

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
June 2009

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Form Must Be Typed
Form must be Signed
All blanks must be Filled

OPERATOR: License # 9090
Name: Charter Energy, Inc.
Address 1: P.O. Box 252
Address 2: _____
City: Great Bend State: Ks Zip: 67530 + 0252
Contact Person: Steve Baize
Phone: (620) 793-9090
CONTRACTOR: License # 31548
Name: Discovery Drilling
Wellsite Geologist: James C. Musgrove
Purchaser: N C R A

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SIOW
 Gas D&A ENHR SIGW
 OG GSW Temp. Abd.
 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 ENHR Conv. to SWD
 Conv. to GSW
 Plug Back: _____ Plug Back Total Depth _____
 Commingled Permit #: _____
 Dual Completion Permit #: _____
 SWD Permit #: _____
 ENHR Permit #: _____
 GSW Permit #: _____

| | | |
|-----------------------------------|------------------|---|
| <u>12/1/2010</u> | <u>12/7/2010</u> | <u>12/30/2010</u> |
| Spud Date or Recompletion Date | Date Reached TD | Completion Date or Recompletion Date |

API No. 15 - 051-26059-00-00
Spot Description: _____
N/2 NE SE NE Sec. 8 Twp. 15 S. R. 18 East West
1,604 Feet from North / South Line of Section
330 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Ellis
Lease Name: Ruder Well #: 1
Field Name: Ruder
Producing Formation: Arbuckle
Elevation: Ground: 1998 Kelly Bushing: 2006
Total Depth: 3597 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 276 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: 1227 Feet
If Alternate II completion, cement circulated from: 1227
feet depth to: 0 w/ 250 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 #: _____

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.

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.

Signature: [Signature]
Title: President Date: 4/26/2011

KCC Office Use ONLY

Letter of Confidentiality Received

Date: _____

Confidential Release Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

ALT I II III Approved by: [Signature] Date: 4/27/11

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Operator Name: Charter Energy, Inc. Lease Name: Ruder Well #: 1

Sec. 8 Twp. 15 S. R. 18 East West County: Ellis

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 complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken Yes No
(Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No

Electric Log Submitted Electronically Yes No
(If no, Submit Copy)

List All E. Logs Run:

Comp. Density Neutron, Micro, Dual Induction

| <input checked="" type="checkbox"/> Log | Formation (Top), Depth and Datum | <input type="checkbox"/> Sample |
|---|----------------------------------|---------------------------------|
| Name | Top | Datum |
| Anhydrite | 1167 | +839 |
| Topeka | 2961 | -955 |
| Heebner | 3242 | -1236 |
| Toronto | 3262 | -1256 |
| Lansing | 3291 | -1285 |
| Arbuckle | 3583 | -1577 |

| CASING RECORD <input type="checkbox"/> New <input checked="" 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 | 276 | common | 165 | |
| Production | 7 7/8 | 5 1/2 | 14 | 3587 | EA-2 | 175sx | |
| | | | | | | | |

| 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 Specify Footage of Each Interval Perforated | Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) | Depth |
|----------------|---|---|-------|
| | | | |
| | | | |
| | | | |
| | | | |

| | | | | | |
|---|-----------------------|--|--------------------------|---------------|---|
| TUBING RECORD: | | Size: <u>2 7/8</u> | Set At: <u>3592</u> | Packer At: | Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Date of First, Resumed Production, SWD or ENHR. <u>1/25/2011</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>5</u> | Gas Mcf | Water Bbls. <u>10</u> | Gas-Oil Ratio | Gravity |

| | | | | |
|--|--|---|--|---|
| DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.) | | METHOD OF COMPLETION: <input checked="" type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. (Submit ACO-5) <input type="checkbox"/> Commingled (Submit ACO-4) <input type="checkbox"/> Other (Specify) _____ | | PRODUCTION INTERVAL: <u>Arbuckle</u> |
|--|--|---|--|---|

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QUALITY OILWELL CEMENTING, INC.

Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 4425

| | | | | | | | | | | | | | | | | |
|---------------------|--------------|----------|------------|------|--|-------|--|--------|-------|-------|--------------------------------------|-------------|------------------------|--------|----------|--|
| Date | 12-2-10 | Sec: | 8 | Twp. | 15 | Range | 18 | County | Ellis | State | KS | On Location | | Finish | 12:30 AM | |
| Lease | Rudor | Well No. | 1 | | Location | | | | | | Hay's S Grants Village W 1/2 S W 1/4 | | | | | |
| Contractor | Discovery #4 | | | | Owner | | | | | | To Quality Oilwell Cementing, Inc. | | | | | |
| Type Job | Surface | | | | You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed. | | | | | | | | | | | |
| Hole Size | 12 1/4 | | T.D. | | 276 | | Charge To | | | | | | Chartal Energy | | | |
| Csg. | 8 5/8 | | Depth | | 276 | | Street | | | | | | | | | |
| Tbg. Size | | | Depth | | | | City | | | | | | State | | | |
| Tool | | | Depth | | | | The above was done to satisfaction and supervision of owner agent or contractor. | | | | | | | | | |
| Cement Left in Csg. | 15' | | Shoe Joint | | | | Cement Amount Ordered | | | | | | 16.5 com 30 loc 20 loc | | | |
| Meas Line | | | Displace | | 16 1/2 B C | | | | | | | | | | | |

EQUIPMENT

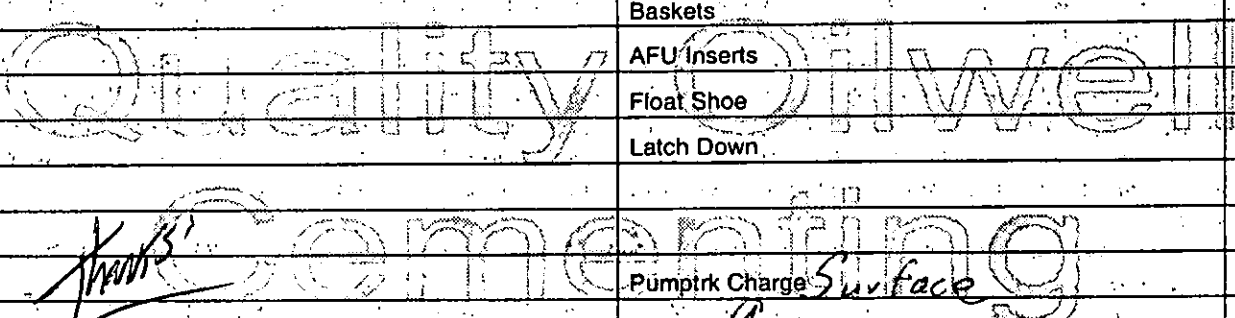
| | | | | | | |
|---------|---|-----|--------|---|----------|-----|
| Pumptrk | 9 | No. | Cement | 9 | Common | 165 |
| | | | Helper | | | |
| Bulktrk | | No. | Driver | | Poz. Mix | |
| | | | Driver | | | |
| Bulktrk | 8 | No. | Driver | 8 | Gel. | 3 |
| | | | Driver | | | |

JOB SERVICES & REMARKS

| | | |
|--------------------|-------------------------|-----|
| Remarks: | Calcium | 6 |
| Rat Hole | Hulls | |
| Mouse Hole | Salt | |
| Centralizers | Flowseal | |
| Baskets | Kol-Seal | |
| D/V or Port Collar | Mud CLR 48 | |
| | CFL-117 or CD110 CAF 38 | |
| | Sand | |
| | Handling | 174 |
| | Mileage | |

FLOAT EQUIPMENT

| | | |
|--|-------------|--|
| | Guide Shoe | |
| | Centralizer | |
| | Baskets | |
| | AFU Inserts | |
| | Float Shoe | |
| | Latch Down | |



| | | | | | |
|-----------|---------------------|----------------|--------------|---------|---|
| Signature | Michael P. Shuckler | Pumptrk Charge | Surface | Mileage | 9 |
| | | | RECEIVED | | |
| | | | APR 27 2011 | | |
| | | | KCC WICHITA | | |
| | | | Tax | | |
| | | | Discount | | |
| | | | Total Charge | | |



QUALITY OILWELL CEMENTING, INC.
 PO Box 32 - 740 West Wichita Ave, Russell KS 67665
 Phone: 785-324-1041 fax: 785-483-1087
 Email: cementing@ruraltel.net

Date: 12/3/2010
 Invoice # 4425

P.O.#:
 Due Date: 1/2/2011
 Division: *Russell*

Invoice

Drilling

Contact:
 CHARTER ENERGY
Address/Job Location:
 CHARTER ENERGY
 P.O. BOX 252
 GREAT BEND KS 67530

Reference:
 RUDER 1

Description of Work:
 SURFACE JOB

| Services / Items Included: | Quantity | Price | Taxable | Item | Quantity | Price | Taxable |
|--|----------|-------------|---------|------|----------|-------|---------|
| Labor | | \$ 963.85 | No | | | | |
| Common-Class A | 165 | \$ 2,124.83 | Yes | | | | |
| Bulk Truck Mat-Material Service Charge | 174 | \$ 367.33 | No | | | | |
| Calcium Chloride | 6 | \$ 238.51 | Yes | | | | |
| Pump Truck Mileage-Job to Nearest Camp | 9 | \$ 94.81 | No | | | | |
| Bulk Truck Mileage-Job to Nearest Bulk Plant | 9 | \$ 55.48 | No | | | | |
| Premium Gel (Bentonite) | 3 | \$ 51.55 | Yes | | | | |

Invoice Terms:

Net 30

SubTotal: \$ 3,896.37

Discount Available ONLY if Invoice is Paid & Received within listed terms of invoice: \$ (584.46)

SubTotal for Taxable Items: \$ 2,052.67

SubTotal for Non-Taxable Items: \$ 439.98

Total: \$ 3,311.92

Tax: \$ 129.32

6.30% Ellis County Sales Tax

Amount Due: \$ 3,441.23

Applied Payments:

Balance Due: \$ 3,441.23

Thank You For Your Business!

Past Due Invoices are subject to a service charge (annual rate of 24%)
 This does not include any applicable taxes unless it is listed.
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*CK 4180
 12-16-10*

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CHARGE TO: *Charter Service*
 ADDRESS: _____
 CITY, STATE, ZIP CODE: _____

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 KCC WICHITA

TICKET
19803
 PAGE 1 OF 1

| | | | | | | | |
|--|--|-------------------------------------|-----------------------------------|---------------------------|---------------------------------|-------------------------|----------------------|
| SERVICE LOCATIONS 1. <i>11015th</i> | WELL/PROJECT NO. <i>21</i> | LEASE <i>Ruster</i> | COUNTY/PARISH <i>Tellam</i> | STATE <i>Ks</i> | CITY | DATE <i>12-30-10</i> | OWNER <i>SWAN</i> |
| 2. <i>New City, Ks</i> | TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES | CONTRACTOR <i>P.P.S.</i> | RIG NAME/NO. | SHIPPED VIA <i>ETL</i> | DELIVERED TO <i>Le... ..</i> | ORDER NO. | |
| 3. | WELL TYPE <i>oil</i> | WELL CATEGORY <i>Development</i> | JOB PURPOSE <i>Port Cellar</i> | WELL PERMIT NO. | | WELL LOCATION | |
| 4. | REFERRAL LOCATION | INVOICE INSTRUCTIONS | | | | | |

| PRICE REFERENCE | SECONDARY REFERENCE/ PART NUMBER | ACCOUNTING | | | DESCRIPTION | QTY | U/M | QTY | U/M | UNIT PRICE | AMOUNT |
|-----------------|-------------------------------------|------------|------|----|---------------------------|------------|------------|-------------|-----|-------------|--------------|
| | | LOC | ACCT | DF | | | | | | | |
| <i>573</i> | | <i>1</i> | | | MILEAGE <i>2111</i> | <i>140</i> | <i>mi</i> | | | <i>200</i> | <i>28000</i> |
| <i>576</i> | | <i>1</i> | | | Pump Charge (Port Cellar) | <i>1</i> | <i>hr</i> | <i>1377</i> | | <i>1100</i> | <i>15167</i> |
| <i>775</i> | | <i>1</i> | | | Cellar seal Halls | <i>2</i> | <i>shs</i> | | | <i>25</i> | <i>50</i> |
| <i>779</i> | | <i>1</i> | | | Bestrite | <i>10</i> | <i>shs</i> | | | <i>25</i> | <i>250</i> |
| <i>790</i> | | <i>1</i> | | | D-Air | <i>3</i> | <i>gal</i> | | | <i>35</i> | <i>105</i> |
| <i>330</i> | | <i>2</i> | | | S.M.D.C. cement | <i>250</i> | <i>shs</i> | | | <i>15</i> | <i>3750</i> |
| <i>276</i> | | <i>2</i> | | | Flare | <i>50</i> | <i>lb</i> | | | <i>1.5</i> | <i>75</i> |
| <i>001</i> | | <i>2</i> | | | Cement | <i>200</i> | <i>shs</i> | | | <i>1.5</i> | <i>300</i> |
| <i>002</i> | | <i>2</i> | | | Drugs | | | | | | <i>100</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 *12-20-10* TIME SIGNED *12:4* 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 |
| OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN? | | | | <i>1</i> |
| WE UNDERSTOOD AND MET YOUR NEEDS? | | | | |
| 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 *[Signature]*

APPROVAL _____

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE 12-2-10 PAGE NO. 1

CUSTOMER *Chert...* WELL NO. *41* LEASE *Audon* JOB TYPE *Per 10. Mar* TICKET NO. *1-503*

| CHART NO. | TIME | RATE (BPM) | VOLUME (BBL) (GAL) | PUMPS | | PRESSURE (PSI) | | DESCRIPTION OF OPERATION AND MATERIALS |
|-----------|-------|------------|--------------------|-------|---|----------------|--------|---|
| | | | | T | C | TUBING | CASING | |
| | | | | | | | | valve set up 7 hrs |
| | | | | | | | | 27" x 27" |
| | | | | | | | | PC 1227' |
| | | | | | | | 500 | Test Cs |
| | | | | | | | | Open PC |
| | 10:00 | | | | | | | Test injection valve |
| | 10:05 | 4 | 0 | | | 400 | | start cement |
| | 10:10 | 4 | 5 | | | 400 | | hole circulating to return |
| | 10:15 | " | " | | | 400 | | return sporadic from 0 well |
| | 10:20 | | | | | | | shut down all test returns |
| | | | | | | | | run to 7 hrs cement & Halls |
| | 11:15 | 4 | 0 | | | 400 | | start 4th & Halls' individual 2 hrs Halls |
| | 11:20 | | 50 | | | | | shut down all test returns |
| | 11:30 | | | | | 400 | | resume pumping with cement / full returns |
| | 11:35 | | 11 | | | | | shut down all test returns |
| | 11:40 | 2 | 11 | | | 100 | | resume cement / full returns |
| | 11:47 | 2 | 15 | | | 200 | | full returns |
| | 11:47 | | 20 | | | | | circ cement (15 bbl) |
| | 11:57 | | 35 | | | | | circ gel (20 bbl) |
| | 12:02 | | 45 | | | | | circ cement / wise weight 20 bbl |
| | 12:07 | | 7-1/2 | | | | | start Displacement |
| | 12:10 | | 1 | | | | | Cement Displacement |
| | | | | | | | | shut down PC |
| | 12:15 | | | | | | 500 | Test Cs |
| | 12:25 | 7 | 11 | | | | | run 8th circ hole |
| | 12:37 | | | | | | | Hole Clean |
| | | | | | | | | circ sucks to air |

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Thank you KCC WICHITA
Nick, Josh & John



CHARGE TO: **CHARGE**
 ADDRESS: **CHARGE**
 CITY, STATE, ZIP CODE: **CHARGE**

TICKET
 PAGE 1 OF 2

SERVICE LOCATIONS:
 1. **1116** WELL/PROJECT NO. **1** LEASE **1116** COUNTY/PARISH **ELLIS** STATE **TX** CITY **NESS CITY** DATE **12-07-10** OWNER **EL PASO**
 2. **1116** TICKET TYPE SERVICE CONTRACTOR **SWIFT** RIG NAME/NO. **DRILL RIG 14** SHIPPED VIA **TRUCK** DELIVERED TO **SWIFT** ORDER NO. **1116**
 3. **1116** WELL TYPE **OIL** WELL CATEGORY **DRILL** JOB PURPOSE **DRILLING** WELL PERMIT NO. **15-05-1116** WELL LOCATION **1116**
 4. REFERRAL LOCATION INVOICE INSTRUCTIONS

| PRICE REFERENCE | SECONDARY REFERENCE/ PART NUMBER | ACCOUNTING | | | DESCRIPTION | QTY | UNIT | UNIT PRICE | AMOUNT |
|-----------------|----------------------------------|------------|------|-----|------------------------|-----|------|------------|---------|
| | | LOC | ACCT | DEF | | | | | |
| 573 | | 1 | | | MILEAGE 412 | 30 | | 5.00 | 1500.00 |
| 578 | | 1 | | | PUMP SERVICE | 1 | | 1400.00 | 1400.00 |
| 21 | | 1 | | | KNOWLEDGE | 2 | | 65.00 | 130.00 |
| 11 | | 1 | | | PUMP FUEL OIL | 500 | | 1.00 | 500.00 |
| 10 | | 1 | | | DRILL | 1 | | 25.00 | 25.00 |
| | | 1 | | | CRUIT. HELICOPTER | 8 | | 35.00 | 280.00 |
| | | 1 | | | DRILL | 1 | | 200.00 | 200.00 |
| | | 1 | | | PUMP CONTROL | 1 | | 1500.00 | 1500.00 |
| | | 1 | | | EXPANSION PUMP CONTROL | 1 | | 215.00 | 215.00 |
| | | 1 | | | EXPANSION PUMP CONTROL | 1 | | 279.00 | 279.00 |

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: **12-07-10** TIME SIGNED: **12:00** 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 | AMOUNT |
|--|------------------------------|-----------------------------|-----------|------------|---------|
| OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN? | | | | 12 | 5010.00 |
| WE UNDERSTOOD AND MET YOUR NEEDS? | | | | 12 | 3561.00 |
| OUR SERVICE WAS PERFORMED WITHOUT DELAY? | | | | 12 | 8571.00 |
| 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 WISE TO RESPOND | | | | TOTAL | |



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

TICKET CONTINUATION

TICKET No. _____

CUSTOMER: WELLS DATE: 4/27/01 PAGE: 6 OF: 2

| PRICE REFERENCE | SECONDARY REFERENCE PART NUMBER | ACCOUNTING | | | TIME | DESCRIPTION | WELL | | | | UNIT PRICE | AMOUNT | |
|-----------------|---------------------------------|------------|------|-------|------|-------------------|--------|------|-------|-----|------------|-----------|------|
| | | QTY | UNIT | PRICE | | | QTY | UNIT | PRICE | QTY | | | UNIT |
| 24 | | 2 | | | | STAIN | 12 | | | | 12 | 216 | |
| 27 | | 2 | | | | FLOSS | 44 | | | | 1.00 | 44 | |
| 28 | | 2 | | | | SAF | 850 | | | | 1.00 | 850 | |
| 231 | | 2 | | | | CAL SEAL | | | | | 30.00 | 60 | |
| 246 | | 2 | | | | HARD - 1 | | | | | 6.00 | 12 | |
| 581 | | 2 | | | | QUICK CURE CEMENT | 175 | | | | 1.50 | 262.50 | |
| | | 2 | | | | DIYAC | 273.35 | | | | 1.00 | 273.35 | |
| SERVICE CHARGE | | | | | | CUBIC FEET | | | | | | | |
| TOTAL WEIGHT | | | | | | LOADED MILES | | | | | | TON MILES | |

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CONTINUATION

