

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

Confidentiality Requested:

 Yes  No

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     SWGPS 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 DistributionALT  I  II  III Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

1249513

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: <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

<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> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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Black Tea Oil

Krebs Z1

RTD 4508

LTD 4464

PortCollar 2164 345 sks

Perfs

Morrow	4377-98	500 gal 15% INS	Retreat 1000 gal
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Johnson	4280-86	150 gal 15% INS	Retreat 1000 gal
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## Summary of Changes

Lease Name and Number: Krebs Z 1

API/Permit #: 15-109-21376-00-00

Doc ID: 1249513

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	12/22/2014	04/27/2015
CasingNumbSacksUsedPDF_2	230	250
CasingSettingDepthPDF_1	250	265
CasingSettingDepthPDF_2	4500	4494
CasingWeightPDF_1	16	23
CasingWeightPDF_2	20	15.5
If Alternate II Completion - Cement Circulated From	2100	2164
If Alternate II Completion - Sacks of Cement	450	345
Kelly Bushing Elevation	2732	2734

Summary of changes for correction 1 continued

Field Name	Previous Value	New Value
Method Of Completion - Commingled	No	Yes
Multiple Stage Cementing Collar Depth	2100	2164
Plug Back Total Depth	4500	4464
Producing Formation	Kansas City/Johnson	morrow/johnson
Save Link	../../../../kcc/detail/operatorEditDetail.cfm?docID=1235907	../../../../kcc/detail/operatorEditDetail.cfm?docID=1249513
TopsDatum1	-1307	-1643
TopsDatum2		-1546
TopsDepth1	4032	4377
TopsDepth2		4280
TopsName1	Kansas City	morrow
TopsName2		johnson
Total Depth	4500	4505

## Summary of Attachments

Lease Name and Number: Krebs Z 1

API: 15-109-21376-00-00

Doc ID: 1249513

Correction Number: 1

Attachment Name



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1235907  
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: \_\_\_\_\_
- 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 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) (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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# ALLIED OIL & GAS SERVICES, LLC 064770

Federal Tax I.D. # 20-8651475

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

SERVICE POINT:

Oakley

DATE <u>11-25-14</u>	SEC. <u>35</u>	TWP. <u>14</u>	RANGE <u>32</u>	CALLED OUT	ON LOCATION <u>9:00am</u>	JOB START <u>12:30pm</u>	JOB FINISH <u>1:00pm</u>
LEASE <u>Krebs 2</u>	WELL # <u>1</u>	LOCATION <u>Oakley 235 1/2 E. Sinto</u>			COUNTY <u>Logan</u>	STATE <u>KS</u>	

OLD OR (NEW) (Circle one)

CONTRACTOR Landmark 5

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 265'

CASING SIZE 8 3/8 DEPTH 205'

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. 15'

PERFS.

DISPLACEMENT 15.92 BBL

OWNER Same

CEMENT AMOUNT ORDERED 180 sks con 28cc 2 1/2 gal.

COMMON	<u>180 sks</u>	@ <u>17.90</u>	<u>3222.00</u>
POZMIX		@	
GEL	<u>338#</u>	@ <u>1.50</u>	<u>169.80</u>
CHLORIDE	<u>507#</u>	@ <u>1.10</u>	<u>557.70</u>
ASC		@	

**EQUIPMENT**

PUMP TRUCK # <u>431</u>	CEMENTER <u>Andrew Forslund</u>	HELPER <u>Brandon Wilkerson</u>
BULK TRUCK # <u>891</u>	DRIVER <u>Juan (TWS)</u>	
BULK TRUCK # _____	DRIVER _____	

Material Total @ _____	<u>3,945.70</u>
Handling 194.64/cft @ <u>2.45</u>	<u>482.20</u>
Mileage 2.25 TD @ <u>8.85/MI</u>	<u>23.21</u>
TOTAL	_____

**REMARKS:**

Cement did circulate.

Thank you

**SERVICE**

DEPTH OF JOB <u>265'</u>	
PUMP TRUCK CHARGE	<u>1512.25</u>
EXTRA FOOTAGE @ _____	
MILEAGE <u>25 miles</u> @ <u>7.70</u>	<u>192.50</u>
MANIFOLD <u>head</u> @ _____	<u>225.00</u>
<u>Light vehicle</u> @ <u>4.40</u>	<u>110.00</u>
TOTAL	_____

CHARGE TO: Black Tea

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

~~330~~ (330.00/10%) TOTAL 3,305.05

**PLUG & FLOAT EQUIPMENT**

_____	@ _____	
_____	@ _____	
_____	@ _____	
_____	@ _____	
_____	@ _____	
TOTAL		_____

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 7,253.75

DISCOUNT 725.37 (10%) IF PAID IN 30 DAYS

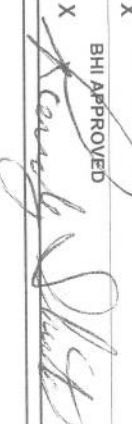
6,528.37 Net.

PRINTED NAME \_\_\_\_\_

SIGNATURE \_\_\_\_\_



FIELD RECEIPT NO. 10011121890

CUSTOMER		BLACK TEA OIL LLC		CREDIT APPROVAL NO.	PURCHASE ORDER NO.	CUSTOMER NUMBER	INVOICE NUMBER
MAIL INVOICE TO		STREET OR BOX NUMBER 1011 CENTENNIAL BOULEVARD, SUITE B		CITY	STATE	ZIP CODE	
DATE WORK COMPLETED		MO. 12	DAY 02	YEAR 2014	BHI REPRESENTATIVE Joshua M Apel	WELL API NO: 15109213760000	WELL TYPE: New Well
DISTRICT		PP, PERRYTON		JOB DEPTH(ft)	4,494	WELL CLASS: Oil	
WELL NAME AND NUMBER		KREBS Z #1		TD WELL DEPTH(ft)	4,505	GAS USED ON JOB: No Gas	
WELL LOCATION :		LEGAL DESCRIPTION	COUNTY/PARISH	STATE	JOB TYPE CODE :		
		3-15S-32W	Logan	Kansas	Long String		
PRODUCT CODE	DESCRIPTION	UNIT OF MEASURE	QUANTITY	LIST PRICE UNIT	GROSS AMOUNT	% DISC.	NET AMOUNT
100022	Class H Cement	sacks	140	40.100	5,614.00	45%	3,087.70
100275	Sodium Metasilicate	lbs	97	4.100	397.70	45%	218.74
100295	Cello Flake	lbs	55	5.100	280.50	45%	154.28
100404	Sodium Chloride	lbs	332	0.520	172.64	45%	94.95
488019	FP-6L	gals	1	104.250	104.25	45%	57.34
488073	FL-62	lbs	97	21.550	2,090.35	45%	1,149.69
499634	Kol-Seal, 50 lb bag	lbs	880	1.250	1,100.00	45%	605.00
499680	Static Free	lbs	4	40.700	162.80	45%	89.54
499702	ClayCare, Clay Treat-2C, 260 gl tote	gals	5	147.000	735.00	45%	404.25
L425411-00	Lafarge Red Rock Poz	sack	110	16.400	1,804.00	45%	992.20
		SUB-TOTAL FOR Product Material			12,461.24	45.00%	6,853.69
A152	Personnel Per Diem Chrg - Cement Svc	ea	1	210.000	210.00	0%	210.00
M100	Bulk Materials Blending Charge	cu ft	171	5.450	931.95	45%	512.57
		SUB-TOTAL FOR Service Charges			1,141.95	36.72%	722.57
ARRIVE LOCATION :		MO. 12	DAY 02	YEAR 2014	TIME 01:00	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 HAVE AUTHORITY TO ACCEPT AND SIGN THIS ORDER.	
CUSTOMER REP.		Gerald Achalz				SERVICE RECEIPT: I CERTIFY THAT THE MATERIALS AND SERVICES LISTED WERE RECEIVED AND ALL SERVICES PERFORMED IN A WORKMANLIKE MANNER.	
SEE LAST PAGE FOR GENERAL TERMS AND CONDITIONS				CUSTOMER AUTHORIZED AGENT		<input checked="" type="checkbox"/> BHI APPROVED 	

FIELD RECEIPT NO. 10011121890



CUSTOMER		BLACK TEA OIL LLC		CREDIT APPROVAL NO.		PURCHASE ORDER NO.		CUSTOMER NUMBER		INVOICE NUMBER		
MAIL		STREET OR BOX NUMBER		CITY		STATE		ZIP CODE				
INVOICE TO		1011 CENTENNIAL BOULEVARD, SUITE B		HAYS		Kansas		67601				
DATE WORK COMPLETED		MO.	DAY	YEAR	BHI REPRESENTATIVE		WELL API NO:		WELL TYPE:			
12 02 2014		Joshua M Apel		15109213760000		New Well						
DISTRICT		PP, PERRYTON		JOB DEPTH(ft)		WELL CLASS:		Oil				
WELL NAME AND NUMBER		KREBS Z #1		TD WELL DEPTH(ft)		GAS USED ON JOB:		No Gas				
WELL		LEGAL DESCRIPTION		COUNTY/PARISH		STATE		JOB TYPE CODE:				
LOCATION:		3-15S-32W		Logan		Kansas		Long String				
PRODUCT CODE	DESCRIPTION	UNIT OF MEASURE	QUANTITY	LIST PRICE UNIT	GROSS AMOUNT	% DISC.	NET AMOUNT					
F061A	Cement Pumping, 4001 - 5000 ft	6hrs	1	6,450.000	6,450.00	45%	3,547.50					
F090	Fuel per pump charge - cement	pump/hr	6	70.250	421.50	0%	421.50					
J050	Cement Head	job	1	830.000	830.00	45%	456.50					
J225	Data Acquisition, Cement, Standard	job	1	2,130.000	2,130.00	45%	1,171.50					
J390	Mileage, Heavy Vehicle	miles	400	11.850	4,740.00	45%	2,607.00					
J391	Mileage, Auto, Pick-Up or Treating Van	miles	400	6.700	2,680.00	45%	1,474.00					
J553	Circulating Equipment	job	1	2,380.000	2,380.00	45%	1,309.00					
SUB-TOTAL FOR Equipment					19,631.50	44.03%	10,987.00					
SUB-TOTAL FOR Freight/Delivery Charges					5,764.22	45.00%	3,170.32					
FIELD ESTIMATE					38,998.91	44.27%	21,733.58					

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 HAVE AUTHORITY TO ACCEPT AND SIGN THIS ORDER.

SERVICE RECEIPT: I CERTIFY THAT THE MATERIALS AND SERVICES LISTED WERE RECEIVED AND ALL SERVICES PERFORMED IN A WORKMANLIKE MANNER.

SEE LAST PAGE FOR GENERAL TERMS AND CONDITIONS

CUSTOMER AUTHORIZED AGENT

BHI APPROVED  
*[Signature]*

Gerard Achatz

FIELD RECEIPT NO. 1001121890



CUSTOMER: BLACK TEA OIL LLC CREDIT APPROVAL NO. PURCHASE ORDER NO. CUSTOMER NUMBER INVOICE NUMBER  
 0040140007 - 0040140007

MAIL: STREET OR BOX NUMBER CITY STATE ZIP CODE  
 1011 CENTENNIAL BOULEVARD, SUITE B HAYS Kansas 67601

INVOICE TO : DATE WORK MO. DAY YEAR BHI REPRESENTATIVE WELL API NO. WELL TYPE :  
 1011 CENTENNIAL BOULEVARD, SUITE B Joshua M Apel 15109213760000 New Well

DATE COMPLETED 12 01 2014 JOB DEPTH (ft) WELL CLASS :  
 4,600 Gas

DISTRICT: PP, PERRYTON TD WELL DEPTH (ft) GAS USED ON JOB :  
 4,600 No Gas

WELL NAME AND NUMBER: KREBS Z #1 JOB TYPE CODE :  
 Long String

WELL LOCATION : LEGAL DESCRIPTION COUNTY/PARISH STATE  
 3-15S-32W Logan Kansas

PRODUCT CODE	DESCRIPTION	UNIT OF MEASURE	QUANTITY	LIST PRICE UNIT	GROSS AMOUNT	% DISC.	NET AMOUNT	
100022	Class H Cement	sacks	140		3,087.70		3,087.70	
100275	Sodium Metasilicate	lbs	97		218.74		218.74	
100295	Cello Flake	lbs	53		148.67		148.67	
100404	Sodium Chloride	lbs	332		94.95		94.95	
488019	FP-6L	gals	12		57.34		57.34	
488073	FL-62	lbs	97		1,149.69		1,149.69	
489634	Kol-Seal, 50 lb bag	lbs	880		605.00		605.00	
499680	Static Free	lbs	4		89.54		89.54	
499702	ClayCare, Clay Treat-2C, 260 gal tote	gals	5		404.25		404.25	
L425411-00	Lafarge Red Rock Poz	sack	110		992.20		992.20	
SUB-TOTAL FOR Product Material							6,848.08	6,848.08
A152	Personnel Per Diem Chrg - Cement Svc	ea	1		210.00		210.00	
M100	Bulk Materials Blending Charge	cu ft	171		512.57		512.57	
SUB-TOTAL FOR Service Charges							722.57	722.57

ARRIVE LOCATION : MO. DAY YEAR TIME 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 HAVE AUTHORITY TO ACCEPT AND SIGN THIS ORDER.

CUSTOMER REP. SEE LAST PAGE FOR GENERAL TERMS AND CONDITIONS SERVICE RECEIPT: I CERTIFY THAT THE MATERIALS AND SERVICES LISTED WERE RECEIVED AND ALL SERVICES PERFORMED IN A WORKMANLIKE MANNER.

CUSTOMER AUTHORIZED AGENT *Gerald Hebert* CUSTOMER AUTHORIZED AGENT *Gerald Hebert*

BHI APPROVED *Kenny Shurtz*

FIELD RECEIPT NO. 10011121890



CUSTOMER		BLACK TEA OIL, LLC		CREDIT APPROVAL NO.	PURCHASE ORDER NO.		CUSTOMER NUMBER	0040140007 - 0040140007		INVOICE NUMBER
MAIL		STREET OR BOX NUMBER		CITY		STATE	ZIP CODE			
INVOICE TO :		1011 CENTENNIAL BOULEVARD, SUITE B		HAYS		Kansas	67601			
DATE WORK COMPLETED	MO.	DAY	YEAR	BHI REPRESENTATIVE	WELL API NO:	WELL TYPE :				
12	01	2014	2014	Joshua M Apel	15109213760000	New Well				
DISTRICT	PP, PERRYTON		JOB DEPTH (ft)		4,600	WELL CLASS :				
WELL NAME AND NUMBER		KREBS Z #1		TD WELL DEPTH (ft)						
WELL LOCATION :		LEGAL DESCRIPTION		COUNTY/PARISH	STATE	JOB TYPE CODE :				
F061A		3-15S-32W		Logan	Kansas	Long String				
PRODUCT CODE	DESCRIPTION		UNIT OF MEASURE	QUANTITY	LIST PRICE UNIT	GROSS AMOUNT	% DISC.	NET AMOUNT		
F090	Cement Pumping, 4001 - 5000 ft		6hrs	1		3,547.50		3,547.50		
J050	Fuel per pump charge - cement		pump/hr	6		421.50		421.50		
J225	Cement Head		job	1		456.50		456.50		
J390	Data Acquisition, Cement, Standard		job	1		1,171.50		1,171.50		
J391	Mileage, Heavy Vehicle		miles	400		2,607.00		2,607.00		
J553	Mileage, Auto, Pick-Up or Treating Van		miles	800		2,948.00		2,948.00		
	Circulating Equipment		job	1		1,309.00		1,309.00		
	SUB-TOTAL FOR Equipment					12,461.00		12,461.00		
J401	Bulk Delivery, Dry Products		ton-mi	1463		3,170.32		3,170.32		
	SUB-TOTAL FOR Freight/Delivery Charges					3,170.32		3,170.32		
	FIELD ESTIMATE					23,201.97		23,201.97		

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 HAVE AUTHORITY TO ACCEPT AND SIGN THIS ORDER.

SERVICE RECEIPT: I CERTIFY THAT THE MATERIALS AND SERVICES LISTED WERE RECEIVED AND ALL SERVICES PERFORMED IN A WORKMANLIKE MANNER.

SEE LAST PAGE FOR GENERAL TERMS AND CONDITIONS

CUSTOMER AUTHORIZED AGENT

BHI APPROVED  
 *[Signature]*

Operator Name: BLACK TEA OIL LLC  
 Well Name: KREBS Z #1  
 Job Description: 5-1/2" x 7-7/8 OH - 4600' MD  
 Date: November 30, 2014



Job ID: 10011121890 Estimate No: 101021447

**JOB SUMMARY/SERVICE ORDER**

Depth (TVD)		4,600 ft
Depth (MD)		4,600 ft
Hole Size		7.875 in
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		771 gals
Scavenger Slurry		
Scavenger		27 bbls
Density		11.0 ppg
Yield		3.03 cf/sack
Cement Slurry		
Arkoma Lite w/ Adds		41 bbls
Density		14.3 ppg
Yield		1.36 cf/sack
Displacement		
Displacement Fluid		109 bbls
Density		9.0 ppg
Cement Slurry		
Fill in for Rat hole		6 bbls
Density		16.4 ppg
Yield		1.06 cf/sack
Estimated Price		\$25,574.70

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: 12-2-14