

received
2/7/11



BISON

Bison Oil Well Cementing Inc.
1738 Wynkoop St.
Suite 102
Denver, CO 80202
303-296-3010

Invoice

Date	Invoice #
1/19/2011	9438

Bill To
Merchant Energy Partners L.P. 10901 W Teller Drive, Suite 200 Littleton, CO 80127

		Location	Well Name & No.	Terms	Rig
		Logan, CO	Natjues #3		
Item	Description	Qty	U/M	Rate	Amount
Pump Charge-O...	Pump Charge-Other	1		3,000.00	3,000.00
MILEAGE	Mileage charge	168		3.00	504.00
	Subtotal of Services				3,504.00
Rubber Plug 4 1/2"	Rubber plug 4 1/2"	1		50.00	50.00
B3-Lite	50/50 Poz (3%)	313	Sack	16.00	5,008.00
	Subtotal of Materials				5,058.00
					8,562.00

Please Remit Invoices To:

Bison Oil Well Cementing, Inc.
P.O. Box 29671
Thornton, CO 80229

APPROVED

GAH

DATE 2/7/2011

AFE #

2009-1

WELL NAME

10035

PROP/COST #

CO #

190

GLACCOUNT

830.100

AMOUNT \$

8895.92

DESCRIPTION

Subtotal

\$8,562.00

Sales Tax (3.9%)

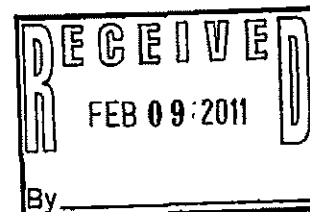
\$333.92

Total

\$8,895.92

Balance Due

\$8,895.92



**BISON**

Bison Oil Well Cementing Inc.
 1738 Wynkoop St.
 Suite 102
 Denver, CO 80202
 303-296-3010

Invoice

Date	Invoice #
1-19-2011	0138

Bill To
Merchant Energy Partners LLC 10001 W. Holly Drive, Suite 200 Littleton, CO 80127

Item	Description	Qty	UOM	Rate	Amount
Pump Charge (1)	Pump Charge-Other	1		5,000.00	5,000.00
Mileage Charge	Mileage charge	100		1.00	100.00
	Subtotal of Services				5,100.00
Rubber Plug (1)	Rubber plug 4 1/2"	1		50.00	50.00
Material	30/50 Poz (1 cu)	113	Sack	16.00	1,808.00
	Subtotal of Materials				1,858.00
					6,958.00

Phase Rent Invoices To

Bison Oil Well Cementing, Inc.
 P.O. Box 29671
 Thornton, CO 80229

Subtotal	\$6,958.00
Sales Tax (3.9%)	\$271.92
Total	\$7,229.92
Balance Due	\$7,229.92

**1738 Wynkoop St., Ste. 102
Denver, Colorado 80202
Phone: 303-298-3010
Fax: 303-298-8143
E-mail: bisonoil1@qwestoffice.net**



№ 9438

WELL NO. AND FARM Natures #3	COUNTY Lugan	STATE CO.	DATE 1-19-11
CHARGE TO Schneider	WELL LOCATION		CONTRACTOR Yetter Well Service
	SEC.	TWP. RANGE	LOCATION 1 Yuma
		DELIVERED TO	CODE
		SHIPPED VIA	LOCATION 2 Sterling
			CODE
	TYPE AND PURPOSE OF JOB Spurce		LOCATION 3 Yuma
			CODE
			WELL TYPE
			CODE

[illegible]

If this account is not paid within 30 days of invoice date a FINANCE CHARGE will be made. Computed at a single monthly rate of 1 1/2% which is equal to an ANNUAL PERCENTAGE RATE OF 18%.

TAX REFERENCES

"TAXES WILL BE ADDED AT CORPORATE OFFICE"

390 SUB TOTAL TAX

TOTAL

SUBJECT TO CORRECTION

Kelly
Customer or His

Developer of His Agent


Eaton Oil Well Cementing, Inc. Rep.

Eaton Oil Well Cementing, Inc. Representative

Customers hereby acknowledges and specifically agrees to the terms and conditions on this work order, including, without limitation, the provisions on the reverse side hereof which include the release and indemnity

BISON OIL WELL CEMENTING, INC.



1738 Wynkoop St., Ste. 102
Denver, Colorado 80202
Phone: 303-298-3010
Fax: 303-298-8143
E-mail: bisonoil1@qwestoffice.net

REF. INVOICE # 9438
LOCATION Starling
FOREMAN Randy Newby

TREATMENT REPORT

DATE	WELL NAME	SECTION	TYPE	RGE	COUNTY	FORMATION
1-19-11	Narjues #3					

CHARGE TO <u>Schneider</u>	OWNER <u>Merchant Energy</u>
MAILING ADDRESS	OPERATOR
CITY	CONTRACTOR <u>Vetter</u>
STATE ZIP CODE	DISTANCE TO LOCATION <u>84 mi</u>
TIME ARRIVED ON LOCATION <u>9:00 AM</u>	TIME LEFT LOCATION <u>10:45</u>

WELL DATA			PRESSURE LIMITATIONS		
HOLE SIZE <u>7"</u>	TUBING SIZE	PERFORATIONS		THEORETICAL	INSTRUCTED
TOTAL DEPTH <u>515'</u>	TUBING DEPTH	SHOTS/FT	SURFACE PIPE AIRRUS LONG		
	TUBING WEIGHT	OPEN HOLE	STRING		
CASING SIZE <u>4 1/2"</u>	TUBING CONDITION		TUBING		

PRESSURE SUMMARY			TREATMENT RATE	
BREAKDOWN or CIRCULATING <u>psi</u>	AVERAGE <u>psi</u>		<input type="checkbox"/> SURFACE PIPE	BREAKDOWN BPM
FINAL DISPLACEMENT <u>psi</u>	ISIP <u>psi</u>		<input type="checkbox"/> PRODUCTION CASING	INITIAL BPM
AIRRUS <u>psi</u>	5 MIN SIP <u>psi</u>		<input checked="" type="checkbox"/> LATEX CEMENT	FINAL BPM
MAXIMUM <u>psi</u>	15 MIN SIP <u>psi</u>		<input type="checkbox"/> ACID BREAKDOWN	MINIMUM BPM
MINIMUM <u>psi</u>			<input type="checkbox"/> ACID STIMULATION	MAXIMUM BPM
			<input type="checkbox"/> ACID SPOTTING	AVERAGE BPM
			<input type="checkbox"/> MISC PUMP	
			<input type="checkbox"/> OTHER	

BREAKDOWN or CIRCULATING <u>psi</u>	AVERAGE <u>psi</u>		<input checked="" type="checkbox"/> LATEX CEMENT	FINAL BPM
FINAL DISPLACEMENT <u>psi</u>	ISIP <u>psi</u>		<input type="checkbox"/> ACID BREAKDOWN	MINIMUM BPM
AIRRUS <u>psi</u>	5 MIN SIP <u>psi</u>		<input type="checkbox"/> ACID STIMULATION	MAXIMUM BPM
MAXIMUM <u>psi</u>	15 MIN SIP <u>psi</u>		<input type="checkbox"/> ACID SPOTTING	AVERAGE BPM
MINIMUM <u>psi</u>			<input type="checkbox"/> MISC PUMP	
			<input type="checkbox"/> OTHER	

INSTRUCTIONS PRIOR TO JOB MIRN circ 10 bbls water m+p 205 sk @ 14.5" prod water 4.82 gal/sk ~~24~~ 24 bbls mix water 1/8" of 1.14 unit/sk Drop plug Displacement 6.4 BDLs fresh water shut in rig down, at request of Kelley mixed cement until we seen cement returns

JOB SUMMARY					
DESCRIPTION OF JOB EVENTS					
<u>Shut in</u>	<u>9:00</u>	<u>9:30</u>	<u>9:35</u>	<u>10:00</u>	<u>10:00</u>
<u>10:11</u>	<u>10:30</u>				<u>10.10 6.4 200/sk</u>

AUTHORIZATION TO PROCEED

TITLE

DATE

Customers hereby acknowledge and specifically agree to the terms and conditions on this work order, including, without limitation, the provisions on the reverse side hereof which include the release and indemnity



Bison Oil Well Cementing, Inc
1738 Wynkoop St., Ste. 102
Denver, CO 80202
303-296-3010
www.Bisonoilwell.com

Cementing Customer Satisfaction Survey

Service Date 1-19-11
Invoice Amount 18562.00
Well Name Nat'l
Well Location Sterling
County Logan
SEC/TWP/RNG _____

Invoice Number 9438
Well Permit Number _____
Well Type _____
Well Number 43
Lease Merchant
Job Type Seepage
Company Name Schneider
Customer Representative Kelly R. Caldwell
Customer Phone Number _____

State CO
Supervisor Name Randy Nixen
Employee Name _____

Exposure Hours (Per Employee)

Randy
T. Nixen
TONY
C. Nixen

1 1/2
1 1/2
1 1/2
1 1/2

Total Exposure Hours _____

Did we encounter any problems on this job? Yes / No

To Be Completed By Customer

Rating/Description

- 5 - Superior Performance (Established new quality / performance standards)
- 4 - Exceeded Expectations (Provided more than what was required / expected)
- 3 - Met Expectations (Did what was expected)
- 2 - Below Expectations (Job problems / failures occurred [* Recovery made])
- 1 - Poor Performance (Job problems / failures occurred [* Some recovery made])

* Recovery: resolved issue(s) on jobsite in a timely and professional manner

Opportunity

- Best Practices
- Potential Best Practice
- Prevention/Improvement

RATING / CATEGORY

- 2 Personnel -
- 1 Equipment -
- 1 Job Design -
- 1 Product / Material -
- 1 Health & Safety -
- 1 Environmental -
- 1 Timeliness -
- 1 Condition / Appearance -
- 1 Communication -
- 1 Improvement -

CUSTOMER SATISFACTION RATING

- Did our personnel perform to your satisfaction ?
- Did our equipment perform to your satisfaction ?
- Did we perform the job to the agreed upon design ?
- Did our products and materials perform as you expected ?
- Did we perform in a safe and careful manner (Pre / post mtgs, PPE, TSMR, etc.) ?
- Did we perform in an environmentally sound manner (Spills, leaks, cleanup, etc.) ?
- Was job performed as scheduled (On time to site, accessible to customer, completed when expected)?
- Did the equipment condition and appearance meet your expectation?
- How well did our personnel communicate during mobilization, rig up, and job execution?
- What can we do to improve our service?

Please Circle:

- Yes / No - Did an accident or injury occur?
- Yes / No - Did an injury requiring medical treatment occur?
- Yes / No - Did a first-aid injury occur?
- Yes / No - Did a vehicle accident occur?
- Yes / No - Was a post-job safety meeting held?

Additional Comments:

Please Circle:

- Yes / No - Was a pre-job safety meeting held?
- Yes / No - Was a job safety analysis completed?
- Yes / No - Were emergency services discussed?
- Yes / No - Did environmental incident occur?
- Yes / No - Did any near misses occur?

THE INFORMATION HEREIN IS CORRECT -

Customer Representative's Signature

Date

Any additional Customer Comments or HSE concerns should be described on the back of this form