

ORIGINAL

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
October 2008

Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 5144

CONFIDENTIAL API No. 15 - 063-21771-00-00

Name: Mull Drilling Company, Inc.

Address 1: 1700 Waterfront Parkway, Bldg #1200

Address 2:

City: Wichita State: KS Zip: 67206 + 6637

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.:

4/8/09 4/17/09 5/15/09

Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

Spot Description:

NW - NW - SE - NE Sec. 13 Twp. 15 S. R. 27 East West

1557 Feet from North / South Line of Section

1306 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Gove

Lease Name: Garvey "B" Well #: 1-13

Field Name: Wildcat

Producing Formation: Mississippian

Elevation: Ground: 2345' Kelly Bushing: 2354'

Total Depth: 4325' Plug Back Total Depth: 4274'

Amount of Surface Pipe Set and Cemented at: 210 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: 1808 Feet

If Alternate II completion, cement circulated from: 1808

feet depth to: surface w/ 170 sx cmt.

Drilling Fluid Management Plan *ATL N3 81307*
(Data must be collected from the Reserve Pit)

Chloride content: 29,000 ppm Fluid volume: 1200 bbls

Dewatering method used: Hauled Offsite

Location of fluid disposal if hauled offsite:

Operator Name: Walker Tank Service, Inc.

Lease Name: Walker SWD License No.: 4313

Quarter SE Sec. 14 Twp. 16 S. R. 26 East West

County: Ness Docket No.: D-26040

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.

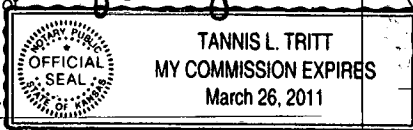
Signature: *[Signature]*

Title: President/COO Date: 7/14/09

Subscribed and sworn to before me this 14th day of July

20 09 Notary Public: *Jannish 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

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Operator Name: Mull Drilling Company, Inc. Lease Name: Garvey "B" **JUL 14 2009** Well #: 1-13
 Sec. 13 Twp. 15 S. R. 27 East West County: Gove **KCC**

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 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: Superior: CDL/CNL/PE; DIL/MEL & Sonic	<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>1786</td> <td>+ 564</td> </tr> <tr> <td>B/Anhydrite</td> <td>1823</td> <td>+ 527</td> </tr> <tr> <td>Heebner Shale</td> <td>3575</td> <td>- 1225</td> </tr> <tr> <td>Lansing</td> <td>3616</td> <td>- 1266</td> </tr> <tr> <td>B/KC</td> <td>3906</td> <td>- 1556</td> </tr> <tr> <td>Cherokee Shale</td> <td>4122</td> <td>- 1772</td> </tr> <tr> <td>Mississippian</td> <td>4194</td> <td>- 1844</td> </tr> </table>	Name	Top	Datum	Anhydrite	1786	+ 564	B/Anhydrite	1823	+ 527	Heebner Shale	3575	- 1225	Lansing	3616	- 1266	B/KC	3906	- 1556	Cherokee Shale	4122	- 1772	Mississippian	4194	- 1844
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Mississippian	4194	- 1844																							

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#	210'	common	170	2% gel, 3% cc
Production	7 7/8"	5 1/2"	14#	4323'	50/50 poz	120	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose: <input type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
	Surface-1808'	SMD	170	

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth
4	4213' - 4221'	150 gal 15% MCA	
KANSAS CORPORATION COMMISSION JUL 15 2009 RECEIVED			

TUBING RECORD:	Size: <u>2 7/8"</u>	Set At: <u>4158'</u>	Packer At:	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. <u>5/15/09</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 Bbbs. <u>15</u>	Gas Mcf <u>N/A</u>	Water Bbbs. <u>38</u>	Gas-Oil Ratio <u>N/A</u> Gravity <u>36.1</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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CHARGE TO: MULL DRIG. Co. Inc
 ADDRESS _____
 CITY, STATE, ZIP CODE _____

KANSAS CORPORATION COMMISSION
 JUL 15 2009
 RECEIVED

TICKET No 16186
 PAGE 1 OF 1



05/05/2009 09:10 FAX 7197678994 MDC-CHEY_WELLS.CO MDC WICHITA 001/002

WELL/PROJECT NO. <u>1-13</u>	LEASE <u>GARVEY "B"</u>	COUNTY/PARISH <u>GOVE</u>	STATE <u>Ks</u>	CITY <u>LOCATION</u>	DATE <u>4-27-09</u>	OWNER <u>SAME</u>
TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <u>PROFESSIONAL PULLERS</u>	RIG NAME/NO.	SHIPPED <u>VIA CT</u>	DELIVERED TO <u>LOCATION</u>	ORDER NO.	WELL LOCATION <u>N/PRINCEWIS, Ks-9N, 1/2 E, 1/2 NE</u>
WELL TYPE <u>OIL</u>	WELL CATEGORY <u>DEVELOPMENT</u>	JOB PURPOSE <u>CEMENT PORT COLLAR</u>	WELL PERMIT NO.			

REFERRAL LOCATION _____ INVOICE INSTRUCTIONS _____

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.	U/M	QTY.	U/M	UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575		1			MILEAGE # 110	40	ME			5.00	200.00
576D		1			PUMP CHARGE	1	JOB	1808	FT	1100.00	1100.00
105		1			PORT COLLAR OPENING TOOL	1	JOB			300.00	300.00
330		1			SWIFT MULTI-DENSITY STANDARD	190	SYN			14.00	2660.00
276		1			FLOCELE	50	LBS			1.50	75.00
290		1			D-ADR	2	GAL			35.00	70.00
581		1			SERVICE CHARGE CEMENT	200	SYN			1.50	300.00
583		1			DAMAGE	1997	LBS	399.4	MM	1.00	399.40

CONFIDENTIAL
 JUL 14 2009

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.

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

[Signature]
 DATE SIGNED 4-27-09 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	PAGE TOTAL	
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?					5104.40
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	5323.30

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

SWIFT OPERATOR Wayne Wilson APPROVAL _____

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE 4-27-09 PAGE NO. 1

CUSTOMER MULL DRUG C. INC. WELL NO. 1-13 LEASE GARNEY "B" JOB TYPE CEMENT PORT COLLAR TICKET NO. 16186

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL/HR)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
1330	1500							ON LOCATION CONFIDENTIAL JUL 14 2009
								TURB - 2 7/8 CAST - 5 1/2 PORT COLLAR = 1808'
	1500				✓		1000	PSI TEST CAST - HELD
	1505	3 1/2	3	✓			250	OPEN PORT COLLAR - LOW RATE
	1510	4 1/4	105	✓			350	MIX CEMENT 190 SKS SMD 1/4" S/L FLOCCS
	1535	4 1/4	9 1/2	✓			600	DISPLACE CEMENT
	1545			✓			1000	CLOSE PORT COLLAR - PSI TEST - HELD
								CIRCULATED 20 SKS CEMENT TO BIT
	1600	4 1/4	25	✓			500	RUN 4-JTS - CALCULATE CLEAN
								WASH TRUCK
								PULL TOOL
	1630							JOB COMPLETE
								THANK YOU WAYNE, BRETT, DAVE
								KANSAS CORPORATION COMMISSION JUL 15 2009 RECEIVED



CHARGE TO:
MULL DRUG. CO, INC
 ADDRESS
 CITY, STATE, ZIP CODE

TICKET
 No 16176

PAGE 1 OF 2

04/27/2009 14:08 FAX 7197678994 MDC-CHEY_WELLS.CO MDC WICHITA 001/004

SERVICE LOCATIONS: **NESS City, Ks**

WELL/PROJECT NO.: **B 1-13** LEASE: **GARVEY** COUNTY/PARISH: **GOVE** STATE: **Ks** CITY: DATE: **4-18-09** OWNER: **SAME**

TICKET TYPE: SERVICE SALES CONTRACTOR: **DUKE DRUG # 4** RIG NAME/NO. SHIPPED VIA: **CT** DELIVERED TO: **LOCATION** ORDER NO.

WELL TYPE: **OIL** WELL CATEGORY: **DEVELOPMENT** JOB PURPOSE: **CEMENT 5 1/2" LONGSTRING** WELL PERMIT NO. WELL LOCATION: **PONDWATER, Ks - 8 1/4 N, 1/2 E, 1/2 W, 22**

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 # 110	40	ME		5.00	200.00
578		1			PUMP CHARGE	1	JOB	4323	1400.00	1400.00
221		1			LIQUID KCL	2	GA		25.00	50.00
280		1			FLOCHECK-21	1000	GAL		2.50	2500.00
402		1			CENTRALIZERS	10	EA	5 1/2"	55.00	550.00
403		1			CEMENT BASKET	1	EA		180.00	180.00
404		1			PORT COUPLER TOP JT # 64	1	EA	1808	1900.00	1900.00
406		1			LATCH DOWN PLUG - BAFFLE	1	EA		225.00	225.00
407		1			INSERT FLOAT SHOE W/ AUTO FILL	1	EA		275.00	275.00
419		1			ROTATING HEAD RENTAL	1	JOB		150.00	150.00

CONFIDENTIAL
 JUL 14 2009
 KCC

KANSAS CORPORATION COMMISSION
 JUL 15 2009
 RECEIVED

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: **4-18-09** TIME SIGNED: **0930** AM/PM: **AM**

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?				#1	7430.00
WE UNDERSTOOD AND MET YOUR NEEDS?				#2	2141.12
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				subtotal	9571.12
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				TAX	
ARE YOU SATISFIED WITH OUR SERVICE?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO		Gove 7.05%	528.33
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				TOTAL	10,099.45

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

SWIFT OPERATOR: **WAYNE WILSON** APPROVAL:

Thank You!



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

TICKET CONTINUATION

TICKET No. 16176

CUSTOMER: Mull Drub. Co. Inc
WELL: GARNEY "B" 1-13
DATE: 4-18-09
PAGE: 2 OF 2

SWIFT REFERENCE	SERVICES/REFERENCE/ PART NUMBER	ACCOUNTING		TIME	DESCRIPTION	UNITS				UNIT PRICE	AMOUNT
		DEBIT	CREDIT			CU	LB	TON	YD		
327		1			50/50 POZMEX (290GEL)	150	SKS			8.00	1200.00
276		1			FLOCELE	38	LBS			1.50	57.00
283		1			SALT	700	LBS			.15	105.00
285		1			CFR-1	58	LBS			4.00	232.00
290		1			D-ADR	2	GAL			35.00	70.00
581		1			SERVICE CHARGE		CUBIC FEET	150		1.50	225.00
583		1			TOTAL WEIGHT	12606	LOADED MILES	40		TON MILES	252.12
<div style="float: right; border: 1px solid black; padding: 5px;"> CONFIRMATION TOTAL 2141.12 </div>											

CONFIDENTIAL
 JUL 14 2009
 KCB

RECEIVED
 JUL 15 2009
 MDC-CHEY WELLS CO

JOB LOG

SWIFT Services, Inc.

DATE 4-18-09 PAGE NO. 7

CUSTOMER: MULL DRUG CO. ZAC WELL NO.: B 1-13 LEASE: GARVEY JOB TYPE: CEMENT 5 1/2" LONGSTRUNG TICKET NO.: 16176

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL/GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0930							ON LOCATION CONFIDENTIAL
								JUL 14 2009
	1000							START 5 1/2" CASING IN WELL KCC
								TD - 4325 SET = 4323 9' KB
								TP - 4323 5 1/2" # 14
								ST - 44.84
								CENTRALIZERS - 1, 2, 3, 4, 5, 6, 8, 10, 12, 63
								CMT BSKY - 64
								PORT COLLAR = 1808 TOP JT # 64
	1235							DROP BALL - CIRCULATE ROTATE
	1255	6	5				350	PUMP KCL SPACER "
	1256	6	24				350	PUMP 1000 GAL FLOCHECK-21 "
	1400	6	5				350	PUMP KCL SPACER "
	1405		7					PLUG RH (3054)
	1410	4	28				200	MAX CEMENT (12050) 50/50 POZ = 14.4 PPG "
	1418							WASH OUT PUMP - LINES
	1419							RELEASE CATCH DOWN PLUG
	1420	7	0					DISPLACE PLUG
		6 1/2	94				650	SHUT OFF ROTATING
	1435	6 1/2	104.4				1500	PLUG DOWN - PSE UP CATCH IN PLUG
	1437						OK	RELEASE PSE - HELD
	1600							WASH TRUCK JOB COMPLETE
								THANK YOU WAYNE, DUSTY, JEFF

KANSAS CORPORATION COMMISSION
JUL 15 2009

ALLIED CEMENTING CO. LLC. 036242

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

CONFIDENTIAL

SERVICE POINT:

JUL 14 2009

Russell, KS

DATE <u>4-09-09</u>	SEC. <u>13</u>	TWP. <u>15</u>	RANGE <u>26</u>	CALLED OUT <u>KID</u>	LOCATION <u>4:30pm</u>	JOB START <u>9:30am</u>	JOB FINISH <u>10:00am</u>	
EASE <u>Garvey B</u>		WELL # <u>1-13</u>	LOCATION <u>Pendennis + Red chert rd N.</u>		COUNTY <u>Gove</u>	STATE <u>KS</u>		
OLD OR <u>NEW</u> (Circle one)			to T <u>1/2 C. 1/2 N. W 2 1/2 to 3</u>					

CONTRACTOR Duke #4 OWNER Mull Drilling Co.

TYPE OF JOB Surface

BOLE SIZE 12 1/4 T.D. 199.40 CEMENT

CASING SIZE 9 5/8 DEPTH 199.40/210 AMOUNT ORDERED 165 SX Common 3966

TUBING SIZE DEPTH 2 3/8 601

DRILL PIPE 4 1/2 DEPTH

TOOL DEPTH

RES. MAX 200* MINIMUM

MEAS. LINE SHOE JOINT 15'

CEMENT LEFT IN CSG. 15'

PERFS.

DISPLACEMENT Fresh Water 129200

EQUIPMENT

PUMP TRUCK CEMENTER Randy

366 HELPER Conyne

BULK TRUCK

344-170 DRIVER Dennis

BULK TRUCK

DRIVER

REMARKS:

In location Safety Meeting Rig 40

Fix on bottom broke circulation with rig

look to tank Mix SX Common 3966 2000

Shut down Release Plug Displace with bbl

of fresh water Shut down - Shut valves

Cement did Circulate

Rig down

CHARGE TO: Mull Drilling Co.

STREET

CITY STATE ZIP

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.

PRINTED NAME Rich Wheeler

SIGNATURE Rich Wheeler

NO COPY

COMMON	<u>165</u>	@	<u>13.50</u>	<u>2,227.50</u>
POZMIX		@		
GEL	<u>3</u>	@	<u>20.25</u>	<u>60.75</u>
CHLORIDE	<u>6</u>	@	<u>51.50</u>	<u>309.00</u>
ASC		@		
KANSAS CORPORATION COMMISSION				
JUL 15 2009				
RECEIVED				
HANDLING	<u>174</u>	@	<u>225</u>	<u>391.50</u>
MILEAGE	<u>39/174/1.10</u>			<u>522.00</u>
				TOTAL <u>3510.75</u>

SERVICE

DEPTH OF JOB	<u>210'</u>			
PUMP TRUCK CHARGE				<u>999.00</u>
EXTRA FOOTAGE		@		
MILEAGE	<u>30</u>	@	<u>700</u>	<u>210.00</u>
MANIFOLD		@		
TOTAL <u>1209.00</u>				

PLUG & FLOAT EQUIPMENT

<u>1-9 5/8 Wooden Plug</u>	@	<u>66.00</u>		
	@			
	@			
	@			
	@			
TOTAL <u>66.00</u>				

SALES TAX (If Any)

TOTAL CHARGES

DISCOUNT 0 IF PAID IN 30 DAYS