

ORIGINAL

3/09/11

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form ACP-1  
October 2008  
Form Must Be Typed

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 5144  
Name: Mull Drilling Company, Inc.  
Address 1: 221 N. Main, Suite #300  
Address 2: P.O. Box 2758  
City: Wichita State: KS Zip: 67201 + 2758  
Contact Person: Mark Shreve  
Phone: ( 316 ) 264-6366  
CONTRACTOR: License # 5929  
Name: Duke Drilling Company, Inc.  
Wellsite Geologist: Kevin Kessler  
Purchaser: Plains Marketing  
Designate Type of Completion:  
 New Well  Re-Entry  Workover  
 Oil  SWD  SLOW  
 Gas  ENHR  SIGW  
 CM (Coal Bed Methane)  Temp. Abd.  
 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.  Conv. to SWD  
 Plug Back: \_\_\_\_\_ Plug Back Total Depth \_\_\_\_\_  
 Commingled Docket No.: \_\_\_\_\_  
 Dual Completion Docket No.: \_\_\_\_\_  
 Other (SWD or Enhr.?) Docket No.: \_\_\_\_\_  
1/13/09 1/23/09 2/17/09  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date Recompletion Date

API No. 15 - 063-21763-00-00  
Spot Description: \_\_\_\_\_  
SW NE SW SW Sec. 23 Twp. 15 S. R. 27  East  West  
959 Feet from  North /  South Line of Section  
937 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: Gove  
Lease Name: Albin Well #: 1-23  
Field Name: Wildcat  
Producing Formation: Mississippian  
Elevation: Ground: 2438' Kelly Bushing: 2447'  
Total Depth: 4450' Plug Back Total Depth: 4401'  
Amount of Surface Pipe Set and Cemented at: 216 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set: 1926' Feet  
If Alternate II completion, cement circulated from: 1926'  
feet depth to: surface w/ 180 <sup>sq. cm.</sup>

Drilling Fluid Management Plan  
(Data must be collected from the Reserve Pit)  
Chloride content: 23,000 ppm Fluid volume: 1,000 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.: \_\_\_\_\_

AH2-Dig-4/3/09

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.

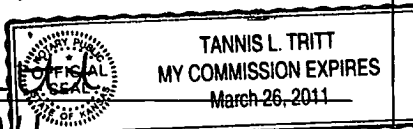
Signature: \_\_\_\_\_

Title: President/COO Date: 3/9/09

Subscribed and sworn to before me this 9th day of March

20 09

Notary Public: Tannis L. Tritt  
Date Commission Expires: 3-26-2011



KCC Office Use ONLY  
Letter of Confidentiality Received  
If Denied, Yes  Date: \_\_\_\_\_  
Wireline Log Received  
Geologist Report Received  
UIC Distribution  
KANSAS CORPORATION COMMISSION  
MAR 10 2009

RECEIVED

Operator Name: Mull Drilling Company, Inc. Lease Name: Albin Well #: 1-23  
 Sec. 23 Twp. 15 S. R. 27  East  West County: Gove

**INSTRUCTIONS:** Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval, 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 checked="" type="checkbox"/> Yes <input 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: Schlumberger: PEX-AIT, BHC, CMR Plus, Gamma Ray and HNGS	<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:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>Anhydrite</td> <td>1900</td> <td>+ 548</td> </tr> <tr> <td>B/Anhydrite</td> <td>1938</td> <td>+ 510</td> </tr> <tr> <td>Heebner Shale</td> <td>3682</td> <td>- 1234</td> </tr> <tr> <td>Stark Shale</td> <td>3966</td> <td>- 1518</td> </tr> <tr> <td>Ft. Scott</td> <td>4216</td> <td>- 1768</td> </tr> <tr> <td>Cherokee Shale</td> <td>4242</td> <td>- 1794</td> </tr> <tr> <td>T/Mississippian</td> <td>4310</td> <td>- 1862</td> </tr> </table>	Name	Top	Datum	Anhydrite	1900	+ 548	B/Anhydrite	1938	+ 510	Heebner Shale	3682	- 1234	Stark Shale	3966	- 1518	Ft. Scott	4216	- 1768	Cherokee Shale	4242	- 1794	T/Mississippian	4310	- 1862
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T/Mississippian	4310	- 1862																							

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"	20#	216'	Common	160	2% gel, 3% cc
Production	7 7/8"	5 1/2"	14#	4447'	50/50 Poz	120	

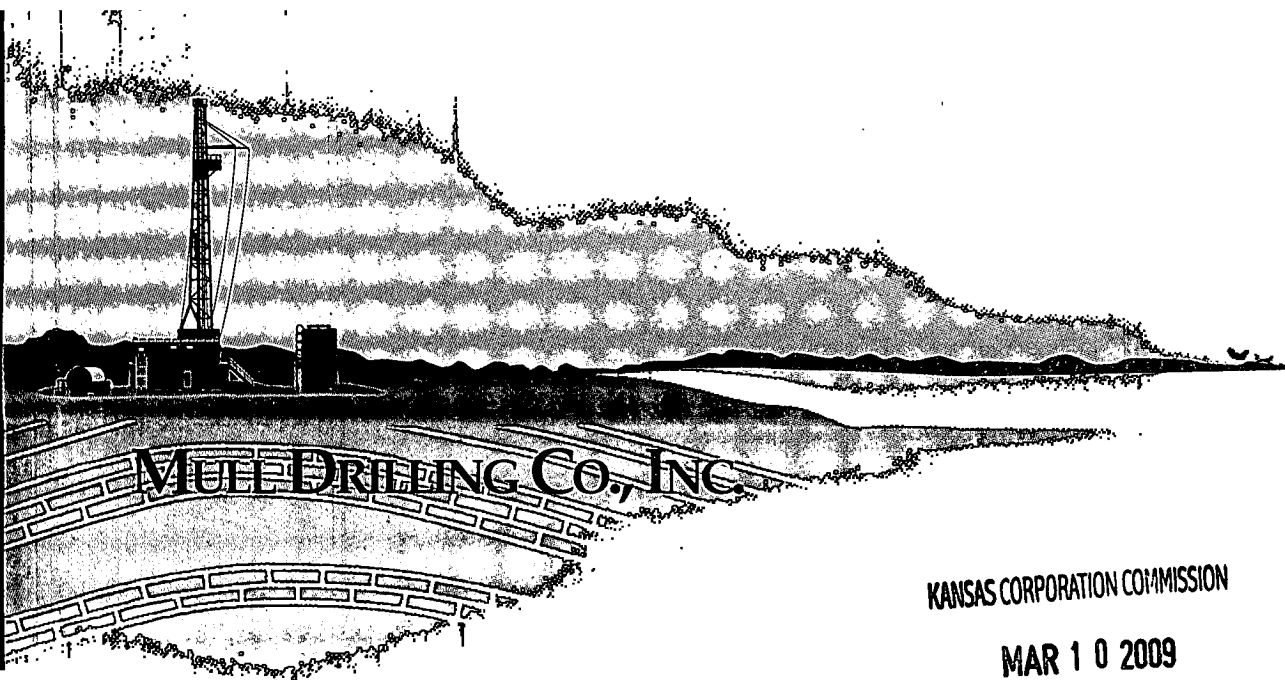
ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	1926'-Surface	SMD	180	

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	4314' -4320'	750 gal 15% MCA	

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TUBING RECORD: Size: <u>2 7/8"</u>	Set At: <u>4338'</u>	Packer At:	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. <u>2/17/09</u>		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. <u>20</u>	Gas Mcf <u>N/A</u>	Water Bbls. <u>0</u>
Gas-Oil Ratio <u>N/A</u>		Gravity <u>35.5</u>	

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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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KANSAS CORPORATION COMMISSION

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March 9, 2009

Kansas Corporation Commission  
Oil & Gas Conservation Division  
130 S. Market, Room 2078  
Wichita, Kansas 67202

**RE: Albin #1-23  
NE/4 NE/4 Section 23-15S-27W  
Gove Co., KS  
API: 15-063-21763-00-00**

Ladies/Gentlemen:

On behalf of Mull Drilling Company, Inc. (MDC) I would like to request that all information on side two of the enclosed Well Completion Form ACO-1 on the above subject location be held confidential for a period of two (2) years.

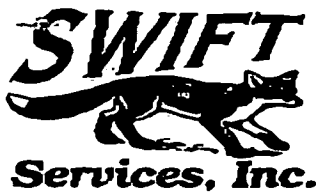
Please be advised that we have not received a copy of the wellsite geologist report. As soon as MDC receives a copy, one will be forwarded to your office.

Should you have any questions regarding the enclosed information, please feel free to contact our office.

Sincerely,

Mark A. Shreve  
President/COO

MAS:tt  
Enclosures



CHARGE TO: **MULL DRUG, Co., Inc.**  
 ADDRESS:  
 CITY, STATE, ZIP CODE:

TICKET No 15573

PAGE 1 OF 1

SERVICE LOCATIONS: 1. **NESS CITY, KS**

WELL/PROJECT NO.: **1-23** LEASE: **ALBIN** COUNTY/PARISH: **GOVE** STATE: **KS** CITY: DATE: **1-30-09** OWNER: **SAME**

TICKET TYPE:  SERVICE  SALES CONTRACTOR: **FRITZLER TRUCKING** RIG NAME NO. SHIPPED VIA: **TRUCK** DELIVERED TO: **LOCATION** ORDER NO.

WELL TYPE: **OIL** WELL CATEGORY: **DEVELOPMENT** JOB PURPOSE: **CONST PORT COLLAR** WELL PERMIT NO. WELL LOCATION: **PDJWSWZ, KS - 6 1/2 N, 2 E, E/W**

REFERRAL LOCATION: INVOICE INSTRUCTIONS:

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LOC	ACCT	DF			U/M			
575		1			MILEAGE *110	45	ME		7.00	315.00
578		1			PUMP SERVICE	1	JOB	1926	1400.00	1400.00
105		1			PORT COLLAR OPENING TOOL	1	JOB		400.00	400.00
330		1			SIDES MULT-DESECT STAMPER	200	SUS		16.00	3200.00
276		1			FLOCCLE	50	LBS		1.50	75.00
290		1			D-ADR	2	GAL		35.00	70.00
581		1			SERVICE CHARGE CONST	200	SUS		1.90	380.00
583		1			DEVALC	19970	LBS	449.32	1.75	786.32

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**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

DATE SIGNED: **1-30-09** TIME SIGNED: **1100**  
 AM  PM

**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
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				6626.32
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				6890.34

Gove TAX 7.05% 264.02

SWIFT OPERATOR: **Wayne Wilson** APPROVAL: \_\_\_\_\_

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

**Thank You!**

02/04/2009 15:28 FAX 7197678994 MDC-CHEV\_WELLS.CO MDC WICHTA 001/005

**JOB LOG**

**SWIFT Services, Inc.**

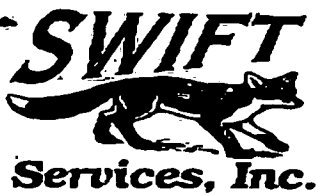
DATE 1-30-09 PAGE NO. 1

CUSTOMER MULL DRUG. Co. Inc WELL NO. 1-23 LEASE ALBIZ JOB TYPE CEMENT PORT COLLAR TICKET NO. 15523

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) GALS	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1100							ON LOCATION
								TUBING - 2 7/8 CASING - 5 1/2 PORT COLLAR = 1926'
	1145				✓		1000	PSI TEST CASING - HELD
	1150	3	2	✓		200		OPEN PORT COLLAR - TEST RATE
	1155	4 1/4	111	✓		350		MIX CEMENT 200 SKS SMD 1/4" FLOCCLE
	1225	4	10	✓		550		DISPARE CEMENT
	1235			✓		1000		CLOSE PORT COLLAR - PSI TEST - HELD CIRCULATE 20 SKS CEMENT TO PZT
	1250	4	25	✓		500		RUN 4 JTS - CIRCULATE CLEAN WASH TRUCK
	1330							FOR COMPLETE
								THANK YOU WAYNE, BRETT, DAVE

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KCC  
MAR 10 2009  
WICHITA, KS



CHARGE TO: **Mull Drilg. Co. Inc**  
 ADDRESS:  
 CITY, STATE, ZIP CODE:

TICKET No 15569

PAGE 1 OF 2

SERVICE LOCATIONS 1. <b>Ness City, KS</b>	WELL/PROJECT NO. <b>1-23</b>	LEASE <b>ALBEN</b>	COUNTY/PARISH <b>GOVE</b>	STATE <b>KS</b>	CITY	DATE <b>1-23-09</b>	OWNER <b>SOME</b>
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <b>DOVE DRILG # 4</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" LOGS/STRENGTH</b>	WELL PERMIT NO.	WELL LOCATION <b>PNWSE, KS - 6 1/2 N, 1 1/2 E, E W</b>		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LOC	ACCT	DF			UM		UM	
575		1			MILEAGE # 110	45	ME		7.00	315.00
578		1			PUMP CHARGE	1	JOB	4447	FT	1400.00
280		1			FLOCHECK-21	1000	Gal		3.00	3000.00
402		1			CENTRALIZERS	11	EA	5 1/2"	100.00	1100.00
403		1			CEMENT BASKETS	1	EA		300.00	300.00
404		1			PORT COLLAR TOPJIT # 62	1	EA	1926	FT	2300.00
406		1			LATCH DOWN PLUG - RAFFLE	1	EA		260.00	260.00
407		1			INSERT FLOAT SHOE W/ AUTO FEEL	1	EA		325.00	325.00
413		1			ROTO WALL CLEANERS	10	EA		40.00	400.00
419		1			ROTATING HEAD RENTAL	1	JOB		250.00	250.00

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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

DATE SIGNED: *Larry D. Smith* 1-23-09  
 TIME SIGNED: 1800  
 AM  
 PM

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 #1	9650.00
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				#2	2923.36
WE UNDERSTOOD AND MET YOUR NEEDS?				sub total	12,573.36
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				TAX	710.43
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				Calc 7.05%	
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES <input type="checkbox"/> NO			TOTAL	13,283.79
<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: *Wayne Wasow*  
 APPROVAL:

Thank You!

02/04/2009 15:28 FAX 7197678994 MDC-CHEV\_WELLS.CO MDC WICHITA 003/005



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

TICKET CONTINUATION

TICKET No. 15569

CUSTOMER: MULL DRUG, Co., INC. WELL: ALBEN 1-23 DATE: 1-23-09 PAGE: 2 OF 2

PRICE REFERENCE	SECONDARY REFERENCE	ACCOUNTING			TIME	DESCRIPTION	WELL				UNIT PRICE	AMOUNT
		COB	COOC	CO			WELL	DATE	QTY	UNIT		
327		1				SO/50 PDMEX (290GAL) 200*	150	SKS			9.50	1425.00
276		1				FLOCELE	38	LBS			11.50	571.00
283		1				SALT	700	LBS			.20	140.00
285		1				CFR-1	100	LBS			4.50	450.00
290		1				D-ADR	2	GAL			35.00	70.00
581		1				SERVICE CHARGE					1.90	285.00
583		1									1.75	496.36

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CONFIDENTIAL

TOTAL WEIGHT: 12606    LOADED MILES: 45    TON MILES: 283.635    CUBIC FEET: 150

CONTINUATION TOTAL: 2923.36

JOB LOG

SWIFT Services, Inc.

DATE 1-23-09 PAGE NO. 1

CUSTOMER M/VU DRUG CO. INC WELL NO. 1-23 LEASE ALBIA JOB TYPE 5 1/2 LONGSTADG TICKET NO. 15569

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL/GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1800							ON LOCATION
	1845							START 5 1/2" CASING IN WELL
								TD-4454 SETC 4447 TP-4449 5 1/2" 14 ST-40 CEMENTS - 1, 2, 3, 4, 5, 6, 7, 9, 11, 12, 61 CMT BSKT - 62 PORT COUNT - 1926 TOP JT # 62
	2105							DROP BALL - CIRCULATE ROTATE
	2230	6	5		✓	450		PUMP SPACER "
	2231	6	24		✓	450		PUMP 1000 GAL FLOCHECK-21 "
	2235	6	5		✓	450		PUMP SPACER "
	2240		6					PLUG RM (30 SPS)
	2245	4	28		✓	200		MAX CMT - 120 SPS 50/50 P02 w/ANNIES "
	2255							WASH OUT PUMP - LINES
	2256							RELEASE LATCH DOWN PLUG
	2258	7	0		✓			DISPLACE PLUG "
		7	97			700		SHUT OFF ROTATING
	2313	6 1/2	107.6			1500		PLUG DOWN - PSE UP LATCH IN PLUG
	2315					OK		RELEASE PSE - HELD
	0030							WASH TRUCK JOB COMPLETE
								THANK YOU WAYNE RUSTY, DOW

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# ALLIED CEMENTING CO., LLC. 33514

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

SERVICE POINT:  
ARSSC-4, KS

DATE <u>1-13-09</u>	SEC. <u>23</u>	TWP. <u>15S</u>	RANGE <u>27W</u>	CALLED OUT <u>7:00 PM</u>	ON LOCATION <u>3:00 PM</u>	JOB START <u>6:30 PM</u>	JOB FINISH <u>7:00 PM</u>
LEASE <u>Albino</u>	WELL # <u>1-23</u>	LOCATION <u>Peardrais 6 1/2 N. 14E</u>			COUNTY <u>Gove</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)							

CONTRACTOR Duke #4

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 216

CASING SIZE 8 5/8 DEPTH 216

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

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

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

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

MEAS. LINE \_\_\_\_\_ SHOE JOINT 20'

CEMENT LEFT IN CSG. 20'

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

DISPLACEMENT \_\_\_\_\_

OWNER Mull Drilling **CONFIDENTIAL**

CEMENT

AMOUNT ORDERED 160 5x Common

3% CC, 2% Gel

COMMON	<u>160</u>	@	<u>13.65</u>	<u>2184.00</u>
POZMIX		@		
GEL	<u>3</u>	@	<u>20.40</u>	<u>61.20</u>
CHLORIDE	<u>5</u>	@	<u>57.13</u>	<u>285.75</u>
ASC		@		

KANSAS CORPORATION COMMISSION

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HANDLING	<u>168</u>	@	<u>2.25</u>	<u>378.00</u>
MILEAGE	<u>168 x .10 x 42</u>			<u>705.60</u>
				TOTAL <u>3614.55</u>

EQUIPMENT

PUMP TRUCK CEMENTER Nandy

# 181 HELPER Joe

BULK TRUCK

# 456-198 DRIVER JACK

BULK TRUCK

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

REMARKS:

On location Safety meeting Rig up

Pipe on bottom

Break circulation with Rig

Pumped 500 EW ahead

Mixed cement

Released plug - Displaced

Cement did circulate

Rig down

SERVICE

DEPTH OF JOB 216

PUMP TRUCK CHARGE 999.00

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

MILEAGE 42 @ 7.00 294.00

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

Head Rent @ 111.00 111.00

CHARGE TO: Mull Drilling

STREET \_\_\_\_\_

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

TOTAL 1404.00

Thank you!

To Allied Cementing Co., LLC.

You are hereby requested to rent cementing equipment and furnish cementer and helper(s) 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 and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PLUG & FLOAT EQUIPMENT

1- 8 5/8 Wooden Plug @ 67.00 67.00

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

TOTAL 67.00

PRINTED NAME Rich Wheeler

SIGNATURE Rich Wheeler

SALES TAX (If Any) \_\_\_\_\_

TOTAL CHARGES \_\_\_\_\_

DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS