



Confidentiality Requested:

Yes  No

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

OPERATOR: License # \_\_\_\_\_

Name: \_\_\_\_\_

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

CONTRACTOR: License # \_\_\_\_\_

Name: \_\_\_\_\_

Wellsite Geologist: \_\_\_\_\_

Purchaser: \_\_\_\_\_

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
- Plug Back       Conv. to GSW       Conv. to Producer
- Commingled      Permit #: \_\_\_\_\_
- Dual Completion      Permit #: \_\_\_\_\_
- SWD      Permit #: \_\_\_\_\_
- ENHR      Permit #: \_\_\_\_\_
- GSW      Permit #: \_\_\_\_\_

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
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API No. 15 - \_\_\_\_\_

Spot Description: \_\_\_\_\_

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_- Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West

\_\_\_\_\_ Feet from  North /  South Line of Section

\_\_\_\_\_ Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE     NW     SE     SW

GPS Location: Lat: \_\_\_\_\_, Long: \_\_\_\_\_  
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum:  NAD27     NAD83     WGS84

County: \_\_\_\_\_

Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Field Name: \_\_\_\_\_

Producing Formation: \_\_\_\_\_

Elevation: Ground: \_\_\_\_\_ Kelly Bushing: \_\_\_\_\_

Total Vertical Depth: \_\_\_\_\_ Plug Back Total Depth: \_\_\_\_\_

Amount of Surface Pipe Set and Cemented at: \_\_\_\_\_ 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: \_\_\_\_\_ 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 #: \_\_\_\_\_

**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: \_\_\_\_\_

Operator Name: \_\_\_\_\_ 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 <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No  Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No  List All E. Logs Run: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Top Datum
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CASING RECORD <input 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

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				

Did you perform a hydraulic fracturing treatment on this well?  Yes  No *(If No, skip questions 2 and 3)*  
 Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?  Yes  No *(If No, skip question 3)*  
 Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?  Yes  No *(If No, fill out Page Three of the ACO-1)*

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

TUBING RECORD:      Size: \_\_\_\_\_ Set At: \_\_\_\_\_ Packer At: \_\_\_\_\_ Liner Run:  Yes  No

Date of First, Resumed Production, SWD or ENHR: \_\_\_\_\_ Producing Method:  
 Flowing  Pumping  Gas Lift  Other *(Explain)* \_\_\_\_\_

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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Form	ACO1 - Well Completion
Operator	Merit Energy Company, LLC
Well Name	SHELL B 8
Doc ID	1257525

All Electric Logs Run

ANNULAR HOLE VOLUME
ARRAY COMPENSATED TRUE RESISTIVITY LOG
ARRAY COMPENSATED TRUE RESISTIVITY LOG 1 INCH
ARRAY COMPENSATED TRUE RESISTIVITY LOG 2 INCH
BOREHOLE COMPENSATED SONIC ARRAY LOG
CEMENT BOND LOG
DUAL SPACED NEUTRON SPECTRAL DENSITY LOG
MICROLOG
QUAD COMBO LOG

Form	ACO1 - Well Completion
Operator	Merit Energy Company, LLC
Well Name	SHELL B 8
Doc ID	1257525

Tops

Name	Top	Datum
HEEBNER	3756	
TORONTO	3775	
LANSING	3814	
KANSAS CITY	4142	
MARMATON	4299	
PAWNEE	4383	
CHEROKEE	4429	
MORROW	4615	
ST GENEVIEVE	4681	
ST LOUIS	4716	



## Summary of Changes

Lease Name and Number: SHELL B 8

API/Permit #: 15-055-22365-00-00

Doc ID: 1257525

Correction Number: 1

Approved By: NAOMI JAMES

Field Name	Previous Value	New Value
Approved Date	04/27/2015	07/10/2015
Contractor License Number	35070	99975
Contractor Name	Saxon Drilling, LP	COMPANY SERVICING TOOLS
Kelly Bushing Elevation	2989	2988
Save Link	<a href="http://.../kcc/detail/operatorEditDetail.cfm?docID=1250800">../..kcc/detail/operatorEditDetail.cfm?docID=1250800</a>	<a href="http://.../kcc/detail/operatorEditDetail.cfm?docID=1257525">../..kcc/detail/operatorEditDetail.cfm?docID=1257525</a>



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1250800  
OIL & GAS CONSERVATION DIVISION

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 # \_\_\_\_\_

Name: \_\_\_\_\_

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

CONTRACTOR: License # \_\_\_\_\_

Name: \_\_\_\_\_

Wellsite Geologist: \_\_\_\_\_

Purchaser: \_\_\_\_\_

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
- Plug Back       Conv. to GSW       Conv. to Producer
- Commingled      Permit #: \_\_\_\_\_
- Dual Completion      Permit #: \_\_\_\_\_
- SWD      Permit #: \_\_\_\_\_
- ENHR      Permit #: \_\_\_\_\_
- GSW      Permit #: \_\_\_\_\_

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
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API No. 15 - \_\_\_\_\_

Spot Description: \_\_\_\_\_

\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West

\_\_\_\_\_ Feet from  North /  South Line of Section

\_\_\_\_\_ Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE       NW       SE       SW

GPS Location: Lat: \_\_\_\_\_, Long: \_\_\_\_\_  
(e.g. xx.xxxxx)      (e.g. -xxx.xxxxx)

Datum:  NAD27       NAD83       WGS84

County: \_\_\_\_\_

Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Field Name: \_\_\_\_\_

Producing Formation: \_\_\_\_\_

Elevation: Ground: \_\_\_\_\_ Kelly Bushing: \_\_\_\_\_

Total Vertical Depth: \_\_\_\_\_ Plug Back Total Depth: \_\_\_\_\_

Amount of Surface Pipe Set and Cemented at: \_\_\_\_\_ 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: \_\_\_\_\_ 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 #: \_\_\_\_\_

**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: \_\_\_\_\_
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- UIC Distribution
- ALT  I  II  III Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Operator Name: \_\_\_\_\_ 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](mailto: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 <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No  Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Geologist Report / Mud Logs <input type="checkbox"/> Yes <input type="checkbox"/> No  List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Top Datum
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CASING RECORD <input 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

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				

1. Did you perform a hydraulic fracturing treatment on this well?  Yes  No *(If No, skip questions 2 and 3)*
2. Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?  Yes  No *(If No, skip question 3)*
3. Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?  Yes  No *(If No, fill out Page Three of the ACO-1)*

Date of first Production/Injection or Resumed Production/Injection:	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____				
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

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 type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: Top Bottom
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Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid, Fracture, Shot, Cementing Squeeze Record <i>(Amount and Kind of Material Used)</i>

TUBING RECORD:	Size:	Set At:	Packer At:	
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Form	ACO1 - Well Completion
Operator	Merit Energy Company, LLC
Well Name	SHELL B 8
Doc ID	1250800

All Electric Logs Run

ANNULAR HOLE VOLUME
ARRAY COMPENSATED TRUE RESISTIVITY LOG
ARRAY COMPENSATED TRUE RESISTIVITY LOG 1 INCH
ARRAY COMPENSATED TRUE RESISTIVITY LOG 2 INCH
BOREHOLE COMPENSATED SONIC ARRAY LOG
CEMENT BOND LOG
DUAL SPACED NEUTRON SPECTRAL DENSITY LOG
MICROLOG
QUAD COMBO LOG

Form	ACO1 - Well Completion
Operator	Merit Energy Company, LLC
Well Name	SHELL B 8
Doc ID	1250800

Tops

Name	Top	Datum
HEEBNER	3756	
TORONTO	3775	
LANSING	3814	
KANSAS CITY	4142	
MARMATON	4299	
PAWNEE	4383	
CHEROKEE	4429	
MORROW	4615	
ST GENEVIEVE	4681	
ST LOUIS	4716	

Form	ACO1 - Well Completion
Operator	Merit Energy Company, LLC
Well Name	SHELL B 8
Doc ID	1250800

Perforations

Shots Per Foot	Perforation Record	Material Record	Depth
4	4667-4674 Morrow	Frac-990 bbls, 42,179 40/70 white sand, 1,967,000 SCF Total N2	4667-4674
2	4550-4552, 4600-4604 Atoka		4550-4552
2	4518-4520, 4534-4537 Cherokee		4518-4537
2	4386-4392, 4412-4416, 4418-4421 Pawnee		4386-4421
		Frac-2267 bbls, 90,151 lbs 40/70 white sand, 4,430,000 SCF	4550-4421



# ALLIED OIL & GAS SERVICES, LLC 052803

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:  
Liberal Ks

DATE <u>12-27-14</u>	SEC. <u>17</u>	TWP. <u>22S</u>	RANGE <u>34.W.</u>	CALLED OUT	ON LOCATION	JOB START <u>11:30</u>	JOB FINISH <u>12:30 Pm</u>
LEASE <u>Shell</u>	WELL # <u>B-8</u>	LOCATION <u>83+By rd N 10 Mi, E 1/2</u>		COUNTY <u>Finney</u>	STATE <u>Ks</u>		
OLD OR <u>(NEW)</u> (Circle one)		M, S - 2 Mi, W Into.					

CONTRACTOR <u>Saxon # 146</u>	OWNER <u>MERIT ENERGY</u>
TYPE OF JOB <u>Surface</u>	
HOLE SIZE <u>12 1/4</u>	T.D. <u>1728 ft</u>
CASING SIZE <u>8 5/8 24#</u>	DEPTH <u>1728 ft</u>
TUBING SIZE	DEPTH
DRILL PIPE	DEPTH
TOOL	DEPTH
PRES. MAX	MINIMUM
MEAS. LINE	SHOE JOINT <u>43.66 ft</u>
CEMENT LEFT IN CSG. <u>2.78 BALS</u>	
PERFS.	
DISPLACEMENT <u>107.3 BALS</u>	
EQUIPMENT	
PUMP TRUCK CEMENTER <u>Ruben Chavez</u>	
# <u>531-541</u> HELPER <u>Jaime Torres</u>	
BULK TRUCK	
# <u>562-744</u> DRIVER <u>Jaime Maldonado</u>	
BULK TRUCK	
# <u>994-642</u> DRIVER <u>Jose Calderon</u>	
	F

CEMENT	
AMOUNT ORDERED	<u>350 sk AMD "C", 3% CC, 1/4 lb/sk F.S., 2% SA-51, 200 sk "C", 3% CC, 1/4 lb/sk Floscle</u>
COMMON "C"	<u>200 sk @ 24.40 4,880.00</u>
POZMIX	@
GEL	@
CHLORIDE	<u>21 sk @ 64.00 1,344.00</u>
ASC	@
AMD "C"	<u>350 sk @ 31.00 10,850.00</u>
Floscle	<u>138 lb @ 2.97 409.86</u>
SA-51	<u>66 lb @ 17.55 1,158.30</u>
	@
	@
	@
	@
	@
	@

REMARKS: TOTAL 18,642.16

Well shell B-8  
AFE 35437  
GL 83001075  
Office Garden City  
Date 12/27/14

SERVICE	
Mat handling	<u>617.61 ct @ 2.48 - 1,531.67</u>
PUMP TRUCK CHARGE	<u>2,213.75</u>
Dragage	<u>1369.26 T.M @ 2.60 3,560.07</u>
MILEAGE heavy SOM.	<u>@ 7.70 385.00</u>
MANIFOLD + head	<u>1 @ 275.00 275.00</u>
light vehicle SOM.	<u>@ 4.40 220.00</u>
Circulating iron	<u>1 @ 400.00 400.00</u>

CHARGE TO: MERIT ENERGY  
STREET \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TOTAL 8,585.49

To: Allied Oil & Gas Services, 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	
Top plug Non R.	<u>1 @ 963.51</u>
Float collar N-R	<u>2 @ 1,440.00 2,880.00</u>
Guide shoe	<u>2 @ 460.00 920.00</u>
Centralizer	<u>14 @ 75.00 1,050.00</u>
stop collar	<u>1 @ 96.00</u>
5 1/2 Float collar	<u>1 @ 725.40</u>
5 1/2 Guide shoe	<u>1 @ 250.50</u>
TOTAL	<u>6,876.01</u>

PRINTED NAME EARLY Zica  
SIGNATURE [Signature]

SALES TAX (If Any) \_\_\_\_\_  
TOTAL CHARGES 34,103.66  
DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS  
**NET 22,849.45**

# ALLIED OIL & GAS SERVICES, LLC 065401

Federal Tax I.D. # 20-8651475

REMIT TO P.O. BOX 93999  
SOUTHLAKE, TEXAS 76092

SERVICE POINT:  
Liberal KS

DATE <u>12-31-14</u>	SEC. <u>17</u>	TWP. <u>22s</u>	RANGE <u>34W</u>	CALLED OUT	ON LOCATION <u>11:00 PM</u>	JOB START <u>2:50 AM</u>	JOB FINISH <u>4:00 AM</u>
LEASE <u>Shell</u>	WELL # <u>B-8</u>	LOCATION <u>Garden City KS</u>			COUNTY <u>Furness</u>	STATE <u>KS</u>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)							

CONTRACTOR Saxon 146  
 TYPE OF JOB Production  
 HOLE SIZE 7 7/8 T.D. 5010  
 CASING SIZE 5 7/8 DEPTH 4999  
 TUBING SIZE DEPTH  
 DRILL PIPE DEPTH  
 TOOL DEPTH  
 PRES. MAX 3000 psi MINIMUM  
 MEAS. LINE SHOE JOINT 44.74  
 CEMENT LEFT IN CSG. 44.74 ft  
 PERFS.  
 DISPLACEMENT 115 bbls

OWNER Merit Energy  
 CEMENT  
 AMOUNT ORDERED 245 SKS 50/50 802  
Class H

EQUIPMENT  
 PUMP TRUCK CEMENTER Edgar Rodriguez  
 # 531-541 HELPER Alex Ayala  
 BULK TRUCK  
 # 956-841 DRIVER Jose Garcia  
 BULK TRUCK  
 # DRIVER

COMMON	@		
POZMIX	@		
GEL	@		
CHLORIDE	@		
ASC	@		
Super Flush	12 bbl	@ 58.70	704.40
*50/50 802 Class H	245 SKS	@ 16.85	4128.25
Cryseal	21 SKS	@ 37.60	789.60
Salt	15 SKS	@ 26.35	395.25
Grisonite	1225 #	@ 0.98	1200.50
Flow Seal	62 #	@ 2.97	184.14
RI-100	103 #	@ 18.90	1946.70
CD-31	42 #	@ 10.30	432.60
	@		

REMARKS:

TOTAL 9781.44

Well Shell B-8  
AFE 35437  
GL 83001075  
Office Garden City  
Date 12/31/14

SERVICE

DEPTH OF JOB			<u>4999'</u>
PUMP TRUCK CHARGE	<u>1</u>	<u>3099.25</u>	<u>3099.25</u>
	<u>Light 50mi</u>	@ <u>4.40</u>	<u>220.00</u>
MILEAGE	<u>Heavy 50mi</u>	@ <u>7.70</u>	<u>385.00</u>
MANIFOLD	<u>1</u>	@ <u>275.00</u>	<u>275.00</u>
	<u>Handling</u>	<u>330.11 ft<sup>3</sup></u>	@ <u>2.48</u> <u>818.67</u>
	<u>Drayage</u>	<u>622.24 Ton</u>	@ <u>2.60</u> <u>1617.83</u>

TOTAL 6415.75

CHARGE TO: Merit Energy  
 STREET  
 CITY STATE ZIP

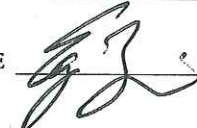
PLUG & FLOAT EQUIPMENT

Gravel Shoe	@	<u>280.80</u>	<u>280.80</u>
Swave Seal float collar	@	<u>725.40</u>	<u>725.40</u>
Centralizer	@	<u>57.33</u>	<u>1146.60</u>
Clamp / Stop Collar	@	<u>49.14</u>	<u>49.14</u>
Top Rubber Plug	@	<u>258.26</u>	<u>258.26</u>

TOTAL 2460.20

To: Allied Oil & Gas Services, 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.

SALES TAX (If Any)  
 TOTAL CHARGES 18,657.39  
 DISCOUNT 1 IF PAID IN 30 DAYS

PRINTED NAME Early Zion  
 SIGNATURE 

Net = 12,500.45



# ALLIED OIL & GAS SERVICES, LLC 065479

Federal Tax I.D. # 20-3651475

REMIT TO P.O. BOX 93999  
SOUTHLAKE, TEXAS 76092

SERVICE POINT:  
Liberal (21)

DATE <u>2-11-15</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
LEASE <u>shell</u>	WELL# <u>B-8</u>	LOCATION <u>Garden City - 152, on west of Hwy 50</u>			COUNTY	STATE	
<u>OLD</u> OR NEW (Circle one)		<u>To patron rd, 10 North, 1/2 west, east into</u>			<u>Finney</u>	<u>K2</u>	

CONTRACTOR Powhite  
TYPE OF JOB SQUEEZE  
HOLE SIZE \_\_\_\_\_ T.D. \_\_\_\_\_  
CASING SIZE 5 1/2 DEPTH 174  
TUBING SIZE 2 3/8 DEPTH 4600  
DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_  
TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_  
PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_  
MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_  
CEMENT LEFT IN CSG. \_\_\_\_\_  
PERFS. \_\_\_\_\_  
DISPLACEMENT 26.5

OWNER \_\_\_\_\_  
CEMENT  
AMOUNT ORDERED 50 sk class H Premium  
2 gal, 67 Gyp seal, 107 Sodium chloride  
100 sk Class H Premium 17cc  
COMMON \_\_\_\_\_ @ \_\_\_\_\_  
POZMIX \_\_\_\_\_ @ \_\_\_\_\_  
GEL Bentonite 97 # @ 1.05 98.70  
CHLORIDE \_\_\_\_\_ @ \_\_\_\_\_  
ASC \_\_\_\_\_ @ \_\_\_\_\_  
Class H Premium 150sk @ 25.28 3,792.00  
Gyp seal 280 # @ .88 248.16  
Salt 238 # @ .68 161.84  
Calcium chloride 94 # @ 1.10 103.40  
HANDLING \_\_\_\_\_ @ \_\_\_\_\_  
MILEAGE \_\_\_\_\_ @ \_\_\_\_\_

EQUIPMENT

PUMP TRUCK CEMENTER Aldo Espinoza  
# 903-501 HELPER Ricardo Estrada  
BULK TRUCK  
# 774-744 DRIVER Sahid Henderson  
BULK TRUCK  
# \_\_\_\_\_ DRIVER \_\_\_\_\_

REMARKS:

TOTAL 4,404.10

SERVICE

DEPTH OF JOB \_\_\_\_\_  
PUMP TRUCK CHARGE 2,765.75  
EXTRA FOOTAGE LVM 50m @ 4.40 220.00  
MILEAGE HVM 50m @ 7.70 385.00  
MANIFOLD \_\_\_\_\_ @ \_\_\_\_\_  
Handling 163.88 FT3 @ 2.48 406.88  
Drayage 370.19 T-m @ 2.75 1,018.01

TOTAL 4,795.04

CHARGE TO: Merit Energy Company  
STREET P.O. Box 1293/1100 W 2nd st  
CITY Liberal STATE K2 ZIP 67801

PLUG & FLOAT EQUIPMENT

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

TOTAL 0

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

TOTAL CHARGES 9,199.14

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

NET = 5,243.51

To: Allied Oil & Gas Services, LLC.  
You are hereby requested to rent cementing equipment and furnish cement 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 Marlin Aragon

SIGNATURE Marlin Aragon