CORRECTION #3

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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 🔲 East 🗌 West |
| 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) Datum: NAD27 NAD83 WGS84 |
| Wellsite Geologist: | |
| Purchaser: | County: |
| Designate Type of Completion: | Lease Name: Well #: |
| ☐ New Well ☐ Re-Entry ☐ Workover | Field Name: |
| ☐ Oil ☐ WSW ☐ SWD ☐ SIOW | Producing Formation: |
| Gas D&A ENHR SIGW | 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? Yes No |
| 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) |
| 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 | QuarterSecTwpS. R East West |
| Recompletion Date Recompletion Date | Countv: 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

Confidentiality Requested:

Yes No

| 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 #: _ 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). No **Drill Stem Tests Taken** Yes Loa Formation (Top), Depth and Datum Sample (Attach Additional Sheets) Name Top Datum No Samples Sent to Geological Survey Yes No J Yes Cores Taken No Electric Log Run ___ Yes List All E. Logs Run: CASING RECORD New Used Report all strings set-conductor, surface, intermediate, production, etc. Size Hole Size Casing Weight Setting Type of # Sacks Type and Percent Purpose of String Drilled Set (In O.D.) Lbs. / Ft. Depth Cement Used Additives ADDITIONAL CEMENTING / SQUEEZE RECORD Purpose: Depth Type of Cement # Sacks Used Type and Percent Additives Top Bottom Perforate **Protect Casing** Plug Back TD Plug Off Zone Did you perform a hydraulic fracturing treatment on this well? Yes No (If No, skip questions 2 and 3) Yes Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? No (If No, skip question 3) Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? (If No, fill out Page Three of the ACO-1) Yes PERFORATION RECORD - Bridge Plugs Set/Type Acid, Fracture, Shot, Cement Squeeze Record Shots Per Foot Specify Footage of Each Interval Perforated Depth (Amount and Kind of Material Used) TUBING RECORD: Size: Set At: Packer At: Liner Run: Yes No Date of First, Resumed Production, SWD or ENHR. Producing Method: Gas Lift Flowing Pumping Other (Explain) **Estimated Production** Bbls. Oil Bbls Gas Mcf Water Gas-Oil Ratio Gravity Per 24 Hours METHOD OF COMPLETION: **DISPOSITION OF GAS:** PRODUCTION INTERVAL: Open Hole Perf. Dually Comp. Commingled Sold Used on Lease (Submit ACO-5) (Submit ACO-4) (If vented, Submit ACO-18.) Other (Specify)

| Form | ACO1 - Well Completion | | |
|-----------|------------------------|--|--|
| Operator | Tailwater, Inc. | | |
| Well Name | North Kempnich 7-IWU | | |
| Doc ID | 1309137 | | |

Casing

| Purpose Of String | Size Hole Drilled | Size Casing Set | Weight | Setting Depth | Type Of Cement | | Type and Percent Additives |
|----------------------|----------------------|-----------------------|--------|------------------|-------------------|----|----------------------------|
| Surface | 9.8750 | 7 | 17 | 22 | Portland | 5 | POZ |
| Production | 5.6520 | 2.8750 | 6.45 | 641 | Portland | 95 | 50/50 POZ |
| | | | | | | | |
| | | | | | | | |

Summary of Changes

Lease Name and Number: North Kempnich 7-IWU

API/Permit #: 15-003-26231-00-00

Doc ID: 1309137

Correction Number: 3

Approved By: Karen Ritter

| Field Name | Previous Value | New Value |
|---------------|--|--|
| Approved Date | 04/20/2016 | 06/14/2016 |
| Save Link | //kcc/detail/operatorE ditDetail.cfm?docID=13 | //kcc/detail/operatorE ditDetail.cfm?docID=13 |
| Tubing Set At | 04551 641 | 09137 |
| Tubing Size | 2.8750 | |

CORRECTION #2

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

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 \(\sum \) North / \(\sum \) South Line of Section |
| City: State: Zip:+ | 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: |
| □ Oil □ WSW □ SWD □ SIOW | Producing Formation: |
| Gas D&A ENHR SIGW | 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: 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 Downit # | Chloride content: ppm Fluid volume: bbls |
| Commingled Permit #: Dual Completion Permit #: | Dewatering method used: |
| SWD Permit #: | Location of fluid disposal if hauled offsite: |
| ENHR Permit #: | Ecodion of hald disposal in hadiod offsite. |
| GSW Permit #: | Operator Name: |
| | Lease Name: License #: |
| Spud Date or Date Reached TD Completion Date or | Quarter Sec. Twp. S. 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: | | | | |

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

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 East |
| 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: () | □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: |
| □ Oil □ WSW □ SWD □ SIOW | Producing Formation: |
| Gas D&A ENHR SIGW | 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: 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 Downit # | Chloride content: ppm Fluid volume: bbls |
| Commingled Permit #: Dual Completion Permit #: | Dewatering method used: |
| SWD Permit #: | Location of fluid disposal if hauled offsite: |
| ENHR Permit #: | Ecodion of haid disposal in hadiod offsite. |
| GSW Permit #: | Operator Name: |
| | Lease Name: License #: |
| Spud Date or Date Reached TD Completion Date or | Quarter Sec. Twp. S. 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: | | | | |



Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

1230485

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 East _ West |
| 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.xxxxxx) |
| 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 □ WSW □ SWD □ SIOW □ Gas □ D&A □ ENHR □ SIGW | Elevation: Ground: Kelly Bushing: |
| GSW Sigw Sigw 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? Yes No |
| 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 |
| Spud Date or Date Reached TD Completion Date or 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: 1230485

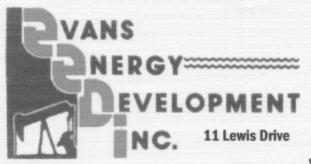
Page Two

| 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 | Estimated Production Oil Bbls. Gas Mcf Water Bbls. Gas-Oil Ratio 0 | | | | 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. | Set | n. | i donei Al. | | | | |

| Form | ACO1 - Well Completion |
|-----------|------------------------|
| Operator | Tailwater, Inc. |
| Well Name | North Kempnich 7-IWU |
| Doc ID | 1230485 |

Casing

| Purpose Of String | Size Hole Drilled | Size Casing Set | Weight | Setting Depth | Type Of Cement | | Type and Percent Additives |
|----------------------|----------------------|-----------------------|--------|------------------|-------------------|----|----------------------------------|
| Surface | 9.8750 | 7 | 17 | 22 | Portland | 5 | |
| Completio n | 5.6520 | 2.8750 | 6.45 | 641 | Portland | 95 | 50/50 POZ |
| | | | | | | | |
| | | | | | | | |



Oil & Gas Well Drilling Water Wells Geo-Loop Installation

> Phone: 913-557-9083 Fax: 913-557-9084

WELL LOG

Paola, KS 66071

Tailwater, Inc. North Kempnich # 7-IWU API #15-003-26,231

September 5 - September 8, 2014

| Thickness of Strata | Formation | Total |
|---------------------|---------------|------------------------------|
| 11 | soil & clay | 11 |
| 4 | clay & gravel | 15 |
| 78 | shale | 93 |
| 19 | lime | 112 |
| 75 | shale | 187 |
| 33 | lime | 220 |
| 5 | shale | 225 |
| 26 | lime | 251 |
| 3 | shale | 254 |
| 14 | lime | 268 base of the Kansas City |
| 174 | shale | 442 |
| 24 | lime | 466 |
| 20 | shale | 486 |
| 1 | coal | 487 |
| 2 | shale | 489 |
| 2 | broken sand | 491 green & grey ok bleeding |
| 13 | oil sand | 504 green, ok bleeding |
| 7 | shale | 511 |
| 1 | coal | 512 |
| 5 | shale | 517 |
| 3 | lime | 520 |
| 19 | shale | 539 |
| 4 | lime | 543 |
| 22 | shale | 565 |
| 13 | lime | 578 |
| 41 | shale | 619 |
| 4 | limey sand | 623 green & white, no oil |
| 4 | broken sand | 627 brown & grey ok bleeding |
| 18 | shale | 645 TD |

Drilled a 9 7/8" hole to 21.6' Drilled a 5 5/8" hole to 645'

Set 21.6' of 7" surface casing threaded and coupled cemented with 5 sacks of cement.

Set 640.5' of 2 7/8" 8 round upset tubing with 3 centralizers, 1 float shoe and 1 clamp.

3613A Y Road Madison, KS 66860 Ph: 620-437-2661 Fax: 620-437-2881

FED ID# 48-1214033 **HURRICANE SERVICES INC**

104 Prairie Plaza Parkway Garnett, KS 66032 Ph: 785-448-3100 Fax: 785-448-3102

ANDERSON

MC ID# 165290

Remit to: Hurricane Services, Inc. 250 N. Water, Suite 200 Wichita, KS 67202

Customer:

MARTIN OIL PROPERTIES % CHRISTIAN MARTIN 6421 AVONDALE DR., STE 212 OKLAHOMA CITY, OK 73116-6428

Invoice Date: 9/9/2014 Invoice #: 0014672 Lease Name: N KEMPNICH Well #: 7-IWV

County:

| Date/Description | HRS/QTY | Rate | Total | |
|-------------------------------|-----------|----------|------------|--|
| See ticket 50386 of JB | 1.000 | 675.000 | 675.00 | |
| Cement Pozmix 50/50 | 95.000 | 11.300 | 1,073.50 T | |
| Gel 2% | 190.000 | 0.300 | 57.00 T | |
| Gel flush | 200.000 | 0.300 | 60.00 T | |
| Flocele | 24.000 | 2.150 | 51.60 T | |
| City water | 4,600.000 | 0.013 | 59.80 | |
| Vac truck #108 | 1.000 | 84.000 | 84.00 | |
| Vac truck #111 | 1.000 | 84.000 | 84.00 | |
| Bulk truck #242 | 1.000 | 150.000 | 150.00 | |
| Top rubber plug 2 7/8" | 1.000 | 25.000 | 25.00 T | |
| 10% Discount per Kevin Miller | 1.000 | 231.990- | 231.99- | |

| Net Invoice | 2,087.91 |
|--------------------|----------|
| Sales Tax: (7.65%) | 96.94 |
| Total | 2,184.85 |

All invoices are due upon receipt. Interest at the rate of 1 1/2% per month may be charged on all invoices not paid within 30 days from date of invoice.

WE APPRECIATE YOUR BUSINESS!

Hurricane Services, Inc. 104 Prairie Plaza Parkway Garnett, KS 66032 Office # 785-448-3100 Toll Free # 855-718-8027



| Ticket | No | 50386 | |
|----------|-------|----------|--|
| Location | | | |
| Foreman | Joe B | lauchard | |

Cement Service ticket

| Date | Customer # | Well Name & Number | | Sec./Township/Range | | County |
|----------|----------------|--------------------|-------|---------------------|-------|----------|
| 9-9-14 | | N. Kempuich | 7-IWU | | | Anderson |
| Customer | | Mailing Address | | City | State | Zip |
| Martin | Dil Proporties | | | | | |

| Job Type: | | | Truck # | Driver |
|--|---|--|---------------|--------------|
| Lougstring | Casina TO 640.5 | | 26 | Jõe |
| Hole Size: 5 5/8 | Casing TO 640.5 Casing Size: 27/8 | Displacement: 3.7 | 230 | Alex |
| Hole Depth: 645 | Casing Weight: | Displacement PSI: 400 | 242 | AMOS/TROY |
| Bridge Plug: | Tubing: | Cement Left in Casing: o | 108 | Jeff / Jesse |
| Packer: | PBTD: | | 111 | Tyler |
| Quantity Or Units | Description of S | l Servoies or Product | Pump charge | 675.22 |
| | THE RESERVE AND ADDRESS OF THE PARTY OF THE | AND THE RESIDENCE AND THE PARTY OF THE PARTY | \$3.25/Mile | - |
| <u>o mi</u> | Mileage Pump truck Pick up # | - 430 | | NC |
| 0 MI | Pick up # | do | 1.50 | Ne |
| 0.0 | | | 1. 20 | 10-2 58 |
| 95 SK | | | 11.30 | 1073.50 |
| 190 LB | | | . 30 | 57.30 |
| 300 KB | Prem Gel Sweep | | . 30 | \$ 60.99 |
| 2 4 ኦ8 | Flo Seal | 2.15 | 51.60 | |
| ************************************** | | | | |
| 4600 Gal | Cornett water | | 1.3 | 59 80 |
| he | 80 vac #108 | | 84.50 | 84.90 |
| l hr | 80 yac # 111 | | 84.00 | 84.00 |
| | | | | |
| | | | | |
| 4.01 Tons | Bulk Truck Minimum | Charge # 242 | \$1.15/Mile | 150.00 |
| | Plugs Top Plug 2 | 7/8 | 25.20 | 25.ºº |
| | , 5 | #2,319.90 | Subtotal | 2,087.91 |
| | 10% discourt 231.99 Sales Tax 96.94 | | | 96.94 |
| | | The state of the s | Estimated Tot | al 2,184,85 |
| D | 1 12 | | 1 1. | |

| Remarks: Hook outo Casing Achieved circulation. Pumped 15 bbl Gel followed |
|---|
| Remarks: Hook outo Casing Achieved Circulation. Pumped 15 bbl Gel followed by 15 bbl water spacer of 95 oks 50/50 por coment. Flush pump. Pump wiper plug to bottom of set float shoe. |
| Pump wiper Ding to bottom of set front shoe. |
| |
| Coment to surface. |
| |
| |
| |
| |

(Rev. 1-2011)

Customer Signature