Confiden	tiality R	equested:
Yes	No	

CORRECTION #1

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION 1249516

Form ACO-1 August 2013 Form must be Typed Form must be Signed All blanks must be Filled

WELL COMPLETION FORM

OPERATOR: License #	API No. 15
Name:	Spot Description:
Address 1:	
Address 2:	Feet from North / South Line of Section
City: State: Zip:+	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	(e.g. xx.xxxx) (e.gxxx.xxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
New Well Re-Entry Workover	Field Name:
	Producing Formation:
	Elevation: Ground: Kelly Bushing:
Gas D&A ENHR SIGW	Total Vertical Depth: Plug Back Total Depth:
CM (Coal Bed Methane)	Amount of Surface Pipe Set and Cemented at: Feet
Cathodic Other (<i>Core, Expl., etc.</i>):	Multiple Stage Cementing Collar Used?
If Workover/Re-entry: Old Well Info as follows:	If yes, show depth set: Feet
Operator:	If Alternate II completion, cement circulated from:
Well Name:	feet depth to:w/sx cmt.
Original Comp. Date: Original Total Depth:	
Deepening Re-perf. Conv. to ENHR Conv. to SWD	Drilling Fluid Management Plan
Plug Back Conv. to GSW Conv. to Producer	(Data must be collected from the Reserve Pit)
	Chloride content: ppm Fluid volume: bbls
Commingled Permit #:	Dewatering method used:
Dual Completion Permit #:	
SWD Permit #:	Location of fluid disposal if hauled offsite:
ENHR Permit #:	Operator Name:
GSW Permit #:	Lease Name: License #:
	Quarter Sec TwpS. R East West
Spud Date orDate Reached TDCompletion Date orRecompletion DateRecompletion Date	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
Confidentiality Requested
Date:
Confidential Release Date:
Wireline Log Received
Geologist Report Received
UIC Distribution
ALT I II III Approved by: Date:

CORRECTION #1

1249516

Gravity

Operator Na	me:			Lease Name:	_ Well #:
Sec	Twp	_S. R	East West	County:	

INSTRUCTIONS: Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

Drill Stem Tests Taken (Attach Additional St	neets)	Yes No		_og Formatio	on (Top), Depth ar	nd Datum	Sample
Samples Sent to Geolo	gical Survey	Yes No	Nam	ie		Тор	Datum
Cores Taken Electric Log Run		☐ Yes ☐ No ☐ Yes ☐ No					
List All E. Logs Run:							
			RECORD N	ew Used ermediate, product	ion, 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
		ADDITIONA	L CEMENTING / SQ	JEEZE RECORD			
Purpose: Depth Typ Perforate Top Bottom		Type of Cement	# Sacks Used	Type and Percent Additives			
Protect Casing Plug Back TD							
Plug Off Zone							
Did you perform a hydrauli	-			Yes [p questions 2 ar	nd 3)
	-	Iraulic fracturing treatment e n submitted to the chemical	-			ip question 3) out Page Three	of the ACO-1)
Shots Per Foot PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated				cture, Shot, Cement mount and Kind of Ma		d Depth	
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:			
					Yes No		
Date of First, Resumed P	Production, SWD or EN	IHR. Producing Met	thod:	Gas Lift 🗌 C	Other (Explain)		

Per 24 Hours		
DISPOSITION OF GAS:	METHOD OF COMPLETION:	PRODUCTION INTERVAL:
Vented Sold Used on Lease	Open Hole Perf. Dually Comp. Commingled	
(If vented, Submit ACO-18.)	(Submit ACO-5) (Submit ACO-4)	

Water

Bbls.

Gas-Oil Ratio

Estimated Production

Oil

Bbls.

Gas

Mcf

Form	ACO1 - Well Completion
Operator	Black Tea Oil, LLC
Well Name	Wood A 1
Doc ID	1249516

Casing

	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement		Type and Percent Additives
Surface	12.25	8.625	23	250	common	225	
Production	8.625	5.5	15.5	4500	common	250	

Summary of Changes

Lease Name and Number: Wood A 1

API/Permit #: 15-109-21384-00-00

Doc ID: 1249516

Correction Number: 1

Approved By: NAOMI JAMES

Field Name	Previous Value	New Value
Amount of Surface Pipe Set and Cemented at	250	265
Approved Date	02/13/2015	04/14/2015
CasingNumbSacksUse dPDF_1	180	225
CasingNumbSacksUse dPDF_2	230	250
CasingWeightPDF_1	16	23
CasingWeightPDF_2	20	15.5
If Alternate II Completion - Cement	2100	2616
Circulated From If Alternate II Completion - Sacks of	450	575
Cement Kelly Bushing Elevation	3249	3251
Method Of Completion - Perf	No	Yes

Summary of changes for correction 1 continued

Field Name	Previous Value	New Value
Multiple Stage Cementing Collar Depth	2100	2616
Perf_Record_1		4474-4490
Plug Back Total Depth	4500	4856
Producing Formation	Kansas City/Johnson	marmaton
Save Link	//kcc/detail/operatorE ditDetail.cfm?docID=12	//kcc/detail/operatorE ditDetail.cfm?docID=12
TopsDatum1	42681 -1307	49516 -1223
TopsDepth1	4549	4474
TopsName1	Kansas City	marmaton
Total Depth	4500	4903



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION 1242681

Form ACO-1 August 2013 Form must be Typed Form must be Signed All blanks must be Filled

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

OPERATOR: License #	API No. 15
Name:	Spot Description:
Address 1:	
Address 2:	Feet from North / South Line of Section
City: State: Zip:+	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	(e.g. xx.xxxx) (e.gxxx.xxxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
New Well Re-Entry Workover	Field Name:
	Producing Formation:
	Elevation: Ground: Kelly Bushing:
Gas D&A ENHR SIGW	Total Vertical Depth: Plug Back Total Depth:
GG GSW Temp. Abd.	Amount of Surface Pipe Set and Cemented at: Feet
CM (Coal Bed Methane)	Multiple Stage Cementing Collar Used? Yes No
	If yes, show depth set: Feet
If Workover/Re-entry: Old Well Info as follows:	If Alternate II completion, cement circulated from:
Operator:	
Well Name:	feet depth to:w/sx cmt
Original Comp. Date: Original Total Depth:	
Deepening Re-perf. Conv. to ENHR Conv. to SWD	Drilling Fluid Management Plan
Plug Back Conv. to GSW Conv. to Producer	(Data must be collected from the Reserve Pit)
Commingled Permit #:	Chloride content: ppm Fluid volume: bbls
Dual Completion Permit #:	Dewatering method used:
SWD Permit #:	Location of fluid disposal if hauled offsite:
ENHR Permit #:	
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	Quarter Sec TwpS. R East West
Recompletion Date Recompletion Date	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
Confidentiality Requested
Date:
Confidential Release Date:
Wireline Log Received
Geologist Report Received
UIC Distribution
ALT I II III Approved by: Date:

KOLAR Document ID: 1242681

Operator Name:	Lease Name:	Well #:
Sec TwpS. R East 🗌 West	County:	

Page Two

INSTRUCTIONS: Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

Drill Stem Tests Taken (Attach Additional Sh	acate)	Y	′es 🗌 No			og Formatio	n (Top), Depth a	and Datum	Sample
Samples Sent to Geolo			⁄es 🗌 No	1	Name	Э		Тор	Datum
Cores Taken Electric Log Run Geologist Report / Mud List All E. Logs Run:		□ Y □ Y	Yes ☐ No Yes ☐ No Yes ☐ No						
		Rep	CASING ort all strings set-c		Ne	w Used rmediate, productio	on, etc.		
Purpose of String	Size Hole Drilled	Siz	ze Casing et (In O.D.)	Weight Lbs. / Ft.		Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
[ADDITIONAL	CEMENTING /	SQU	EEZE RECORD			
Purpose:	Depth Top Bottom	Туре	e of Cement	# Sacks Use	d		Type and	Percent Additives	
Protect Casing Plug Back TD Plug Off Zone									
 Did you perform a hydra Does the volume of the Was the hydraulic fracture 	total base fluid of the	hydraulic fr	acturing treatment		-	☐ Yes ns? ☐ Yes ☐ Yes	No (If No, s	kip questions 2 ar kip question 3) ill out Page Three	
Date of first Production/Inj Injection:	jection or Resumed Pr	oduction/	Producing Meth	iod:		Gas Lift 🗌 O	ther <i>(Explain)</i>		
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Wate	er Bb	ls.	Gas-Oil Ratio	Gravity
DISPOSITIO	N OF GAS:		Ν	IETHOD OF COM	MPLE	TION:		PRODUCTIC Top	DN INTERVAL: Bottom
Vented Sold (If vented, Subn	Used on Lease		Open Hole		-	·	mingled	юр	
	foration Perform Top Botto		Bridge Plug Type	Bridge Plug Set At		Acid,		ementing Squeezend of Material Used)	
TUBING RECORD:	Size:	Set At:		Packer At:					

Form	ACO1 - Well Completion
Operator	Black Tea Oil, LLC
Well Name	Wood A 1
Doc ID	1242681

Casing

	Size Hole Drilled	Size Casing Set	U U	Setting Depth	Type Of Cement		Type and Percent Additives
Surface	12.25	8.625	16	250	common	180	
Production	8.625	5.5	20	4500	common	230	

GLOBAL CEMENTING, L.L.C.

	8048 170R RUSSELL,				SEF	RVICE POINT:	C,KS	
	ana	10011.00						*
DATE 12 23-20	17 SEC.	TWP.	RANGE	CAL	LED OUT	ON LOCATION	JOB START	JOB FINISH
LEASE WOOD A	WELL #.	/	LOCATION				COUNTY	STATE
OLD OR NEW (CIR	RCLE ONE)		98) 					
TYPE OF JOB SUR	FALE		ILLING RIGH	=5	OWNER			
HOLE SIZE / Z /// CASING SIZE \$ 5/	, 1		DEPTH 264.85		CEMENT	0.0		
TUBING SIZE			DEPTH 2 G7, 85	-	AMOUNT ORD	ERED 225 6 CC / 2%	SX COM	MON
DRILL PIPE			EPTH	-		0 CC / 6/70	GEL	
TOOL		and the second second	EPTH		-	2		
PRES. MAX			IINIMUM	-	0010 (0)1		12.7	
MEAS. LINE			HOE JOINT	-	COMMON		@	
CEMENT LEFT IN CSG	.20'							
PERFS				2	GEL			
DISPLACEMENT / 5	· 5 BBL	-		8				
	EQUIPME	INT			ASC		0	
							@	
PUMP, TRUCK CE	MENTER Z	BAAD						
	LPER BIL	0					@	-
BULK TRUCK	-				1		0	-)
# // DR	IVER TIM						-	
BULK TRUCK							0	
<u>#</u> DR	IVER						-	
					HANDLING		@	
1					MILEAGE		<u> </u>	
2. 1	REMA	RKS:	/		÷		TOTAL	
THIS IN G JOIN	75 85/3	3 CASIA	us w/12' LAND	INC				
						SED	VICE	
FUMP LE SY	- DISP	LACE IS	115 5 RQI M	-0-		SEK	VICE	
SHUT IN W/2	200 151	- CEME.	NT DID CIRCUL	MTE	DEPTH OF JOB_			
					PUMP TRUCK CI			
					EXTRA FOOTAG	F	@	
					MILEAGE	24	@	4
							0	
Rin	CK TEP	1					@	
CHARGE TO:A	CR IEr	4 VIL					0	-
STREET							TOTAL	
CITY	STATE	211						
Z	- 51ALE	ZIP	·			PLUG & FLOA	TEOLIDMEN	т
						ILUG & FLOA	I EQUIPMEN	1
Global Cementing, L	IC							
You are hereby requ	lested to "	ent comos	ting aquinment and			(@	
furnish cementer and	helper(s)	to assist on	vner or contractor to			(@	<u> </u>
do work as is listed.	The above	work was	done to satisfaction			(@	
and supervision of ov	wher agent	Or contrac	tor I have read and			(
understand the "GE	NERAL T	ERMS AN	JD CONDITIONS"			(@	
listed on the reverse s	ide. Tun	ale II.	L COMDITIONS					
	1	JE 70	0;				TOTAL	
PRINTED NAME	Hllen	P PII	15					
RUNTED NAME	1	. []	/		SALES TAX (If Ar	ıy)		
SIGNATURE	10	~			TOTAL CHARGES			
a dete	C							
					DISCOUNT		IF	PAID IN 30 DAYS

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FIELD RECEIPT NO. 723510050

1 th	D	BHIAPPROVED	X BHI APP		GENT	CUSTOMER AUTHORIZED AGENT		NERAL	OR GEI	AND CO	TERMS AND CONDITIONS
	D AGENT	CUSTOMER AUTHORIZED AGENT		S FORM AND AND SIGN TH	AGE OF THI TO ACCEPT	CONDITIONS PRINTED ON THE LAST PAGE OF THIS FORM AND REPRESENT THAT I HAVE AUTHORITY TO ACCEPT AND SIGN THIS ORDER.	REPRESENT THAT ORDER.		d	Conrad	CUSTOMER REP.
ALS AND RVICES	THE MATERI	SERVICE RECEIPT: I CERTIFY THAT THE MATERIALS AND SERVICES LISTED WERE RECEIVED AND ALL SERVICES		S AND	TO BEGIN F	SERVICE ORDER: I AUTHORIZE WORK TO BEGIN PER SERVICE	SERVICE ORDER:	YEAR TIME 2015 12:00	DAY YE 23 20	MO.	ARRIVE LOCATION :
950.66	48.78%	06.552'1									
740.66	55%	1,645.90	5.450	200		SUB-TOTAL FOR Service Charges	SUB-TOTAL F	3			
210.00	0%	210.00	21		ea ₽		Personnel Per Diem Chrg - Cement Svc Bulk Materials Blending Charge	Personnel Per Diem Chrg - Cer Bulk Materials Blending Charge	rsonnel P k Materia	Pe	A152 M100
6,039.71	55.00%	13,421.56				SOD-IOTAL FOR Product Material					
885.60	55%	1,968.00	16.400	120	sack	·	SIIR TOTAL		or go i too	1	
330.75	55%	735.00	147.000	IJ	gals		Lafame Red Rock Dov	I Pook Doz	arne Red	2	L425411-00
36.63	55%	81.40	40.700	2	lbs		1 200 - 1-1-0	lav Treat or	VCare C	0	499702
540.00	55%	1,200.00	1.250	096	Sql			See 2	Static Free	Sta	499680
1,027.94	55%	2,284.30	21.550	106	lbs) Ib han	Kol-Seal 50 lb han	Ko	499634
93.83	55%	208.50	104.250	2	gals				FL-62	P	488073
84.94	55%	188.76	0.520	363	lbs				FP-6L	Ŧ	488019
137.70	55%	306.00	5.100	60	Sql			orida	Sodium Chloride	So	100404
195.57	55%	434.60	4.100	106	sal				Cello Flake	Ce	100295
2,706.75	55%	6,015.00	40.100	150	sacks			tasilicate	Sodium Metasilicate	So	100275
AMOUNT	% DISC.	AMOUNT	PRICE UNIT	QUANTITY	MEASURE		DESCRIPTION		Class H Cement	C	100022
	2	guing	Long String	Indiado	UNIT OF						PRODUCT
			JOB TYPE CODE :	STATE	X (0	COUNTY/PARISH Logan	<u>CN</u>	16-14S-35W	16-		LOCATION :
			No Gas	4,899							WOOD A #1
			GAS LISED ON IOB .		TD WELL DEPTH(ft)	TD WEL			MBER	AND NU	WELL NAME AND NUMBER
			WELL CLASS :	4,903		JOB DEPTH(ft)				N	PP, PERRYTON
		ell	WELL TYPE : New Well		API NO: 15109213840000	WELL API NO: 151092	Barry K Barkley	11000	-		COMPLETED
		67601	Kansas	SA	1_		1014 EAST 29TH		DAY	MO.	DATE WORK
		ATE 210 CODE	STATE	Y	CITY		UMBER	STREET OR BOX NUMBER	STREE		MAIL
INVOICE NUMBER		R NUMBER	CUSTOMER NUMBER	FUNCHASE URDER NO.		CILEDIT OF LIVOVAL NO.		BLACK TEA OIL LLC	ACK TEA	BL	

CUSTOMER AUTHODIZED ACENT		BHI APPROVED	
			>
CONDITIONS PRINTED ON THE LAST PAGE OF THIS FORM AND REPRESENT THAT I HAVE AUTHORITY TO ACCEPT AND SIGN THIS	AND S	IGN AN	
SERVICE ORDER: I AUTHORIZE WORK TO BEGIN PER SERVICE	ER SEF	RVIO	AVICE SERVICE RECEIPT: I CERTIFY THAT THE MATERIALS AND SERVICES LISTED WERE RECEIVED AND ALL SERVICES
FIELD ESTIMATE			
SUB-TOTAL FOR Freight/Delivery Charges			
ton-mi	N	4	2457 3.940
B-TOTAL FOR Equipment		104	
Mileage, Auto, Pick-Up or Treating Van miles		4	400 6 700
			Ţ
Data Acquisition, Cement, Standard			ა
			1 020 000
Cement Pumping, Additional hrs			6
TION UNIT OF MEASURE	QUANTITY	-	LIST PRICE U
Logan Kansas	nsas		JOB TYPE CODE :
	4,899		No Gas
	1000		
JOB DEPTH(ft) 4 90	4 903		WELL CLASS :
Barry K Barkley 15109213840000)00		WELL TYPE : New Well
	0		Kansas
1014 EAST 29TH HAVE	0		STATE
CREDIT APPROVAL NO. PURCHASE ORDER NO.	ORDER	NO	NO. CUSTOMER NUMBER 0040140007 - 0040140007

MAII		CAEDIT AFFROVAL NO. PURCH	PURCHASE ORDER NO.	CUSTOME 004014	CUSTOMER NUMBER 0040140007 - 0040140007	INVOICE NUMBER
INVOICE TO :	1014 EAST 29TH	T -	CITY	STATE	ZIP CODE	
COMPLETED	MO. DAY YEAR BHI REPRESENTATIVE	WELL API NO:		WELL TYPE :	07001	
PP, PERRYTON		JOB DEPTH (ft)		WELL CLASS :		
WELL NAME AND NUMBER	DNUMBER	TD WELL DEPTH (ft)	4,500	GAS USED ON JOB :	08:	
WELL				No Gas	S	
LOCATION :	16-14S-35W	COUNTY/PARISH Logan	_	JOB TYPE CODE :		
PRODUCT CODE	DESCRIPTION	UNIT OF	C QUANTITY	LIST G	ROSS	_
100022	Class H Cement	02/00	(15)			DINCON ANNOUND
100275	Sodium Metasilicate		UCL.	1	10.000	2,706.75
100295	Cello Flake	lbs	106			195.57
100404	Sodium Chloride	lhs	00			137.70
488019	FP-6L	100	- 303			84.94
488073	FL-62		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			93.83
499634	Kol-Seal, 50 lb bag	150	OUL			1,027.94
499680	Static Free	- De	000			540.00
499702	ClayCare, Clay Treat-2C, 260 gl tote	120				36.63
L425411-00	Lafarge Red Rock Poz	sack	120	/		330.75
	SUB-TOTAL	SUB-TOTAL FOR Product Material				6,039.71
A152 M100	Personnel Per Diem Chrg - Cement Svc	ea	-			210.00
	SUR TOTAL	cu ft	302			740.66
						950.66
ARRIVE MO. LOCATION : 01	23 2015 12:00	SERVICE ORDER: I AUTHORIZE WORK TO BEGIN PER SERVICE	PER SERVICE	non	ERVICE RECEIPT: I CERTIFY THAT THE MATERIALS AND	HE MATERIALS AND
CUSTOMER REP.	HAVE AUTHORITY	HAVE AUTHORITY TO ACCEPT AND SIGN THIS FORM AND REPRESENT THAT I	REPRESENT TH	0 0	PERFORMED IN A WORKMANLIKE MANNER.	AGENT
SEE LAST PA	TERMS AND CONDITIONS	CUSTOMED AUTHODIZED ACENT		BHI APP	BHI APPROVED	

FIELD RECEIPT NO. 723510050



	1110	and and	Shoe			AGENI	CUSTOMER AUTHORIZED AGENT	000					
	0	BOVED	BHI APPROVED					2	ERAL	PAGE FOR GENER	GE FO	ST PA MS AN	SEE LAST PAGE FOR GENERAL TERMS AND CONDITIONS
	AGENT	CUSTOMER AUTHORIZED AGENT	CUSTON	ENT THAT I	DER.	ORM AND	PRINTED ON THE LAST PAGE OF THIS FORM AND REPRESENT THAT I HAVE AUTHORITY TO ACCEPT AND SIGN THIS ORDER.	HAVE AUTHORI				REP.	CUSTOMER REP
RIALS AND SERVICES	THE MATE	SERVICE RECEIPT: I CERTIFY THAT THE MATERIALS AND SERVICES LISTED WERE RECEIVED AND ALL SERVICES	SERVICE RECEIL	/ICE ONDITIONS	PER SERV	TO BEGIN THE TERN	SERVICE ORDER: I AUTHORIZE WORK TO BEGIN PER SERVICE	SERVICE ORDE	12:00	2015	0. DAY 1 23	: 01	ARRIVE LOCATION :
19,919.81							FIELD ESTIMATE						
4,356.26							Soup-1 OTAE FOR Freight/Delivery Charges						
4,356.26			-	2457		ton-mi		Icts	Bulk Delivery, Dry Products)elivery, I	Bulk [J401
8,573.18							SUB-TOTAL FOR Equipment	SUB					
1,206.00				400		miles		Mileage, Auto, Pick-Up or Treating Van	Pick-Up c	je, Auto,	Milea		1 BOD
2,133.00				400		miles			/ Vehicle	Mileage, Heavy Vehicle	Milea		1904
058 50				<u> </u>		job		Data Acquisition, Cement, Standard	n, Cemer	Acquisitic	Data		J225
272 50						job .				Cement Head	Ceme		J050
				<u>ത</u> ।		pump/hr		cement	Fuel per pump charge - cement	per pump	Fuel		F090
C.246.7				· ·		hrs		ional hrs	Cement Pumping, Additional hrs	ent Pump	Ceme		F088
0000				_		6hrs		4001 - 5000 ft		Cement Pumping,	Ceme		F061A
AMOUNT	%DISC.	GROSS	LIST PRICE UNIT		QUANTITY	UNIT OF		DESCRIPTION				mC	CODE
		ing	JOB TYPE CODE : Long String	JOB 1	STATE Kansas		Logan	N	16-14S-35W	16-14			LOCATION :
			No Gas		4,899			NO.	LEGAL DESCRIPTION			1	WELL
			B	GAS US	(ft)	TD WELL DEPTH	TD WEL			ER	O NUMB	ME ANI	WELL NAME AND NUMBER
			Oil	WELL C	4,903	JOB DEPTH (ft)	JOB DE					YTON	PP, PERRYTON
		*	New Well	WELL	0000	15109213840000	151092	Barry K Barkley			-	TED	COMPLETED
		10070	INGIISOS					BHI REPRESENTATIVE	-	DAY YEAR	MO. D		DATE WORK
		ZIP CODE	STATE		CITY	Ξo		NUMBER 1014 EAST 29TH	STREET OR BOX NUMBER 1014 EAS	STREET		TO:	INVOICE TO :
INVOICE NUMBER		0040140007 - 0040140007	0040140007 - 0040	NO.	PURCHASE ORDER NO.	PURCHA	CREDIT AFFROVAL NO.		VIL LLC	BLACK TEA OIL LLC	BLAC		
							COEDIT ADDOLLAL NO					73	CUSTOMER

Page 2