</b>	
In second slurry					<b>N/A</b>	
In third slurry					<b>N/A</b>	
Calculated Annular Height of Cement behind Pipe (ft)					<b>1500'</b>	
Cement left in pipe (ft)					<b>45</b>	

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**KCC WICHITA**

\*Amount of Surface Casing Required (from Form 1000) \_\_\_\_\_ ft.

*Was cement circulated to Ground Surface? Yes _____ No _____	*Was Cement Staging Tool (DV Tool) used? _____ No _____
*Was Cement Bond Log run? _____ No _____ (If so, Attach Copy)	*If Yes, at what depth? _____ ft

**CEMENTING COMPANY AND OPERATOR MUST COMPLY WITH THE INSTRUCTIONS ON REVERSE SIDE OF FORM**

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Remarks

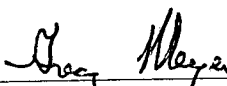
**ADDITIVES**

.25% CD-32 .6% FL-52, 2% gel, .02% Static Free

\*Remarks

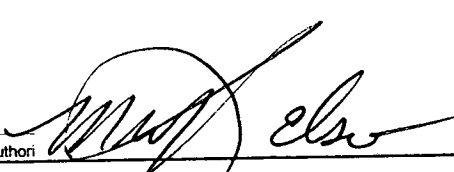
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Operator or Authori

Name & Title Printed or Typed	
<b>Greg Meyer</b>	<b>Service Supervisor</b>
Cementing Company	
<b>B J Services</b>	
Address	
<b>801 Marshal Rd.</b>	
City	
<b>Clinton</b>	
State	Zip
<b>Oklahoma</b>	<b>73601</b>
Telephone (AC) Number	
<b>(581.0) 323 - 7070</b>	
Date	
<b>9-1-2006</b>	

Name & Title Printed or Typed	
<b>James Piland</b>	<b>Manager of Production</b>
*Operator	
<b>Nadel and Gussman, LLC</b>	
*Address	
<b>15 E. 5th St., Suite 3200</b>	
*City	
<b>Tulsa</b>	
*State	
<b>Oklahoma</b>	<b>74103</b>
*Telephone (AC) Number	
<b>918/583-3333</b>	
Date	
<b>1/11/07</b>	

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- IF SETTING ANYTHING OTHER THAN THE FULL AMOUNT OF SURFACE CASING, BE SURE TO FOLLOW CORPORATION COMMISSION RULES.**

# ALLIED CEMENTING CO., INC. 24554

Federal Tax I.D. \_\_\_\_\_

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

SERVICE POINT:

Oakley

DATE <u>9/13/06</u>	SEC. <u>24</u>	TWP. <u>32S</u>	RANGE <u>43W</u>	CALLED OUT	ON LOCATION <u>11:15 PM</u>	JOB START <u>1:55 PM</u>	JOB FINISH <u>2:55 PM</u>
LEASE <u>Smith Trust</u>	WELL # <u>1-24</u>	LOCATION <u>Rich Field 8 1/2 W 15 1/2 N 15 S</u>			COUNTY <u>Morton</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR <del>_____</del> <u>MURFIN #22</u>	OWNER <u>same</u>
TYPE OF JOB <u>Cmt 8 3/8 csg</u>	
HOLE SIZE <u>12 1/4</u>	T.D. <u>1470</u>
CASING SIZE <u>8 3/8</u>	DEPTH <u>1470</u>
TUBING SIZE	DEPTH
DRILL PIPE	DEPTH
TOOL	DEPTH
PRES. MAX <u>750</u>	MINIMUM <u>100</u>
MEAS. LINE	SHOE JOINT <u>43</u>
CEMENT LEFT IN CSG. <u>43</u>	
PERFS.	
DISPLACEMENT <u>90.89</u>	
EQUIPMENT	
PUMP TRUCK # <u>373-281</u>	CEMENTER <u>Max</u>
BULK TRUCK # <u>394</u>	HELPER <u>Dean</u>
BULK TRUCK # <u>386</u>	DRIVER <u>Kelly</u>
	DRIVER <u>Louise</u>

CEMENT			
AMOUNT ORDERED			
<u>550 sks, 65/35 P02 690cc 390cc 4" Flashed</u>			
<u>150 sks, Com 390cc</u>			
COMMON <u>150</u>	@	<u>12.20</u>	<u>1830.00</u>
POZMIX	@		
GEL	@		
CHLORIDE <u>23 sks</u>	@	<u>46.60</u>	<u>1071.80</u>
ASC	@		
<u>Lite weight 550 sks</u>	@	<u>11.30</u>	<u>6215.00</u>
<u>Flo-Seal 138</u>	@	<u>2.00</u>	<u>276.00</u>
	@		
	@		
	@		
	@		
	@		
	@		
HANDLING <u>757</u>	@	<u>1.90</u>	<u>1438.30</u>
MILEAGE <u>98/15k/mi</u>			<u>4769.10</u>
TOTAL			<u>15600.20</u>

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REMARKS:

Cmt 8 3/8 Surface Csg with 550 sks  
Lite + 150 sks Com Drop Plug  
Displace 91 HBL Land Plug  
Float Head Cement Did  
Circulate

SERVICE

DEPTH OF JOB	<u>1470</u>		
PUMP TRUCK CHARGE			<u>1610.00</u>
EXTRA FOOTAGE	@		
MILEAGE <u>70 mi</u>	@	<u>6.00</u>	<u>420.00</u>
MANIFOLD	@		
	@		
	@		
TOTAL			<u>2030.00</u>

CHARGE TO: Nadel + Gussman  
STREET \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PLUG & FLOAT EQUIPMENT

<u>1-8 3/8 Rubber Plug</u>	@		<u>100.00</u>
<u>1-8 3/8 Guide Shoe</u>	@		<u>235.00</u>
<u>1-8 3/8 AFU Insert</u>	@		<u>325.00</u>
<u>5-8 3/8 Centralizers</u>	@	<u>55.00</u>	<u>275.00</u>
	@		
TOTAL			<u>935.00</u>

To Allied Cementing Co., Inc.  
You are hereby requested to rent cementing equipment and furnish cementer and helper 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 & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX \_\_\_\_\_  
TOTAL CHARGE \_\_\_\_\_  
DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS

SIGNATURE John May

John May  
PRINTED NAME

# ALLIED CEMENTING CO., INC. 24646

Federal Tax I.D.#

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

SERVICE POINT:

OARDON KS

DATE <u>9-21-06</u>	SEC <u>24</u>	TWP. <u>32</u>	RANGE <u>43w</u>	CALLED OUT	ON LOCATION <u>6:00pm</u>	JOB START <u>6:30am</u>	JOB FINISH <u>9:30pm</u>
LEASE <u>Smith Trust</u>	WELL# <u>1-24</u>	LOCATION <u>Richfield 8 1/2 w-1s</u>		COUNTY <u>Morton</u>	STATE <u>KS</u>		
OLD OR <input checked="" type="radio"/> NEW (Circle one)			<u>1/2 w n in</u>				

CONTRACTOR Morton #22  
 TYPE OF JOB PTA  
 HOLE SIZE 7 7/8 T.D.  
 CASING SIZE DEPTH  
 TUBING SIZE DEPTH  
 DRILL PIPE 4 1/2 DEPTH 3350'  
 TOOL DEPTH  
 PRES. MAX MINIMUM  
 MEAS. LINE SHOE JOINT  
 CEMENT LEFT IN CSG. 4-1.56  
 PERFS. W-13.0  
 DISPLACEMENT water 7.8 gal/sk

OWNER same  
 CEMENT  
 AMOUNT ORDERED 225 60/40 690  
gal 1 1/4 # FB-seal

COMMON	<u>135</u>	@ <u>12 20</u>	<u>1647 00</u>
POZMIX	<u>90</u>	@ <u>6 10</u>	<u>549 00</u>
GEL	<u>12</u>	@ <u>16 65</u>	<u>199 80</u>
CHLORIDE		@	
ASC		@	
		@	
	<u>Flt-seal 56 #</u>	@ <u>2 00</u>	<u>112 00</u>

EQUIPMENT  
 PUMP TRUCK CEMENTER Fuzzy  
 # 373 HELPER Harry  
 BULK TRUCK  
 # 377 DRIVER Darin  
 BULK TRUCK  
 # DRIVER

RECEIVED  
 JAN 16 2007  
 KCC WICHITA

HANDLING	<u>239</u>	@ <u>1 90</u>	<u>454 10</u>
MILEAGE	<u>.09 x 5 # 4 mile</u>		<u>1505 20</u>
TOTAL			<u>4467 60</u>

REMARKS:  
100 SKS @ 3350'  
50 SKS @ 1470'  
30 SKS @ 480'  
20 SKS @ 60'  
15 SKS in AH  
10 SKS in MH  
Job complete @ 9:30pm  
Thanks Fuzzy & crew

SERVICE

DEPTH OF JOB	<u>3350'</u>		
PUMP TRUCK CHARGE			<u>955 00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>70</u>	@ <u>6 00</u>	<u>420 00</u>
MANIFOLD		@	
		@	
		@	

CHARGE TO: Nadel + Gussman LLC  
 STREET \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TOTAL 1375 00

PLUG & FLOAT EQUIPMENT

	@	
	@	
	@	
	@	
	@	

TOTAL [scribble]

To Allied Cementing Co., Inc.  
 You are hereby requested to rent cementing equipment and furnish cementer and helper 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 & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX \_\_\_\_\_  
 TOTAL CHARGE \_\_\_\_\_  
 DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS

SIGNATURE [Signature]

M.W. Kelso  
 PRINTED NAME