



KANSAS CORPORATION COMMISSION 1048462  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
June 2009

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

**WELL COMPLETION FORM**  
**WELL HISTORY - DESCRIPTION OF WELL & LEASE**

OPERATOR: License # 5447  
Name: OXY USA Inc.  
Address 1: 5 E GREENWAY PLZ  
Address 2: PO BOX 27570  
City: HOUSTON State: TX Zip: 77227 + 7570  
Contact Person: LAURA BETH HICKERT  
Phone: ( 620 ) 629-4253  
CONTRACTOR: License # 33784  
Name: Trinidad Drilling Limited Partnership  
Wellsite Geologist: N/A  
Purchaser: TEXON- OIL BP-GAS

Designate Type of Completion:

- New Well       Re-Entry       Workover
- Oil       WSW       SWD       SLOW  
 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>08/29/2010</u>	<u>09/05/2010</u>	<u>09/22/2010</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-067-21715-00-00  
Spot Description: \_\_\_\_\_  
NW SW SE SW Sec. 7 Twp. 30 S. R. 38  East  West  
413 Feet from  North /  South Line of Section  
1347 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: Grant  
Lease Name: SCHARTZ M Well #: 1  
Field Name: LITTLE BOW  
Producing Formation: ST. LOUIS  
Elevation: Ground: 3144 Kelly Bushing: 3157  
Total Depth: 5845 Plug Back Total Depth: 5797  
Amount of Surface Pipe Set and Cemented at: 1755 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set: \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from: \_\_\_\_\_  
feet depth to: \_\_\_\_\_ w/ \_\_\_\_\_ sx cmt.

**Drilling Fluid Management Plan**

(Data must be collected from the Reserve Pit)

Chloride content: 1600 ppm Fluid volume: 1500 bbls  
Dewatering method used: Evaporated  
Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name: \_\_\_\_\_  
Lease Name: \_\_\_\_\_ License #: \_\_\_\_\_  
Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West  
County: \_\_\_\_\_ Permit #: \_\_\_\_\_

**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.

Submitted Electronically

**KCC Office Use ONLY**

- Letter of Confidentiality Received  
Date: 12/27/2010  
 Confidential Release Date: 12/26/2012  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution  
ALT  I  II  III Approved by: NAOMI JAMES Date: 12/27/2010



1048462

Operator Name: OXY USA Inc. Lease Name: SCHARTZ M Well #: 1  
 Sec. 7 Twp. 30 S. R. 38  East  West County: Grant

**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 <input type="checkbox"/> Yes <input checked="" 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 Electric Log Submitted Electronically <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i>  List All E. Logs Run: <b>Attached</b>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Top Datum Attached Attached Attached
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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	12.25	8.625	24	1755	A-CON/PREM PLUS	680	SEE ATTACHED
PRODUCTION	7.875	5.5	17	5840	50 50 POZ	115	SEE ATTACHED

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing	-			
___ Plug Back TD				
___ Plug Off Zone	-			

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
6	5740' -5756' ST. LOUIS	25 bbl 2% KCl	5740-5756
		23 bbl 15% HCl w/ Additives Flush 30 bbl 7% KCl	5740-5756
		3200 gal 15% HCl w/ Additives	5740-5756
		Flush 1470 gal 2% KCl	

TUBING RECORD:	Size: <u>2.875</u>	Set At: <u>5778</u>	Packer At:	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR. <u>09/24/2010</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>112</u>	Gas Mcf <u>2</u>	Water Bbls. <u>265</u>	Gas-Oil Ratio 	Gravity 

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input checked="" 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 <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>5740'-5756' ST. LOUIS</u>
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Form	ACO1 - Well Completion
Operator	OXY USA Inc.
Well Name	SCHARTZ M 1
Doc ID	1048462

All Electric Logs Run

MICROLOG
ARRAY COMPENSATED TRUE RESISTIVITY
SPECTRAL DENSITY DUAL SPACED NEUTRON
CEMENT BOND LOG
BOREHOLE SONIC ARRAY

Form	ACO1 - Well Completion
Operator	OXY USA Inc.
Well Name	SCHARTZ M 1
Doc ID	1048462

Tops

Tops		
HEEBNER	3860	-706
LANSING	3964	-810
SWOPE	4419	-1265
MARMATON	4596	-1442
CHEROKEE	4769	-1615
ATOKA	4986	-1832
MORROW	5237	-2083
CHESTER	5605	-2451
ST. GENEVIEVE	5676	-2522
ST. LOUIS	5709	-2555



**BASIC**  
ENERGY SERVICES  
PRESSURE PUMPING & WIRELINE

1700 S. Country Estates Rd.  
P.O. Box 129  
Liberal, Kansas 67905  
Phone 620-624-2277

FIELD SERVICE TICKET

1717 01008 A

8-30-10 DATE TICKET NO. \_\_\_\_\_

DATE OF JOB 8-30-10	DISTRICT Liberal, KS 1717	NEW WELL <input checked="" type="checkbox"/>	OLD WELL <input type="checkbox"/>	PROD <input type="checkbox"/>	INJ <input type="checkbox"/>	WDW <input type="checkbox"/>	CUSTOMER ORDER NO.:	
CUSTOMER OKY USA	LEASE SHARTZ 'M"		WELL NO. 1					
ADDRESS		COUNTY GRANT	STATE KANSAS					
CITY Liberal	STATE KANSAS	SERVICE CREW Carlos Lopez - Mickey C.						
AUTHORIZED BY		JOB TYPE: 8 5/8" SURFACE Z-42						
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	TIME
14355	5					8-30-10	8-30-10	12:00
14284	5					ARRIVED AT JOB	8-30-10	4:00
14354	5					START OPERATION	8-30-10	6:25
19578	5					FINISH OPERATION	8-30-10	8:00
27462	5					RELEASED	8-30-10	9:00
						MILES FROM STATION TO WELL	75	

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP.

SIGNED: CMW  
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT	
CL 101	"A" CON BLEND	SKS	480		8928 00	
CL 110	PREMIUM PLUS CEMENT	SKS	200		3260 00	
CC 109	Calcium Chloride	lb	1732		1818 60	
CC 102	CELLOFLAKE	lb	291		1076 70	
CC 130	C-51	lb	91		2275 00	
CF 1453	Flapper Type Insert Float Valve 8 5/8"	ea	1		280 00	
CF 253	GUIDE SHOE - REGULAR 8 7/8"	ea	1		380 00	
CF 1773	CENTRALIZERS 8 5/8" x 12 1/4"	ea	5		725 00	
CF 1963	8 5/8" BASKET	ea	1		315 00	
CF 105	Top Rubber Cement Plug 8 7/8"	ea	1		225 00	
E 101	Heavy Equipment Mileage	mi	75		525 00	
CE 240	Blending & Mixing Service Charge	SKS	680		952 00	
E 113	Proppant & Bulk Delivery Charge	Tm	800		1280 00	
CE 202	Depth Charge 100' - 2000'	4hrs	1		1500 00	
CE 504	Plug Container Utilization Charge	Job	1		250 00	
E 100	Unit Mileage Charge - Pickups	mi	25		106 25	
5003	Service Supervisor, First 8 hrs on loc.	ea	1		175 00	
					SUB TOTAL	14731.68

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		

SERVICE REPRESENTATIVE <u>Carlos Lopez</u>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <u>CMW</u> (WELL OWNER OPERATOR CONTRACTOR OR AGENT)
FIELD SERVICE ORDER NO.	

# BASIC

energy services, L.P.

## TREATMENT REPORT

Customer <b>OX4 USA</b>	Lease No.	Date <b>8-30-10</b>
Lease <b>SHARTZ "M"</b>	Well # <b>1</b>	
Field Order # <b>1008 A</b>	Station <b>Liberal, KS 17M</b>	Casing <b>8 5/8"</b>
		Depth <b>1758.25</b>
Type Job <b>8 5/8 Surface 2-42</b>	Formation	County <b>GRANT</b>
		State <b>KS</b>
		Legal Description <b>7-30-38</b>

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP	
<b>8 5/8"</b>								
Depth <b>1758.25</b>	Depth	From	To	Pre Pad	Max <b>5.5</b>	<b>1000</b>	<b>5 Min.</b>	
Volume <b>109</b>	Volume	From	To	Pad	Min <b>2</b>	<b>50</b>	<b>10 Min.</b>	
Max Press <b>1370</b>	Max Press	From	To	Frac	Avg <b>4</b>	<b>350</b>	<b>15 Min.</b>	
Well Connection	Annulus Vol.	From	To		HHP Used		Annulus Pressure	
Plug Depth <b>1713.8</b>	Packer Depth	From	To	Flush	Gas Volume		Total Load <b>109</b>	

Customer Representative <b>Cal Willie</b>	Station Manager <b>JERRY BENNETT</b>	Treater <b>Carlos Lopez</b>
Service Units <b>14355 14284 14354 19578 27462 19902</b>		
Driver Names <b>Ruben Chavez Ruben Martinez Mickey C. Lopez</b>		

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<b>4:00 pm</b>					<b>ARRIVE @ LOCATION</b>
<b>4:10 pm</b>					<b>Spot in Trucks &amp; Rig up IRON</b>
<b>6:25</b>					<b>STAB CEMENT HEAD &amp; Circ. WELL</b>
<b>6:30</b>	<b>2500</b>				<b>CHANGE OVER &amp; TEST LINES</b>
<b>6:34</b>			<b>5</b>	<b>3</b>	<b>5 bbl/H2O AHEAD</b>
<b>6:37</b>			<b>206</b>	<b>5</b>	<b>480 SLS Lead CEMENT @ 12.1 ppq. w/</b>
<b>7</b>					<b>3% CC - 1/2" # CELLFAK - .2% WCA-1</b>
<b>7:14</b>			<b>47.7</b>	<b>5</b>	<b>200 SLS Tail CEMENT @ 14.8 ppq w/</b>
					<b>2% CC - 1/4" # CELLFAK</b>
<b>7:24</b>					<b>Shut Down - Drop Top Plug.</b>
<b>7:26</b>			<b>109</b>	<b>5.5</b>	<b>Displacement w/ H2O</b>
<b>7:47</b>			<b>99</b>	<b>2</b>	<b>Slow Down RATE to 2 bpm LAST 10 bbl</b>
<b>7:54</b>			<b>109</b>	<b>2</b>	<b>Bump Plug to</b>
<b>7:56</b>					<b>Release PRESSURE</b>
<b>8:00</b>					<b>Rig Down EQUIPMENT</b>
<b>9:00</b>					<b>DEPART LOCATION</b>



**BASIC**  
ENERGY SERVICES  
PRESSURE PUMPING & WIRELINE

1700 S. Country Estates Rd.  
P.O. Box 129  
Liberal, Kansas 67905  
Phone 620-624-2277

FIELD SERVICE TICKET  
1717 01078 A

DATE \_\_\_\_\_ TICKET NO. \_\_\_\_\_

DATE OF JOB <u>9/6/10</u>	DISTRICT <u>1717</u>	NEW WELL <input checked="" type="checkbox"/>	OLD WELL <input type="checkbox"/>	PROD <input type="checkbox"/>	INJ <input type="checkbox"/>	WDW <input type="checkbox"/>	CUSTOMER ORDER NO.:		
CUSTOMER <u>Oxy USA</u>	LEASE <u>Schartz "M"</u>		1		WELL NO.				
ADDRESS	COUNTY <u>Morton</u>	STATE <u>Ks</u>							
CITY	STATE	SERVICE CREW <u>Royce, Ruben M.</u>							
AUTHORIZED BY <u>Tyce Davis</u>	JOB TYPE: <u>5 1/2 L.S. 742</u>								
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
<u>19868</u>	<u>10.5</u>						<u>9/6/10</u>	<u>AM</u>	<u>2:30</u>
<u>30464</u>	<u>10.5</u>					ARRIVED AT JOB		<u>AM</u>	<u>5:00</u>
<u>19919</u>	<u>10.5</u>					START OPERATION	<u>9/7/10</u>	<u>PM</u>	<u>1:35</u>
<u>19877</u>	<u>10.5</u>					FINISH OPERATION		<u>PM</u>	<u>2:52</u>
<u>19566</u>	<u>10.5</u>					RELEASED		<u>PM</u>	<u>3:30</u>
						MILES FROM STATION TO WELL	<u>65</u>		

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP.

SIGNED P.M.V.  
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

1102615-0202

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CL100	Common	SK	50		800 00
CL104	50/50 Poz.	SK	115		1265 00
CC113	Gypsum	lb	485		363 75
CC111	Salt	lb	640		320 00
CC107	C-42 P	lb	25		200 00
CC124	FLA-115	lb	59		885 00
CC201	Gilsonite	lb	575		385 25
CF1451	Flapper Type Float Valve 5 1/2	EA	1		215 00
CF251	Guide Shoe Reg. 5 1/2	EA	1		250 00
CF1661	Turbolizer 5 1/2	EA	20		2200 00
CF103	Top Rubber Gasket Plug 5 1/2	EA	1		105 00
CF501	5 1/2 Stop Ring	EA	1		40 00
CC155	Super Flush 11	gal	500		765 00
E101	Heavy Equip Mileage	mi	130		910 00
CE240	Blending & mixing Charge	SK	115		231 00
E113	Bulk Delivery Charge	tm	468		748 80
CE206	Depth Charge 500' to 6000'	4hr	1		2880 00
CE504	Plug Container	job	1		250 00
E100	Pickup Mileage	mi	65		276 25

SUB TOTAL 8,380.53

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		

SERVICE REPRESENTATIVE <u>Chad Hinz</u>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY <u>P.M.V.</u> (WELL OWNER OPERATOR CONTRACTOR OR AGENT)
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FIELD SERVICE ORDER NO.





# BASIC

energy services, L.P.

## TREATMENT REPORT

Customer <b>Oxy USA</b>	Lease No.	Date <b>9/6/10</b>
Lease <b>Schartz "M"</b>	Well # <b>1</b>	
Field Order #	Station	Casing <b>5 1/2</b> Depth <b>5340' RTD</b> County <b>Morton</b> State <b>KS</b>
Type Job <b>5 1/2 C.S. Z42</b>	Formation	Legal Description <b>F-30-38</b>

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME	
Casing Size <b>5 1/2</b>	Tubing Size	Shots/Ft		Acid <b>15% 50/50 p07</b>	RATE <b>570W-60</b>	PRESS <b>1070</b>	ISIP <b>14" # Debris</b>
Depth <b>5344.27</b>	Depth	From	To	Pre Pad <b>6" 10C-15.5"</b>	Max. <b>1.52</b>		Min. <b>1.52</b>
Volume <b>134.6</b>	Volume	From	To	Pad <b>6.05 gal/sk</b>	Min		10 Min.
Max Press	Max Press	From	To	Frac <b>60 5x "C" @ 15.6"</b>	Avg # <b>1.16</b>		15 Min. <b>5.22 gal/sk</b>
Well Connection <b>P.C.</b>	Annulus Vol.	From	To	Flush <b>Fresh</b>	HHP Used		Annulus Pressure
Plug Depth	Packer Depth	From	To		Gas Volume		Total Load

Customer Representative <b>Cal White</b>	Station Manager <b>Sunny Bennett</b>	Treater <b>Chad Hinz</b>
Service Units <b>19558 30414 19919 19527 19516</b>		
Driver Names <b>C. Hinz R. Olds R. Martinez</b>		

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
17:00					on loc. spot trucks, setting mtg. rig
23:40					Break Circ. <del>circulation</del>
01:30	9/6/10				setting mtg
01:35	350		5	3	Pump H2O spacer
01:37	250		12	3	Pump superflush
01:42	250		5	3	Pump H2O spacer
01:46	-				Plug R+M
02:09	350		0	5.5	Start mix 50/50 p07 @ 13.8"
02:16	150		29	5.6	Finish mixing
02:17	0		31	-	Shutdown, washup, Drop Plug
02:24	0		0	4-6	Start Disp.
02:44	350		114	3	Slow Rate
02:50	700-2300		134		Plug Down
02:52	2300-0				Release Psi, float held
					Job Complete
					Thank You Chad & Crew



*Mark Parkinson, Governor  
Thomas E. Wright, Chairman  
Joseph F. Harkins, Commissioner  
Ward Loyd, Commissioner*

December 22, 2010

LAURA BETH HICKERT  
OXY USA Inc.  
5 E GREENWAY PLZ  
PO BOX 27570  
HOUSTON, TX 77227-7570

Re: ACO1  
API 15-067-21715-00-00  
SCHARTZ M 1  
SW/4 Sec.07-30S-38W  
Grant County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,  
LAURA BETH HICKERT

**Attachment to Schartz M-1 (API # 15-067-21715-00-00)**

**Cement & Additives**

String	Type	# of Sacks Used	Type and Percent Additives
Surface	A-Con	Lead: 480	3% CC, 1/4# Cellflake, 0.2% WCA1
	Prem Plus	Tail: 200	2% CC, 1/4# Cellflake
Production	50-50 Poz	115	5% W-60, 10% Salt, 0.6% C-15, 1/4# Defoamer, 5# Gilsonite