

ORIGINAL

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
September 1999  
Form Must Be Typed

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 4058  
Name: American Warrior, Inc.  
Address: PO Box 399 6' S & 70' E  
City/State/Zip: Garden City, KS 67846  
Purchaser: NCRA  
Operator Contact Person: Scott Corsair  
Phone: (785) 398-2270  
Contractor: Name: Petromark Drilling, LLC  
License: 33323  
Wellsite Geologist: Scott Corsair

Designate Type of Completion:  
 New Well  Re-Entry  Workover  
 Oil  SWD  SIOW  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. \_\_\_\_\_

4/11/2006 4/20/2006 6/19/2006  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date Recompletion Date

API No. 15 - 135-24467-00-00  
County: Ness  
N/2 NW SW Sec. 20 Twp. 19 S. R. 21  East  West

2250 feet from S / N (circle one) Line of Section  
730 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW SW  
Lease Name: Rein Well #: 3-20

Field Name: Schaben  
Producing Formation: Mississippian

Elevation: Ground: 2289' Kelly Bushing: 2295'  
Total Depth: 4419' Plug Back Total Depth: NA

Amount of Surface Pipe Set and Cemented at 221 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set 2482 Feet

If Alternate II completion, cement circulated from 2482'  
feet depth to surface w/ 275 sx cmt.

Drilling Fluid Management Plan Air II NR  
(Data must be collected from the Reserve Pit) 11-12-08  
Chloride content 45,000 ppm Fluid volume 750 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: Petroleum Engineer Date: 7/11/2006

Subscribed and sworn to before me this 11th day of July

19 2006  
Notary Public: Bernice Moore

Date Commission Expires: 2/7/10



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

RECEIVED

JUL 26 2006

KCC WICHITA

Operator Name: American Warrior, Inc. Lease Name: Rein Well #: 3-20  
 Sec. 20 Twp. 19 S. R. 21  East  West County: Ness

**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:  Dual Induction, Neutron/Density	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td><input checked="" type="checkbox"/> Log</td> <td>Formation (Top), Depth and Datum</td> <td><input type="checkbox"/> Sample</td> </tr> <tr> <td>Name</td> <td>Top</td> <td>Datum</td> </tr> <tr> <td>Anhydrite</td> <td>1505</td> <td>+790</td> </tr> <tr> <td>Chase</td> <td>2402</td> <td>-107</td> </tr> <tr> <td>Hæbner</td> <td>3770</td> <td>-1475</td> </tr> <tr> <td>Lansing</td> <td>3817</td> <td>-1522</td> </tr> <tr> <td>Ft. Scott</td> <td>4304</td> <td>-2009</td> </tr> <tr> <td>Cherokee</td> <td>4322</td> <td>-2027</td> </tr> <tr> <td>Mississippian</td> <td>4398</td> <td>-2103</td> </tr> <tr> <td>TD</td> <td>4419</td> <td>-2124</td> </tr> </table>	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample	Name	Top	Datum	Anhydrite	1505	+790	Chase	2402	-107	Hæbner	3770	-1475	Lansing	3817	-1522	Ft. Scott	4304	-2009	Cherokee	4322	-2027	Mississippian	4398	-2103	TD	4419	-2124
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TD	4419	-2124																													

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	12 1/4"	8 5/8"	23	221'	common	160	2% gel, 3% CC
Production	7 7/8"	5 1/2"	15.5	4415'	EA-2	150	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	2482'-surf.	SMD	275	

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

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		2 3/8"	4410'			
Date of First, Resumed Production, SWD or Enhr.			Producing Method			
6/19/2006			<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	
	35		3			

Disposition of Gas	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<input checked="" type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify)	4415-4419'



CHARGE TO:  
**AMERICAN WARRIOR INC.**  
 ADDRESS:  
 CITY, STATE, ZIP CODE:

TICKET  
 № **10069**

PAGE **1** OF **2**

SERVICE LOCATIONS 1. <b>NESS CITY, KS</b>	WELL/PROJECT NO. <b>3-20</b>	LEASE <b>REIN</b>	COUNTY/PARISH <b>NESS</b>	STATE <b>Ks</b>	CITY	DATE <b>4-20-06</b>	OWNER <b>SAME</b>
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <b>PETRO MARK DRIG.</b>	RIG NAME/NO.	SHIPPED VIA <b>CT</b>	DELIVERED TO <b>LOCATION</b>	ORDER NO.	
3.	WELL TYPE <b>OIL</b>	WELL CATEGORY <b>DEVELOPMENT</b>	JOB PURPOSE <b>5 1/2" LONGSTRIK</b>	WELL PERMIT NO.	WELL LOCATION <b>BARRE, Ks - 3S, 1E, 1S, ES</b>		
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 # 104	20	MI	4	00	80.00
578		1			PUMP SERVICE	1	JOB	4416	FT	1250.00
221		1			LITONS KCC	2	GAL			52.00
281		1			MUDFLUSH	500	GAL		75	375.00
402		1			CENTRALIZERS	8	EA	5 1/2"		480.00
403		1			CEMENT BASKETS	2	EA		230	460.00
404		1			PORT COLLAR TOP JT # 46	1	EA	2482	FT	2000.00
406		1			LATCH DOWN PLUG - BAFFLE	1	EA		210	210.00
407		1			INSERT FLOAT SIDE W/ AUTO FILL	1	EA		250	250.00
419		1			ROTATING HEAD ASSEMBLY	1	JOB		250	250.00

RECEIVED  
 JUL 28 2006  
 KCC WICHITA

**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 **4-20-06** TIME SIGNED **0830**  A.M.  P.M.

REMIT PAYMENT TO:

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

SURVEY	AGREE	UN-AGREE	DIS-AGREE	PAGE TOTAL	AMOUNT
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				#1	5407.00
WE UNDERSTOOD AND MET YOUR NEEDS?				#2	2485.09
OUR SERVICE WAS PERFORMED WITHOUT DELAY?					
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				TAX	
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES	<input type="checkbox"/> NO		TOTAL	
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND					

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

SWIFT OPERATOR *Warron* APPROVAL

Thank You!



TICKET CONTINUATION

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

TICKET No. 10069

CUSTOMER AMERICAN WORKING INC	WELL DEFW 3-20	DATE 4-20-06	PAGE 2	OF 2
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PRICE REFERENCE	SECONDARY REFERENCE / PART NUMBER	ACCOUNTING			DESCRIPTION	UNITS		QUANTITY		RATE	AMOUNT
		ACC	DEBIT	CREDIT		TON	CUBIC FEET	TON	CUBIC FEET		
325		1			STANDARD CEMENT	EA	2	150	SBS	9.60	1440.00
276		1			FLOCLE			38	lbs	1.25	47.50
283		1			SALT			750	lbs	.20	150.00
284		1			CALSUM			7	SBS	30.00	210.00
285		1			CF2-1			711	lbs	4.00	284.00
290		1			D-A-2			1	gal	32.00	32.00
581		1			SERVICE CHARGE			150	CUBIC FEET	1.10	165.00
583		1			TOTAL WEIGHT			156.59	LOADED MILES		20
								156.59	TON MILES		1100

RECEIVED  
JUL 25 2006  
KCC WICHITA

2485.09

JOB LOG

SWIFT Services, Inc.

DATE 4-20-06 PAGE NO.

CUSTOMER AMERICAN WAREHOUSE INC WELL NO. 3-20 LEASE REFIN JOB TYPE 5 1/2" LONGSTRENGTH TICKET NO. 10069

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL)(GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0830							ON LOCATION
	0900							START 5 1/2" CASING IN WELL
								TD - 4417 SET = 4116
								TP - 4417 5 1/2" / FT 15.5
								ST - 42.56
								CENTRALIZERS - 1, 2, 4, 5, 45, 48, 49, 69
								CMT BSR'S - 6, 46
								PORT COLLAR = 2482 TOP JT # 46
	1145							DROP BALL - CIRCULATE ROTATE
	1235							UNLOAD JT TWIST OFF / 1630 CIRCULATE WELL
	1710	6	12			450		PUMP 500 GAL MUD FLUSH
	1712	6	20			450		PUMP 20 BBLS KCL - FLUSH
	1720		4					PLUG RH
	1725	4	36			300		MIX CMWT 150 SLS FA-2 W/ADDITIVES
	1737							WASH OUT PUMP - LEJES
	1738							RELEASE LATCH DOWN PLUG
	1740	6 1/2	0					DISPLACE PLUG
		6 1/2	94			1000		SHOT OFF ROTATED
	1755	6	104.1			1750		PLUG DOWN - PSE UP LATCH IN PLUG
	1757							OK RELEASE PSE HELM
								WASH UP TRUCK
	1830							JOB COMPLETE

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JUL 28 2006  
KCC WICHITA

THANK YOU  
WAYNE, DUSTY, BRETT



CHARGE TO:  
**AMERICAN WARRIOR INC.**  
 ADDRESS  
 CITY, STATE, ZIP CODE

TICKET  
 № 10074

PAGE 1 OF 1

SERVICE LOCATIONS 1. <b>NESS CITY, KS</b>	WELL/PROJECT NO. <b>3-20</b>	LEASE <b>RETN</b>	COUNTY/PARISH <b>NESS</b>	STATE <b>KS</b>	CITY	DATE <b>4-24-06</b>	OWNER <b>SAME</b>
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <b>H-D</b>	RIG NAME/NO.	SHIPPED VIA <b>CT</b>	DELIVERED TO <b>LOCATED</b>	ORDER NO.	
3.	WELL TYPE <b>OIL</b>	WELL CATEGORY <b>DEVELOPMENT</b>	JOB PURPOSE <b>COUNTY PORT COLLAR</b>	WELL PERMIT NO.	WELL LOCATION <b>BAZON, KS - 3S, 1E, 1S, E3</b>		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LOC	ACCT	DF		QTY.	U/M	QTY.	U/M	
575		1			MILEAGE # 104	20	MC		4.00	80.00
577		1			PUMP SERVICE	1	JOB		800.00	800.00
105		1			PORT COLLAR OPS/WTG TOOL	1	JOB		400.00	400.00
330		1			SWIFT MULTI-DRY SHAWED	275	SD		12.00	3300.00
276		1			FIDDLE	88	lbs		1.25	110.00
287		1			GASSTOP	100	lbs		7.00	700.00
290		1			D-ARL	2	MC		32.00	64.00
581		1			SERVICE CHARGE COUNT	350	lbs		1.10	385.00
583		1			DEWAGE	34998	lbs	349.98	TM	349.98

RECEIVED  
 JUL 26 2006  
 KCC WICHITA

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

X *[Signature]*  
 DATE SIGNED **4-24-06** TIME SIGNED **1530**  A.M.  P.M.

**REMIT PAYMENT TO:**

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

<b>SURVEY</b>	AGREE	UN-DECIDED	DIS-AGREE	<b>PAGE TOTAL</b>	<b>6188.98</b>
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				<b>TAX</b>	
WE UNDERSTOOD AND MET YOUR NEEDS?					
OUR SERVICE WAS PERFORMED WITHOUT DELAY?					
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				<b>TOTAL</b>	
ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO					
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND					

JOB LOG

SWIFT Services, Inc.

DATE 4 24 06 PAGE NO. 1

CUSTOMER AMEREN WOODCOCK 2JK WELL NO. 3-20 LEASE RETN JOB TYPE CEMENT PORT COLLAR TICKET NO. 10074

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1500							ON LOCATION
								2 3/8 x 5 1/2 PORT COLLAR = 2482
	1555				✓		1000	PSI TEST CASING - HFD
	1600	3	2	✓		650		OPEN PORT COLLAR - 233 RATE
	1605	3 1/2	125	✓		450		MIX CEMENT - LB - 225 SMD
		3 1/2	14	✓		400		TL - 50 SMD / GASSTOP
	1655	3 1/2	8 1/2	✓		650		DISPLACE CEMENT
	1705			✓		1000		CLOSE PORT COLLAR - PSI TEST - HFD
								CIRCULATE 20 SPS CEMENT TO POT
	1715	3	25	✓		450		RUN 4 JTS - CIRCULATE CEMENT
								WASH TANK
								PULL TOOL
	1800							JOB COMPLETE
								THANK YOU TED, LARRY, GUSTY, SHANE

# ALLIED CEMENTING CO., INC.

24170

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

SERVICE POINT:

*At Road*

DATE <i>4-11-06</i>	SEC. <i>20</i>	TWP. <i>19</i>	RANGE <i>21</i>	CALLED OUT <i>5:30 PM</i>	ON LOCATION <i>7:30 PM</i>	JOB START <i>9:45 PM</i>	JOB FINISH <i>10:15 PM</i>
LEASE <i>Rain</i>	WELL # <i>3-20</i>		LOCATION <i>Boyer 35, 1E, 1/2S, E/S</i>		COUNTY <i>Ness</i>	STATE <i>Ks</i>	
OLD OR NEW (Circle one) <input checked="" type="radio"/> OLD <input type="radio"/> NEW							

CONTRACTOR *Petromark #1*

TYPE OF JOB *Surface*

HOLE SIZE *12 1/4"* T.D. *220'*

CASING SIZE *8 3/8" New 23#* DEPTH *220'*

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

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

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

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

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

CEMENT LEFT IN CSG. *15'*

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

DISPLACEMENT *13 bbls*

OWNER *Same*

CEMENT AMOUNT ORDERED *160 lbs Common*

*32 cc, 220 ml*

EQUIPMENT

PUMP TRUCK CEMENTER *Jim O*

# *2211* HELPER *Jim W*

BULK TRUCK DRIVER *Brandon R*

# *342* DRIVER \_\_\_\_\_

BULK TRUCK # \_\_\_\_\_ DRIVER \_\_\_\_\_

COMMON \_\_\_\_\_ @ \_\_\_\_\_

POZMIX \_\_\_\_\_ @ \_\_\_\_\_

GEL \_\_\_\_\_ @ \_\_\_\_\_

CHLORIDE \_\_\_\_\_ @ \_\_\_\_\_

ASC \_\_\_\_\_ @ \_\_\_\_\_

RECEIVED \_\_\_\_\_ @ \_\_\_\_\_

*JUL 26 2006* \_\_\_\_\_ @ \_\_\_\_\_

KCC WICHITA \_\_\_\_\_ @ \_\_\_\_\_

HANDLING \_\_\_\_\_ @ \_\_\_\_\_

MILEAGE \_\_\_\_\_ @ \_\_\_\_\_

REMARKS:

*Ran 220' of 8 3/8" csg. Broke circulation. Mixed 160 lbs common 32cc 220 ml Released plug. Replaced with fresh H<sub>2</sub>O. Cement did circulate*

TOTAL \_\_\_\_\_

SERVICE

DEPTH OF JOB *220'*

PUMP TRUCK CHARGE \_\_\_\_\_

EXTRA FOOTAGE \_\_\_\_\_ @ \_\_\_\_\_

MILEAGE \_\_\_\_\_ @ \_\_\_\_\_

MANIFOLD \_\_\_\_\_ @ \_\_\_\_\_

CHARGE TO: *American Warrior*

STREET \_\_\_\_\_

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

*1 Rankin*

TOTAL \_\_\_\_\_

PLUG & FLOAT EQUIPMENT

*1-8 5/8" wooden plug* \_\_\_\_\_ @ \_\_\_\_\_

TOTAL \_\_\_\_\_

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]*

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