Kansas Corporation Commission Confidentiality Requested: OIL & GAS CONSERVATION DIVISION Yes No

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

WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License #	API No. 15
Name:	Spot Description:
Address 1:	SecTwpS. R
Address 2:	Feet from North / South Line of Section
City:	Feet from _ East / _ West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	□NE □NW □SE □SW
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	(e.g. xx.xxxxx) (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:
Oil	Elevation: Ground: Kelly Bushing:
OG GSW Temp. Abd.	Total Vertical Depth: Plug Back Total Depth:
CM (Coal Bed Methane)	Amount of Surface Pipe Set and Cemented at: Feet
Cathodic Other (Core, Expl., etc.):	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)
Demois #	Chloride content: ppm Fluid volume: bbls
Commingled Permit #:	Dewatering method used:
SWD Permit #:	Location of fluid disposal if hauled offsite:
ENHR Permit #:	Location of fluid disposal if fladied offsite.
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	Quarter Sec TwpS. R
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 Approved by: Date:



1248499 CORRECTION #1

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.							
		tain Geophysical Data a r newer AND an image f		gs must be ema	iled to kcc-well-lo	gs@kcc.ks.gov	v. Digital electronic log
Drill Stem Tests Taker (Attach Additional S		Yes No			on (Top), Depth an		Sample
Samples Sent to Geo	logical Survey	☐ Yes ☐ No	Nam	9		Тор	Datum
Cores Taken Electric Log Run		Yes No					
List All E. Logs Run:							
		0.0000					
		CASING Report all strings set-o	RECORD Ne onductor, surface, inte		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
Durmaga	Depth		CEMENTING / SQU	EEZE RECORD			
Purpose: Perforate	Top Bottom	Type of Cement	# Sacks Used		Type and P	ercent Additives	
Protect Casing Plug Back TD							
Plug Off Zone							
Did you perform a hydrou	ulia fracturing tractment or	a this well?		Yes	No (If No, ski	n quantiana 2 an	(d 2)
	ulic fracturing treatment or otal base fluid of the hydra	aulic fracturing treatment ex	ceed 350,000 gallons?	= =	= ' '	p questions 2 an p question 3)	u 3)
Was the hydraulic fractur	ring treatment information	submitted to the chemical o	disclosure registry?	Yes	No (If No, fill	out Page Three	of the ACO-1)
Shots Per Foot PERFORATION RECORD - Bridge Plugs Set/Type Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) Depth							
	Specify Fo	ootage of Each Interval Perf	orated	(Ai	mount and Kind of Ma	terial Used)	Depth
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:	Yes No		l
Date of First, Resumed	Production, SWD or ENH	R. Producing Meth		Gas Lift C	Other <i>(Explain)</i>		
Estimated Production Per 24 Hours	Oil B		Mcf Wate			as-Oil Ratio	Gravity
DISPOSITIO	ON OF GAS:		METHOD OF COMPLE	TION:		PRODUCTIO	DN INTERVAL:
Vented Sold		Open Hole	Perf. Dually	Comp. Cor	mmingled	1110000110	TO THE LANGE.
	bmit ACO-18.)	Other (Specify)	(Submit A	ACO-5) (Sub	mit ACO-4)		

Form	ACO1 - Well Completion
Operator	Black Tea Oil, LLC
Well Name	Free B 1
Doc ID	1248499

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight		Type Of Cement		Type and Percent Additives
Surface	12.25	8.625	15.5	265	common	230	
Production	8.625	5.5	23	4609	common	180	

Black Tea Oil

Free B1

RTD @ 4610

LTD @ 4573

5 ½ Casing set @ 4609' 180 sks

Surface

Port Collar 2365' 500 sks 1 inch 170 sks

Perfs

Morrow 4493-4516

Johnson 4464-70

Pawnee 4408-28

Came back and squeezed perfs off with 150 sks

Summary of Changes

Lease Name and Number: Free B 1 API/Permit #: 15-109-20808-00-01

Doc ID: 1248499

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	10/23/2014	04/14/2015
CasingNumbSacksUse dPDF_1		230
CasingNumbSacksUse dPDF_2		180
CasingPurposeOfString PDF_1		Surface
CasingPurposeOfString PDF_2		Production
CasingSettingDepthPD F_1		265
CasingSettingDepthPD F_2		4609
CasingSizeCasingSetP DF_1		8.625
CasingSizeCasingSetP DF_2		5.5

Summary of changes for correction 1 continued

Field Name	Previous Value	New Value
CasingSizeHoleDrilledP DF_1		12.25
CasingSizeHoleDrilledP DF_2		8.625
CasingTypeOfCementP DF_1		common
CasingTypeOfCementP DF_2		common
CasingWeightPDF_1		15.5
CasingWeightPDF_2		23
If Alternate II Completion - Cement		2365
Circulated From If Alternate II Completion - Cement		0
Circulated To If Alternate II Completion - Sacks of		670
Cement Multiple Stage Cementing Collar Depth	2100	2365
Plug Back Total Depth	5000	4573
Save Link	//kcc/detail/operatorE ditDetail.cfm?docID=12 28752	//kcc/detail/operatorE ditDetail.cfm?docID=12 48499
TopsDatum1	-1307	-1298

Summary of changes for correction 1 continued

Field Name	Previous Value	New Value
Total Depth	5000	4610

Summary of Attachments

Lease Name and Number: Free B 1

API: 15-109-20808-00-01

Doc ID: 1248499

Correction Number: 1

Attachment Name



Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

1228752

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:	SecTwpS. R
Address 2:	Feet from North / South Line of Section
City:	Feet from _ East / _ West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	□NE □NW □SE □SW
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	(e.g. xx.xxxxx) (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:
Oil	Elevation: Ground: Kelly Bushing:
OG GSW Temp. Abd.	Total Vertical Depth: Plug Back Total Depth:
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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)
Demois #	Chloride content: ppm Fluid volume: bbls
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GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	Quarter Sec TwpS. R
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 Approved by: Date:			

KOLAR Document ID: 1228752

Page Two

Operator Name: _				Lease Name:			Well #:	
Sec Twp.	S. R.	E	ast West	County:				
	flowing and shu	ut-in pressures, v	vhether shut-in pre	ssure reached st	atic level, hydrosta	tic pressures, bot		val tested, time tool erature, fluid recovery,
Final Radioactivity files must be subm						iled to kcc-well-lo	gs@kcc.ks.gov	v. Digital electronic log
Drill Stem Tests Ta			Yes No			on (Top), Depth ar		Sample
Samples Sent to 0	Geological Surv	/ey	Yes No	Na	me		Тор	Datum
Cores Taken Electric Log Run Geologist Report / List All E. Logs Ru	_		Yes No Yes No Yes No					
		B	CASING eport all strings set-c		New Used	ion, etc.		
Purpose of Strir		Hole illed	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
			ADDITIONAL	CEMENTING / SO	UEEZE RECORD			
Purpose:		epth T Bottom	ype of Cement	# Sacks Used		Type and F	Percent Additives	
Perforate Protect Casi Plug Back T								
Plug Off Zor								
Did you perform a Does the volume Was the hydraulic	of the total base f	fluid of the hydrauli		_	=	No (If No, sk	ip questions 2 an ip question 3) out Page Three	,
Date of first Product Injection:	tion/Injection or R	esumed Production	Producing Meth	nod:	Gas Lift 0	Other (Explain)		
Estimated Production Per 24 Hours	on	Oil Bbls.					Gas-Oil Ratio	Gravity
DISPOS	SITION OF GAS:		N	METHOD OF COMP	LETION:			DN INTERVAL: Bottom
	Sold Used	I on Lease	Open Hole			mmingled mit ACO-4)	Тор	BOROTT
,	,			B.11 B1				
Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid,	Fracture, Shot, Cer (Amount and Kind	menting Squeeze I of Material Used)	Record
TUBING RECORD:	: Size:	Set	Δ+-	Packer At:				
TODING RECORD:	. 3126.		n.	i donei Al.				

Form	ACO1 - Well Completion
Operator	Black Tea Oil, LLC
Well Name	Free B 1
Doc ID	1228752

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	_	Type Of Cement	Type and Percent Additives



et	The same	BHI APPROVED	×		ED AGENT	CUSTOMER AUTHORIZED AGENT		TIONS	E LAST PAGE FOR GENER TERMS AND CONDITIONS	PAG	SEE LAST PAGE FOR GENERAL TERMS AND CONDITIONS
	DAGENT	CUSTOMER AUTHORIZED AGENT	×	T AND SIGN T	TY TO ACCEP	REPRESENT THAT I HAVE AUTHORITY TO ACCEPT AND SIGN THIS ORDER.			Gerald	P. Ge	CUSTOMER REP
RVICES	AND ALL SE	SERVICE RECEIPT: I CERTIFY THAT THE MATERIALS AND SERVICES LISTED WERE RECEIVED AND ALL SERVICES PERFORMED IN A WORKMANLIKE MANNER.		PER SERVICE	T PAGE OF THE	SERVICE ORDER: I AUTHORIZE WORK TO BEGIN PER SERVICE INSTRUCTIONS IN ACCORDANCE WITH THE TERMS AND CONDITIONS DRINTED ON THE LAST DAGE OF THIS FORM AND	17:26 INSTRU	YEAR 2014 1	DAY 12	Mo.	ARRIVE LOCATION:
C. 7.70	3	1,717.70									
662.45 872.45	38 32%	1,204.45	5.450	221	cu ft	e SUR-TOTAL FOR Service Charges	Bulk Materials Blending Charge	erials Bler	Bulk Mat		M100
210.00	0%	210.00	210.000	_	Ф 20	it Svc	Personnel Per Diem Chrg - Cement Svo	el Per Dier	Personne		A152
7,823.32	45.00%	14,224.19			al	SUB-TOTAL FOR Product Material	SU				
766.70	45%	1,394.00	16.400	85	sack		Poz	Lafarge Red Rock Poz	Lafarge F	_	L425411-00
3,058.00	45%	5,560.00	278.000	20	bbls		SealBond Spacer, w/ 45 lb bag	d Spacer,	SealBon		L398463-00
404.25	45%	735.00	147.000	5	gals			, tote	ClayCare, tote	_	499702
467.50	45%	850.00	1.250	680	lbs			Kol-Seal, 50 lb bag	Kol-Seal,	_	499634
888.94	45%	1,616.25	21.550	75	lbs				FL-62	-	488073
73.50	45%	133.64	0.520	257	lbs			Chloride	Sodium Chloride		100404
120.62	45%	219.30	5.100	43	lbs			ke	Cello Flake	_	100295
169.13	45%	307.50	4.100	75	lbs		Ö	Sodium Metasilicate	Sodium I		100275
1,874.68	45%	3,408.50	40.100	85	sacks			Cement	Class H Cement	_	100022
NET	% DISC.	GROSS AMOUNT	LIST PRICE UNIT	QUANTITY	UNIT OF MEASURE	ION	DESCRIPTION				PRODUCT CODE
		String	JOB TYPE CODE: Long String	STATE .	Z. S	COUNTY/PARISH Logan	RIPTION	LEGAL DESCRIPTION 22-13S-34W	LEG		WELL LOCATION:
		OB:	GAS USED ON JOB: No Gas		TD WELL DEPTH(ft)	TD W			UMBER	AND N	WELL NAME AND NUMBER FREE B #1
1			WELL CLASS:	4,500	JOB DEPTH(ft)	JOB				ž	PP, PERRYTON
		/ell	WELL TYPE : New Well		WELL API NO: 15109208080001		BHI REPRESENTATIVE Lucas Kelly	YEAR E	DAY 13	MO.	DATE WORK COMPLETED
		ZIP CODE 67601	STATE Kansas	S Y	HAYS	VARD, SUITE B	STREET OR BOX NUMBER 1011 CENTENNIAL BOULEVARD, SUITE	11 CENTE	STRE 10		MAIL INVOICE TO
INVOICE NUMBER	INVOICE	CUSTOMER NUMBER 0040140007 - 0040140007	0040140	PURCHASE ORDER NO.		CREDIT APPROVAL NO.	С	BLACK TEA OIL LLC	LACK TE	В	CUSTOMER



SEE LAST PAGE FOR GENERAL TERMS AND CONDITIONS	CUSTOMER REP.	ARRIVE LOCATION:		J401	J553	J390	J225	J050	F090	PRODUCT	WELL LOCATION:	WELL NAME AND NUMBER FREE B #1	DISTRICT PP, PERRYTON	DATE WORK COMPLETED	MAIL INVOICE TO	CUSTOMER
AND C	Gerald	MO.		Bu	Ci M	<u> </u>	Da	Ce	Fu)		AD NUN		MO.		BLA
FOR G	ald.	DAY 12		lk Deliv	culating	eage, h	ta Acqu	Cement Head	ment P	;	LEGA 27	MBER		DAY 13	STREE 101	CK TE
FIONS		YEAR 2014		Bulk Delivery, Dry Products SUB	Circulating Equipment	Mileage, Heavy Vehicle	isition,	ead	Cement Pumping, 4001 - 5000 Fuel per pump charge - cement		LEGAL DESCRIPTION 22-13S-34W			YEAR 2014	STREET OR BOX NUMBER 1011 CENTENNIAL BO	BLACK TEA OIL LLC
AL		TIME 17:26		/ Produ	ment	ehicle	Cemen		arge - c	D	RIPTION 4W			BHI REPRE	ENNIA	5
CUSTOMER AUTHORIZED AGENT	REPRESENT THAT I HAVE AUTHORITY TO ACCEPT AND SIGN THIS ORDER.	SERVICE ORDER: I AUTHORIZE WORK TO BEGIN PER SERVICE INSTRUCTIONS IN ACCORDANCE WITH THE TERMS AND	FIELD ESTIMATE	ducts SUB-TOTAL FOR Freight/Delivery Charges	Circulating Equipment SUB-TOTAL FOR Equipment	Tooting Van	Data Acquisition, Cement, Standard		Cement Pumping, 4001 - 5000 ft Fuel per pump charge - cement	DESCRIPTION	COUNTY/PARISH Logan			BHI REPRESENTATIVE Lucas Kelly	REET OR BOX NUMBER 1011 CENTENNIAL BOULEVARD, SUITE B	CREDIT APPROVAL NO.
ORIZE	THORIT	ZE WOR	TIMATE	Charges	quipmen						HSISH	TD WE	JOB D	WELL.		AL NO.
AGENT	RITY TO ACCEPT AN	TH THE TERN		ton-mi	job	miles	job	job	pump/hr	MEASURE		TD WELL DEPTH(ft)	JOB DEPTH(ft)	WELL API NO: 15109208080001	CITY	PURCHAS
	T AND SIGN T	PER SERVICE		1036		440	_	_	6 -	QUANTITY	STATE Kansas		4,500		S	PURCHASE ORDER NO.
×	×			3.940	2,38	11.850	2,130.000	~	70.250	PRICE UNIT	JOB TYPE CODE : Long Str	GAS USED ON JOB : No Gas	WELL CLASS :	WELL TYPE : New Well	STATE Kansas	004014
BHI APPROVED	CUSTOMER AUTHORIZED AGENT	SERVICE RECEIPT: I CERTIFY THAT THE MATERIALS AND SERVICES LISTED WERE RECEIVED AND ALL SERVICES PERFORMED IN A WORKMANLIKE MANNER.	43,041.98	4,081.84 4,081.84	2,380.00	5,214.00	2,130.00	830.00	421.50	GROSS AMOUNT	CODE : Long String	JOB:		Vell	ZIP CODE 67601	0040140007 - 0040140007
R	ED AGEN	AT THE MA ED AND ALI MANNER.	44.34%	45% 45.00%	45%	45%	45%	45%	45%	% DISC.						
H	П	L SERVICES	23,957.28	6 2,245.01 6 2,245.01		2,867.70	6 1,171.50	456.50	3,547.50	AM			15			INVOICE NUMBER

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September 1	b	
ndle		
C		The same
9	T	1
I	~	1
ш		400
S		

BHI APPROVED	××	ORITHO ACCESS AND SIGN I HIS	HAVE AUTHORATOTO ACCEPT AND SIGN THIS ORDER	SEE LAST PAGE FOR GENERAL	SEE LAST P
SERVICE RECEIPT: I CERTIFY THAT THE MATERIALS AND SERVICES LISTED WERE RECEIVED AND ALL SERVICES PERFORMED IN A WORKMANLIKE MANNER. CUSTOMER AUTHORIZED AGENT		DANCE WITH THE TE	SERVICE ORDER: I AUTHORIZE WORK TO BEGIN PER SERVICE INSTRUCTIONS IN ACCORDANCE WITH THE TERMS AND CONDITIONS PRINTED ON THE LAST PAGE OF THIS FORM AND REPRESENT THAT I	MO. DAY YEAR TIME 09 12 2014 17:26	1 1
		vice Charges	SUB-TOTAL FOR Service Charges		
	122	cuft		Bulk Materials Blending Charge	M100
	2 _	e a	J - Cement Svo	Personnel Per Diem Chrg - Cement Svo	A152
			SUB-TOTAL FOR Product Material	ClayCare, pulk	L488515-00 ¬
	σı \	gals		Laid Se Med Mook of	L425411-00
	- 85	sack	3	Lafarrae Red Rock Poz	L398463-00
	20	bbls	n had	Kol-Seal, So in pay	499634
Lancas	-680	lbs id		FL-62	488073
	77.	F 108		Sodium Chloride	100404
	577	l DS		Cello Flake	100295
	3 3	lbs		Sodium Metasilicate	100275
	185	sacks		Class H Cement	100022
PRICE UNIT	QUANTITY	MEASURE	DESCRIPTION	ם	PRODUCT CODE
Long String	Kansas			Sec 22-13S-34W	LOCATION:
JOB TYPE CODE :	STATE JOB	ARISH	COLNTY/PARISH	NOT DESCRIPTION	Free B #1
No Gas		TD WELL DEPTH (ft)		NUMBER	WELL NAME AND NUMBER
Gas	4,500				PP, PERRYTON
LASS:	WELL CLASS:	JOB DEPTH (ft)			
New Well	80001 WELL TYPE :	WELL API NO: 15109208080001	BHI REPRESENTATIVE Lucas Kelly	DAY YEAR 12 2014	DATE WORK MO.
Kansas			1011 CENTENNIAL BOULEVARD, SUITE B	1011 CENTENNIAL	INVOICE TO:
STATE	CITY	CI	SER	STREET OF BOX NUMBER	
0040140007 - 0040140007				DI ACK TEA OIL IIC	



SEE LAST PAGE FOR GENERAL TERMS AND CONDITIONS	CUSTOMER REP.	ARRIVE MO. LOCATION: 09		J401	3827	J390 N		J050 C	F090 F	F061A C	PRODUCT CODE	LOCATION:	Free B #1	WELL NAME AND NUMBER	PP, PERRYTON	COMPLETE	DATE WORK MO.	INVOICE TO:		BL
E LAST PAGE FOR GENER TERMS AND CONDITIONS	Gerald	DAY YEAR 12 2014		Bulk Delivery, Dry Products SU	Circulating Equipment	Mileage, Auto, Pick-Up	ata Acquisition, C	Cement Head	Fuel per pump charge - cement	Cement Pumping,		Sec 22-13S-34W	NOT DESCRIPTION	MBER		12 2014	YEAR	1011 CENT	STREET OR BOX NUMBER	BLACK TEA OIL LLC
AL		17:26 INSTRUCTION PRINTED ON		Products SUB-TOTAL F	nent s	Mileage, Auto, Pick-Up or Treating Van	Data Acquisition, Cement, Standard		arge - cement	4001 - 5000 ft	DESCRIPTION	-34W	NOTala			Lucas Nelly	BHI REPRESENTATIVE	1011 CENTENNIAL BOULEVARD,	OY NUMBER	C
CUSTOMER AUTHORIZED AGENT	HAVE AUTHORITY TO ACCEPT AND SIGNTHIS ORDER	SERVICE ORDER: I AUTHORIZE WORK TO BEGIN PER SERVICE INSTRUCTIONS IN ACCORDANCE WITH THE TERMS AND CONDITIONS PRINTED ON THE LAST PAGE OF THIS FORM AND REFRESENT THAT I	FIELD ESTIMATE	cts SUB-TOTAL FOR Freight/Delivery Charges	SUB-TOTAL FOR Equipment							Logan	COUNTY/PARISH	TD	5	5		D, SUITE B		
ZED AGENT	ND SIGN THIS OF	VORK TO BEGIN WITH THE TERN THIS FORM AND	NATE	ton-mi	job	miles	job	job	pump/hr	6hrs	UNIT OF MEASURE			TD WELL DEPTH (ft)	SOB DET IN (II)	NEDTH (#)	WELL API NO: 15109208080001	HAYS	CITY	
	(DER.	N PER SERVICE RMS AND CONDIT ID REPRESENT T		1036	_	880	440	_	· თ	_	QUANTITY		STATE JO		4,500			S/S	Y	
×	×										LIST PRICE UNIT		JOB TYPE CODE :	GAS USED ON JOB :	Gas	WELL CLASS.	WELL TYPE: New Well	Kansas	STATE	0040140
and I	BHI APPROVED	SERVICE RECEIPT. I CERTIFY THAT THE MATERIALS AND SERVICES LISTED WERE RECEIVED AND ALL SERVICES PERFORMED IN A WORKMANLIKE MANNER.									GROSS AMOUNT	tring		» В:			<u> </u>	67601	ZIP CODE	0040140007 - 0040140007
L	PAGENI	ED AND ALL SE									% DISC.				1			1		
1		RVICES	23,957.28	2,245.01 2,245.01	1,309.00 13,016.50	3,242.80	2 867 70	456.50	421.50	3,547.50	AMOUNT									

d Printed on September 12, 2014 11:15 PM

Operator Name: BLACK TEA OIL LLC

Well Name:

Free B #1

Job Description: 5-1/2" x 7-7/8 OH - 4500' MD

Date:

September 5, 2014



Job ID: 10011096986

Estimate No: 1000776755

JOB SUMMARY/SERVICE ORDER

Depth (TVD) Depth (MD) Hole Size

Casing Size

5 1/2 in, 15.5 lbs/ft

Pump Via

5 1/2" O.D. (4.950" .I.D) 15.5 #

Total Mix Water

248 gals

4,500 ft 4,500 ft

7.875 in

Spacer

Sealbond Density

20 bbls 8.4 ppg

Cement Slurry

Arkoma Lite w/ Adds Density Yield

41 bbls 14.3 ppg

1.36 cf/sack

Displacement

Estimated Price

Displacement Fluid Density

106 bbls 9.0 ppg

\$25,483.10

Summary of Changes Agreed to on Location (to be initialed by Customer):

TERMS: IN THE ABSENCE OF A MASTER SERVICE AGREEMENT BETWEEN BAKER HUGHES AND CUSTOMER, THE BAKER HUGHES WORLDWIDE TERMS AND CONDITIONS ATTACHED HERETO SHALL GOVERN THE PRODUCTS AND SERVICES PROVIDED HEREUNDER. THE TERMS AND CONDITIONS CONTAIN INDEMNITIES, WAIVERS OF WARRANTIES AND LIMITATIONS ON REMEDIES AND SHOULD BE CAREFULLY REVIEWED BY CUSTOMER.

SERVICE ORDER: I authorize work to begin as described above and in accordance with the attached Baker Hughes Worldwide Terms and Conditions. I represent that I have authority to accept and sign this Service Order:

Customer Authorized Representative

Date: 9-12-14