

RECEIVED  
APR 27 2006  
KCC WICHITA

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
WELL COMPLETION FORM

Form ACO-1  
September 1999  
Form Must Be Typed

ORIGINAL

WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 4058  
Name: American Warrior, Inc.  
Address: P. O. Box 399  
City/State/Zip: Garden City, KS 67846  
Purchaser: NCRA  
Operator Contact Person: Joe Smith  
Phone: (620) 275-2963  
Contractor: Name: Discovery Drilling Co., Inc.  
License: 31548  
Wellsite Geologist: Steven P. Murphy, PG

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: \_\_\_\_\_  
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. \_\_\_\_\_

2-24-06 3-2-06 3-22-06  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date Recompletion Date

API No. 15 - 163-23,519-00-07  
County: Rooks  
NE NE NE Sec. 8 Twp. 10 S. R. 20  East  West  
330 FNL feet from S / N (circle one) Line of Section  
330 FEL feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW SW  
Lease Name: Wanker Well #: 2-8  
Field Name: Marcotte

Producing Formation: Arbuckle  
Elevation: Ground: 2212' Kelly Bushing: 2220'  
Total Depth: 3870' Plug Back Total Depth: 3842'  
Amount of Surface Pipe Set and Cemented at 222' Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set 1672' Feet  
If Alternate II completion, cement circulated from 1672'  
feet depth to Surface w/ 160 sx cmt.

Drilling Fluid Management Plan AH II NGR  
(Data must be collected from the Reserve Pit) 10-31-08  
Chloride content 12,000 ppm Fluid volume 300 bbls  
Dewatering method used Evaporation  
Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name: \_\_\_\_\_  
Lease Name: \_\_\_\_\_ License No.: \_\_\_\_\_  
Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West  
County: \_\_\_\_\_ Docket No.: \_\_\_\_\_

**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: [Signature]  
Title: Compliance Coordinator Date: 4-25-06

Subscribed and sworn to before me this 25<sup>th</sup> day of APRIL, 2006.

Notary Public: [Signature]  
Date Commission Expires: 09-12-09

**ERICA KUHLMIEIER**  
Notary Public - State of Kansas  
My Appt. Expires 09-12-09

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

Operator Name: American Warrior, Inc. Lease Name: Wanker Well #: 2-8  
 Sec. 8 Twp. 10 S. R. 20  East  West County: Rooks

**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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> 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:  Microresistivity Log, Borehole Compensated Sonic Log, Dual Compensated Porosity Log, Dual Induction Log, Sonic Cement Bond Log,	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Anhydrite</td> <td>1714</td> <td>+506</td> </tr> <tr> <td>B. Anhydrite</td> <td>1752</td> <td>+468</td> </tr> <tr> <td>Topeka</td> <td>3246</td> <td>-1026</td> </tr> <tr> <td>Heebner</td> <td>3451</td> <td>-1231</td> </tr> <tr> <td>Lansing</td> <td>3489</td> <td>-1269</td> </tr> <tr> <td>BKC</td> <td>3708</td> <td>-1488</td> </tr> <tr> <td>Arbuckle</td> <td>3802</td> <td>-1582</td> </tr> </table>	Name	Top	Datum	Anhydrite	1714	+506	B. Anhydrite	1752	+468	Topeka	3246	-1026	Heebner	3451	-1231	Lansing	3489	-1269	BKC	3708	-1488	Arbuckle	3802	-1582
Name	Top	Datum																							
Anhydrite	1714	+506																							
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Arbuckle	3802	-1582																							

CASING RECORD <input checked="" 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
Surface Pipe	12-1/4"	8-5/8"	23#	222'	Common	150 sx	3% cc 3% gel
Production Pipe	7-7/8"	5-1/2"	14#	3869'	EA2	150sx	Flocele

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose: <input checked="" type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	Depth Top Bottom 1672'	Type of Cement SMD	#Sacks Used 160 sx	Type and Percent Additives

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
4	3804' to 3807'	3000 GAL, 15%	
		<b>RECEIVED</b>	
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		<b>KCC WICHITA</b>	

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2-7/8"	3842'	None	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. N/A			Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)		
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	N/A	N/A	N/A		

Disposition of Gas  Vented  Sold  Used on Lease *(If vented, Submit ACO-18.)*

METHOD OF COMPLETION  Open Hole  Perf.  Dually Comp.  Commingled  Other (Specify) \_\_\_\_\_

Production Interval \_\_\_\_\_



CHARGE TO: *American Drilling*

ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP CODE: \_\_\_\_\_

TICKET  
# 9177

PAGE 1 OF 1

SERVICE LOCATIONS 1. <i>11076-175</i>	WELL/PROJECT NO. <i>100</i>	LEASE <i>Winkler</i>	COUNTY/PARISH <i>Woods</i>	STATE <i>IA</i>	CITY	DATE <i>03/30/06</i>	OWNER
2. <i>NESS CITY IA</i>	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR	RIG NAME/NO. <i>Exp. W. 1</i>	SHIPPED VIA <i>F.I.</i>	DELIVERED TO <i>Winkler, Pelouk</i>	ORDER NO.	
3.	WELL TYPE <i>Oil</i>	WELL CATEGORY <i>Drilling</i>	JOB PURPOSE <i>CMF 2. + 5.000</i>	WELL PERMIT NO.	WELL LOCATION		
4.	REFERRAL LOCATION	INVOICE INSTRUCTIONS					

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UM		UNIT PRICE	AMOUNT	
		LOC	ACCT	DF								
<i>57X</i>		<i>1</i>			MILEAGE <i>10</i>	<i>40</i>	<i>mi</i>			<i>4.00</i>	<i>160</i>	<i>00</i>
<i>577</i>		<i>1</i>			<i>Per. Service</i>	<i>1</i>	<i>hr</i>	<i>1672</i>	<i>hr</i>	<i>12.50</i>	<i>1250</i>	<i>00</i>
		<i>4</i>			<i>Per. Caller Tool</i>	<i>1</i>	<i>hr</i>	<i>5 1/2</i>	<i>hr</i>	<i>250.00</i>	<i>250</i>	<i>00</i>
		<i>2</i>			<i>2.00 CMF</i>	<i>160</i>	<i>hr</i>			<i>12.00</i>	<i>1920</i>	<i>00</i>
		<i>2</i>			<i>Flare</i>	<i>401</i>	<i>hr</i>			<i>1.25</i>	<i>501</i>	<i>00</i>
		<i>2</i>			<i>Service Call CMF</i>	<i>17</i>	<i>hr</i>			<i>1.10</i>	<i>192</i>	<i>50</i>
		<i>2</i>			<i>Driggs</i>	<i>345</i>	<i>hr</i>			<i>1.00</i>	<i>345</i>	<i>48</i>

**LEGAL TERMS:** Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X *[Signature]*

DATE SIGNED: \_\_\_\_\_ TIME SIGNED: *14:00*  A.M.  P.M.

REMIT PAYMENT TO:

SWIFT SERVICES, INC.  
P.O. BOX 466  
NESS CITY, KS 67560  
785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL	<i>4176</i>	<i>98</i>
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?						
WE UNDERSTOOD AND MET YOUR NEEDS?						
OUR SERVICE WAS PERFORMED WITHOUT DELAY?						
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?						
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES <input type="checkbox"/> NO					
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				TOTAL	<i>4294</i>	<i>91</i>

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR: *[Signature]*

APPROVAL: \_\_\_\_\_

Thank You!

**JOB LOG**

**SWIFT Services, Inc.**

DATE 02/20/06 PAGE NO. 1

CUSTOMER AWZ WELL NO. 28 LEASE 12 a/c Job TYPE CMT 2-1/2" Casing TICKET NO. 9177

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1125							DRILLING SW. S.I.
								12-1/2" Casing to 11' Floor
								2 1/2" Casing - 11' Base P.C. @ 1672
	1150		1.0	✓		1000	1000	7.0 Test Tubing Casing
	1155		0	✓		450		Open P.C.
			3	✓		450		good flow on 11' - 5' 1/2"
		5.0	0	✓		500		Start 11' casing Smooth Casing @ 11.2 1/2"
		5.0	25	✓		500		After 4' Casing Casing mud out 8 7/8"
		5.0	50	✓		500		
		5.0	60	✓		500		
		5.0	85	✓		600		Good Casing out 8 7/8" Thick Casing 14.0 1/2"
		5.0	95	✓		700		End Casing
	1520	4.0	0	✓		700		Start Drilling
	1525	4.0	5.5	✓		700		End Drilling
	1525							Close Port Casing
	1530			✓	✓	1000	1000	psi Test Holding
								Run 3' Torque
	1535	3.0	0	✓			400	Run out Casing
		3.0	57	✓			400	1st Flg
		2.0	1.7	✓			300	Clean
		2.0	10.0	✓			300	2nd Flg
		3.0	11.0	✓			200	Clean
	1540	3.0	15.0	✓			500	End Run out
								Full Test P.C. Test
								Wash Up
								Reckup
								Tickets
	1630							Job Complete

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Thank You!  
Dave Pickens, Brett



CHARGE TO: American Operator  
 ADDRESS:  
 CITY, STATE, ZIP CODE:

TICKET No 9167

PAGE 1 OF 2

1. SERVICE LOCATIONS <u>HAKSIS</u>	WELL/PROJECT NO. <u>2-8</u>	LEASE <u>Winter</u>	COUNTY/PARISH <u>Rooks</u>	STATE <u>Mo</u>	CITY	DATE <u>03-02-06</u>	OWNER
2. <u>NESS CITY KS</u>	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR	RIG NAME/NO. <u>Discovery Data Rig #3</u>	SHIPPED VIA <u>CT</u>	DELIVERED TO <u>3 1/2 hrs. W. N. into Pelande</u>	ORDER NO.	
3.	WELL TYPE <u>Oil</u>	WELL CATEGORY <u>Develop</u>	JOB PURPOSE <u>5 1/2 long string</u>	WELL PERMIT NO. <u>15-163-23519-00-00</u>	WELL LOCATION <u>S8, T10, R20W</u>		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LOC	ACCT	DF		QTY.	UM	QTY.	UM	
575		1			MILEAGE #105	40	mi	4	00	1600 00
578		1			Pump Service	1	cc	3270	FT	1250 00
201		1			Liquid WCL	2	gal	26	00	52 00
281		1			Med Flush	500	cc	75		375 00
290		1			D Air	2	gal	20	00	40 00
403		1			Centriflizer	7	es	5 1/2	in	60 00
403		1			Centriflizer	1	es	5 1/2	in	230 00
404	RECEIVED	1			Port Collet #0510116	1	es	5 1/2	in	2000 00
406	APR 27 2006	1			Loose Down Plug & Bezzle	1	cc	5 1/2	in	210 00
407	KCC WICHITA	1			Insert Foot Shoe w/ Auto Fill	1	es	5 1/2	in	250 00
419		1			Rotating Head Rental	1	cc	5 1/2	in	250 00

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MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

x Adrian Gaudin

DATE SIGNED 03-02-06 TIME SIGNED 0900  A.M.  P.M.

REMIT PAYMENT TO:  
 SWIFT SERVICES, INC.  
 P.O. BOX 466  
 NESS CITY, KS 67560  
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE		
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				Pg-1	5237 00
WE UNDERSTOOD AND MET YOUR NEEDS?				Pg-2	2609 68
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				sub	
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				Totals	7,846 68
ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO				Rooks TAX 5.3%	315 80
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				TOTAL	8162 48

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR Adrian Gaudin APPROVAL

Thank You!



PO Box 466  
Ness City, KS 67560  
Off: 785-798-2300

TICKET CONTINUATION

TICKET No. 9167

CUSTOMER American Warrior	WELL 2-8 Warner	DATE 03-02-06	PAGE 2	OF 2
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PRICE REFERENCE	SECONDARY REFERENCE PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY		U/M		UNIT PRICE	AMOUNT	
		ROC	ACCT	DEF			QTY	U/M	QTY	U/M			
325		2				Standard CM7 EA-2	150	SK			9.60	1440	00
276		2				Floek	38	lb			1.25	47	50
283		2				Salt	750	lbs			.20	150	00
284		2				Calseal	7	SK			30.00	210	00
285		2				CMR	71	lbs			4.00	284	00
581		2				Service Chg CM7	150	SK			1.10	165	00
583		2				Dryice	313.18	Tm			1.00	313	18
						SERVICE CHARGE			CUBIC FEET				
						MESSAGE CHARGE	TOTAL WEIGHT	LOADED MILES	TON MILES				

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CONTINUATION TOTAL 2,609.68

**JOB LOG**

**SWIFT Services, Inc.**

DATE 03-02-06 PAGE NO. 1

CUSTOMER AVI WELL NO. 28 LEASE Winkler JOB TYPE 5 1/2 Long String TICKET NO. 9167

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0905							ONLOCATION, Divers Job 150 SWS EA-2 CM7 1/4" Flook 5 1/4 1 1/4 cas Port Collar @ 1677' Tip off S2 TD 3870, TA 3866, SJ P. 74, Inset 3846 Cent 1, 3, 5, 7, 9, 11, 51, Basket on 52
	1000							Start CS4 a Flook E/W
	1130							Tag Bottom
	1135							Drop ball
	1140							Hookup
	1145							Back c.c. a B stop pipe
	1210		3					Plug Ret Hole
	1215	6.0	0				200	Start Mud Flush
			12					Start HCL Flush
			32					end Flush
	1220	5.5	0				200	Start Mixing CM7
			34					
								Wash Pumping Line Drop Catch down Plug
	1230		0				100	Start Plug
			30				200	
			60				200	CM7 on bottom
			70				350	Stop Rotating pipe
			80				500	
			90				650	
	1250		93.1				1500	Land Plug Release ps: <del>500</del> Flook # Plug Holders
								Washup Packup Tickets
	1330							Job Complete

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Thank You!  
Dave, Plains, Lub

# ALLIED CEMENTING CO., INC. 25070

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

SERVICE POINT: Russell

DATE <u>2/24/06</u>	SEC <u>8</u>	TWP. <u>10</u>	RANGE <u>20 W</u>	CALLED OUT	ON LOCATION <u>5:30 pm</u>	JOB START <u>5:45 pm</u>	JOB FINISH <u>6:10 pm</u>
LEASE <u>Wanker</u>	WELL# <u>2-8</u>	LOCATION <u>Palco 35 1/2 W Sinto</u>		COUNTY <u>Rooks</u>	STATE <u>Ks</u>		

OLD OR (NEW) (Circle one)

CONTRACTOR Discovery Drilling Rig #3

TYPE OF JOB Surface Job

HOLE SIZE 12 1/4 T.D. 223

CASING SIZE 8 5/8 DEPTH 224.24

TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_

DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_

TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_

PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_

MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_

CEMENT LEFT IN CSG. 15'

PERFS. \_\_\_\_\_

DISPLACEMENT 13.3661

OWNER \_\_\_\_\_

CEMENT AMOUNT ORDERED 150 Con 3% CC

2% Gel

COMMON	<u>150</u>	@	<u>960</u>	<u>1440.00</u>
POZMIX		@		
GEL	<u>3</u>	@	<u>15.00</u>	<u>45.00</u>
CHLORIDE	<u>5</u>	@	<u>42.00</u>	<u>210.00</u>
ASC		@		

**EQUIPMENT**

PUMP TRUCK CEMENTER Shane

# 366 HELPER Glen

BULK TRUCK

# 410 DRIVER Brian

BULK TRUCK

# \_\_\_\_\_ DRIVER \_\_\_\_\_

<b>RECEIVED</b>	@		
<b>APR 27 2006</b>	@		
<b>KCC WICHITA</b>	@		
HANDLING	<u>158</u>	@	<u>170</u>
MILEAGE	<u>7 1/2 mile</u>	@	<u>608.30</u>
			<b>TOTAL</b> <u>2571.90</u>

**REMARKS:**

Cement Cure!

**SERVICE**

DEPTH OF JOB			
PUMP TRUCK CHARGE			<u>735.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>55</u>	@	<u>500</u>
MANIFOLD		@	
			<b>TOTAL</b> <u>1010.00</u>

CHARGE TO: American Warrior

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**PLUG & FLOAT EQUIPMENT**

		@	
		@	
	<u>8 1/2 wood Plug</u>	@	<u>55.00</u>
			<b>TOTAL</b> <u>55.00</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

Thanks!

SIGNATURE John Swartz

PRINTED NAME \_\_\_\_\_