

BISON OIL WELL CEMENTING, INC.

1738 Wynkoop St., Ste. 102
 Denver, Colorado 80202
 Phone: 303-296-3010
 Fax: 303-298-8143
 E-mail: bisonoil1@qwestoffice.net



SERVICE INVOICE

Nº 11202

WELL NO. AND FARM <i>State Peterson</i>		COUNTY <i>Weird</i>	STATE <i>CO</i>	DATE <i>3-5-13</i>
CHARGE TO <i>Encana</i>		WELL LOCATION SEC. <i>20</i> TWP. <i>5N</i> RANGE <i>63W</i>		CONTRACTOR
DELIVERED TO <i>Ensign 135</i>			LOCATION 1	CODE
SHIPPED VIA <i>3106, 3211, 102</i>			LOCATION 2	CODE
TYPE AND PURPOSE OF JOB <i>Surface</i>			LOCATION 3	CODE
			WELL TYPE	CODE

PRICE REFERENCE	DESCRIPTION	UNITS		UNIT PRICE	AMOUNT
		QTY.	MEAS.		
	Pump Charge	1		1,400	1400 ⁰⁰
	Mileage 2 Trucks	60		4.00	480 ⁰⁰
	Pickup	80		1.50	90 ⁰⁰
	430 SKS			22.45	9653 ⁵⁰
	Dye Blue	16	oz	25.30	25 ³⁰
	Data	1		225.00	225 ⁰⁰
	Sugar #2 lbs	1 bag		200.00	200 ⁰⁰
					12073 ⁸⁰

Encana Oil & Gas (USA) Inc.
DJ Basin
Well: <i>State Peterson 2D-20H</i>
AFE: <i>13172460</i>
Major/Minor CC: <i>8715, FEB 618</i>
Signature: <i>[Signature]</i>
Approver: <i>RCMS</i>

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	SUB TOTAL	12,073 ⁸⁰
		TAX	
	"TAXES WILL BE ADDED AT CORPORATE OFFICE"	TOTAL	

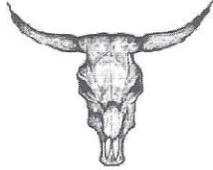
SUBJECT TO CORRECTION

Brad Kovacs
 Bison Oil Well Cementing, Inc. Representative

Customer or His Agent
 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.

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 Denver, Colorado 80206
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INVOICE #
 LOCATION
 FOREMAN

11202
 Stat Peterson

TREATMENT REPORT

DATE <u>3-5-13</u>	WELL NAME <u>Stat Peterson</u>	SECTION <u>20</u>	TWP <u>5N</u>	RGE <u>63W</u>	COUNTY <u>Weild</u>
BILL TO <u>Encana</u>		CONSULTANT			
OWNER <u>Encana</u>		RIG NAME & NUMBER <u>Ensign 135</u>			
MAILING ADDRESS		DISTANCE TO LOCATION <u>60 23 mi</u>	UNITS ON LOCATION <u>3106, 3211, 102</u>		
CITY		TIME REQUESTED <u>7:30 AM</u>	TIME ARRIVED ON LOCATION <u>7:22 AM</u>		
STATE, ZIP		TIME LEFT LOCATION			

WELL DATA			Cement Makeup			
HOLE SIZE <u>12 1/4</u>	TUBING SIZE	PERFORATIONS	Cement Blend <u>BFN 3% BOCA-1, 25 16/32 BPLA-1</u>			
TOTAL DEPTH <u>991</u>	TUBING DEPTH	SHOTS/FT	Cement - Specs	lbs <u>15.2</u>	Yield <u>1.27</u>	Water Requirements <u>5.89</u>
CASING SIZE <u>9 5/8</u>	TUBING WEIGHT <u>40</u>	OPEN HOLE	Annulus Factor <u>3131</u>	Capacity Factor <u>0.758</u>		
CASING DEPTH <u>996.21</u>	TUBING CONDITION	TREATMENT VIA	TYPE OF TREATMENT <input checked="" type="checkbox"/> Surface Pipe <input type="checkbox"/> Production <input type="checkbox"/> Squeeze <input type="checkbox"/> MISC Pump <input type="checkbox"/> P&A			
CASING WEIGHT <u>40</u>	PACKER DEPTH		HYD HHP = RATE X PRESSURE / 40.8 % Excess <u>60</u> BBL to Pit <u>32</u>			
CASING CONDITION <u>good</u>						
Max Rate <u>6 bbls min</u>						
Max Pressure <u>2500 lbs</u>						

DESCRIPTION OF JOB EVENTS

MIRW Pressure test at 500 lbs 30 bbls of CKL, 10 dye mix + pump 30 sks
 Dis 72 bbl water drop plug pump 500 lbs over hold for 5 min release
 pressure rig down

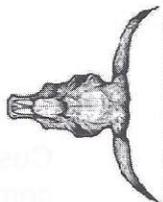
X Donnie Epler
 Authorization To Proceed

Title

X 3-5-13
 Date

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INVOICE #
 LOCATION
 FOREMAN

11202
 State Peterson
 Brad

Treatment Report Page 2

DESCRIPTION OF JOB EVENTS

Safety Meeting	MIRU	CIRCULATE	Drop Plug	Displace 1			Displace 2			Displace 3			Displace 4			Displace 5		
				BBLs	Time	PSI												
				0	9:43	150	0			0			0			0		
				10	9:46	390	10			10			10			10		
				20	9:47	470	20			20			20			20		
				30	9:49	560	30			30			30			30		
				40	9:51	620	40			40			40			40		
				50	9:53	710	50			50			50			50		
				60	9:54	750	60			60			60			60		
				70	9:57	550	70			70			70			70		
				80	9:59	450	80			80			80			80		
				90			90			90			90			90		
				100			100			100			100			100		
				110			110			110			110			110		
				120			120			120			120			120		
				130			130			130			130			130		
				140			140			140			140			140		
				150			150			150			150			150		

Notes:

MTRU Pressure test at 500 lbs 3000 lbs KCL, 10 day mix & pump 430 sks, drop plug
 Dis 22 bbls / water bumper plug with pressure at 500 over held for 5 min released pressure
 rig down, cleaned up, left location
 MTRU 7:30 am 943 @ 150
 safety meeting 8:00 am 946 10 390
 Circ 9:09 am 947 80 470
 Cement 9:15 am 949 30 560
 Displace 9:43 am 951 40 620
 Drop Plug 9:42 am 953 50 710
 954 60 750
 957 70 550
 959 70 450

X *David Phelps*
 Work Performed
 X *Encour Rep*
 Title
 Date 3-5-13



Bison Oil Well Cementing, Inc
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 www.Bisonoilwell.com

Cementing Customer Satisfaction Survey

Service Date 3-5-13 Invoice Number 11202
 Invoice Amount _____ Well Permit Number _____
 Well Name Stat Peterson Well Type _____
 Well Location _____ Well Number _____
 County We. Jct Lease _____
 SEC/TWP/RNG 20 5N 63W Job Type Surface
 State Colorado Company Name Incana
 Supervisor Name _____ Customer Representative _____
 Customer Phone Number _____

Employee Name
Bruce
Calvin
Monte
Mark
Ray
 Total Exposure Hours 17:5

Exposure Hours (Per Employee)
3.5
3.5
3.5
3.5
3.5
 Did we encounter any problems on this job? Yes No

To Be Completed By Customer

- | | |
|--|-------------------------|
| Rating/Description | Opportunity |
| 5 - Superior Performance (Established new quality / performance standards) | Best Practices |
| 4 - Exceeded Expectations (Provided more than what was required / expected) | Potential Best Practice |
| 3 - Met Expectations (Did what was expected) | Prevention/Improvement |
| 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

RATING / CATEGORY	CUSTOMER SATISFACTION RATING
_____ Personnel -	Did our personnel perform to your satisfaction ?
_____ Equipment -	Did our equipment perform to your satisfaction ?
_____ Job Design -	Did we perform the job to the agreed upon design ?
_____ Product / Material -	Did our products and materials perform as you expected ?
_____ Health & Safety -	Did we perform in a safe and careful manner (Pre / post mtgs, PPE, TSMR, etc..) ?
_____ Environmental -	Did we perform in an environmentally sound manner (Spills, leaks, cleanup, etc..) ?
_____ Timeliness -	Was job performed as scheduled (On time to site, accessible to customer, completed when expected)?
_____ Condition / Appearance -	Did the equipment condition and appearance meet your expectation?
_____ Communication -	How well did our personnel communicate during mobilization, rig up, and job execution?
_____ Improvement -	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?

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?

Additional Comments: Good job. No complaints.

THE INFORMATION HEREIN IS CORRECT -
Dominic Epler
 Customer Representative's Signature
 Date 3-5-13

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



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B.O.C. Tailgate Safety Meeting Report

INVOICE 11202

Date 13-5-13 Time 7:55 AM PM Meeting Facilitator _____
 Facility Name and Location Sty Peterson Work to be Undertaken Surface
 Nearest Emergency Medical Service Number (Other than 911) 604/4

MINIMUM STANDARDS REQUIREMENT VERIFICATION (must be verified for all members of a work party)

- Hard Hat Safety Glasses w/sideshields Safety Toed Footwear Personal Methane Monitor Verify Safety Training
- Flame Resistant Clothing New on Job Review Onsite Orientation Other (specify) _____

HAZARD IDENTIFICATION AND SAFETY BRIEFING DISCUSSION (Check and Discuss all Relevant Hazards)

- | | | |
|---|--|---|
| <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Positions of People <input type="checkbox"/> Falling from Heights <input checked="" type="checkbox"/> Slips/Trips/Falls <input type="checkbox"/> Extreme Heat/Cold <input type="checkbox"/> Electrical Current <input type="checkbox"/> Overexertion/Heavy Lifting <input type="checkbox"/> Spills/Releases <input type="checkbox"/> Flying Particles <input type="checkbox"/> Overhead Power Lines | <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Job Safety Analysis Reviewed (if applicable) <input type="checkbox"/> NORM or Other Radiation <input type="checkbox"/> Overhead work/suspended Loads/Chains/Slings <input checked="" type="checkbox"/> Trapped Pressure <input type="checkbox"/> Flammable/Combustible/Explosives <input checked="" type="checkbox"/> Pinch Points/Moving/Rotating Equipment <input type="checkbox"/> Waste Handling/Disposal <input checked="" type="checkbox"/> Excavation Collapse <input type="checkbox"/> _____ | <ul style="list-style-type: none"> <input type="checkbox"/> Hazardous Substance <input type="checkbox"/> Hazardous Atmosphere <input checked="" type="checkbox"/> Walking/Working Surfaces <input type="checkbox"/> Noise Levels <input type="checkbox"/> Sharp Edges <input type="checkbox"/> Insects/Snakes/etc. <input type="checkbox"/> MSDS's Reviewed <input checked="" type="checkbox"/> Walk Around Site Assessment <input type="checkbox"/> _____ |
|---|--|---|

ADDITIONAL PPE REQUIREMENT (based on the job specific hazards, check all that apply)

- | | | | |
|--|---|--|---|
| <p>Eyes/Face</p> <ul style="list-style-type: none"> <input type="checkbox"/> Tinted Lenses <input type="checkbox"/> Goggles <input type="checkbox"/> Faceshield <input type="checkbox"/> Hearing Protection <input type="checkbox"/> _____ | <p>Hands</p> <ul style="list-style-type: none"> <input type="checkbox"/> Chemical Resistant Gloves <input type="checkbox"/> Heat Resistant Gloves <input type="checkbox"/> Cotton or Leather Gloves <input type="checkbox"/> Dielectric Gloves <input type="checkbox"/> _____ | <p>Feet</p> <ul style="list-style-type: none"> <input type="checkbox"/> Rubber Boots <input type="checkbox"/> Over Boots <input type="checkbox"/> Dielectric Boots <input type="checkbox"/> _____ | <p>Other</p> <ul style="list-style-type: none"> <input type="checkbox"/> Air Purifying Respirator <input type="checkbox"/> Supplied Air Respirator <input type="checkbox"/> Personal H2S Monitor (if in sour area) <input type="checkbox"/> Chemical Resistant Clothing <input type="checkbox"/> Personal Fall Arrest Systems <input type="checkbox"/> _____ |
|--|---|--|---|

EMERGENCY PREPARATIONS

- Muster Areas Communication Methods Means of Egress Emergency Equipment

Additional Topics Covered:

Attendees (Signature)/Company	Attendees (Signature)/Company
<u>Brad</u>	<u>Franklin Ensign</u>
<u>Monte</u>	<u>Michael DeWitt Bison</u>
<u>Calvin</u>	<u>Chris Ensign</u>
<u>[Signature]</u> S in sign Ensign	<u>[Signature]</u>
<u>[Signature]</u>	<u>Calvin DeWitt Bison</u>

Other Considerations and Field Notes: INSIGN

Ronnie Elrod - Ensign

BISON OILWELL CEMENTING JOB SAFETY ANALYSIS WORKSHEET



JOB/TASK: SURFACE CASING CEMENTING		CEMENTER/SUPERVISOR: Brad Kosinski		PAGE: 1	OF: 2
WELL NAME: State Peterson 2D-20H		RIG #: Ensign 135	LOCATION: 70 Ranch	DATE: 3-5-13	INVOICE #: 11202
OPERATOR: Encana		CONSULTANT: Dennis Cody			
PPE REQUIRED: <ul style="list-style-type: none"> <input type="checkbox"/> Hard Hat <input type="checkbox"/> Safety Glasses <input type="checkbox"/> Steel Toe Boots <input type="checkbox"/> Impact Gloves 		ADDITIONAL PPE (based on job specific hazards) <ul style="list-style-type: none"> <input type="checkbox"/> FR Coveralls <input type="checkbox"/> Reflective Vest <input type="checkbox"/> Goggles <input type="checkbox"/> Faceshield <input type="checkbox"/> Chemical Resistant Gloves <input type="checkbox"/> Chemical Resistant Clothing 		RECOMMENDED ACTION OR PROCEDURE	
JOB STEPS		POTENTIAL HAZARDS		REVIEWED BY	
1. Review JSA		Misunderstanding		BK	
2. Conduct pre job safety meeting		Misunderstanding		BK	
3. Move trucks in and rig up equipment		Other traffic on location, overhead lines, pinch points, heavy lifting, slips/falls		BK	
4. Raise cement head and hoses to rig floor		Overhead work, improper hookup/load not properly secured, poor communication between ground personnel and crane/tugger operator		BK	
5. Connect Cement head/swage/pin, chickens and hoses.		Working in a congested area, pinch points, swinging hammers, slippery rig floor		BK	
6. Pressure test lines		Equipment falling under high pressures		BK	
7. Pump Spacer (dye marker)/Mix and Pump Cement		Serious injury from high pressure line failure or catastrophic equipment failure. Casing hydraulicing from hole, causing injury. Burns or skin irritation from splashing cement, uncontrolled spills		BK	

Test to: PSI- 500	Pressure relief valve set to: PSI- 2500
Maximum pressure allowed for job: PSI- 2500	Max. pump pressure: PSI- 7500

- Hold safety meeting with all personnel on location, ensure everyone pays attention to ensure they understand their role and responsibility during the job
- Review treatment report with consultant and obtain signature for authorization to proceed
- Identify and address short service employees (SSE) who are on location
- Coordinate with well site supervisor for directions on where and when to park the equipment
- All Bison crew members walk the location prior to driving in to access specific hazards
- Utilize spotters when trucks are in motion
- Establish buffer zone around equipment utilizing cones and caution tape
- Cementer follows up to ensure connections are secure
- Lift with your legs and use teamwork when rigging up
- Utilize reflective vests and wands to increase visibility at night
- Deploy spill berms and buckets
- Inspect slings, chains and hooks prior to lift
- Ensure line of sight with crane/tugger operator is maintained throughout the lift and hand signals are understood
- Ensure no personnel are under suspended equipment
- Utilize a tag line to control the load
- Only Bison personnel install the cement head and hoses
- Maintain line of sight and communication with crane/tugger operator
- Remove non-essential personnel from rig floor, wait until other activity is done
- Rig crew does not install chains until head and hoses are installed
- Ensure a clear path when swinging a hammer
- Ensure all fittings and hoses have proper pressure rating for the job and fall within the parameters of the *Bison Oilwell Iron Inspector Program*
- Ensure rig floor is clear and personnel are away from hoses prior to test
- Establish buffer area around high pressure hoses
- Lines are checked from a distance and using pressure gauges
- Pressure test prior to job, utilize heavy duty hose hobbles and pressure relief valve
- Keep rig floor and buffer area clear while pumping
- Utilize proper PPE
- Have access to water to rinse affected skin

BISON OILWELL CEMENTING JOB SAFETY ANALYSIS WORKSHEET



		<ul style="list-style-type: none"> -Deploy spill berms and buckets 	BK
8. Drop plug	Slips, trips, falls. Miscommunication between pump operator and cementer, pressure against a closed stop	<ul style="list-style-type: none"> -Utilize 3 points of contact while descending/climbing ladder and stairs -Have visual contact between cementer and pump operator before pump is engaged 	BK
9. Displacement	Unexpected pressure associated with resuming of pumping, casing hydraulics from hole, serious injury from high pressure line failure or catastrophic equipment failure.	<ul style="list-style-type: none"> -Ensure rig floor remains clear and non-essential personnel stay clear from buffer area -Pump operator monitors pump pressure constantly -Utilize proper PPE 	BK
10. Bump plug-Test float and release pressure	Pressure jumps before expected (calculated) displacement. Pressure jumps rapidly and higher than expected	<ul style="list-style-type: none"> -Pump operator slows rate to 2 BPM when 5 bbls from calculated displacement and down to 1 bpm within 2 bbls of calculated displacement -Pump operator monitors pressure constantly -Pressure relief valve installed on pump 	BK
11. Pressure test casing (if required)	<p>Test to: <input type="text" value="N/A"/></p> <p>PSI- <input type="text"/></p> <p>FOR: MIN- <input type="text"/></p>	<ul style="list-style-type: none"> -Ensure rig floor remains clear and non-essential personnel stay clear from the buffer area 	BK
12. Wash up / rig down	Splashing cement slurry, heavy lifting, pinch points, unsecured hoses	<ul style="list-style-type: none"> -Utilize stakes or portable tank manifold to secure hoses -Use proper lifting technique (2 man lift, lift with legs, plan your route) 	BK
13. Depart location	Other traffic and personnel and location, overhead lines	<ul style="list-style-type: none"> -All Bison crew member walk the Planned exit route to access possible obstacles and hazards -Utilize spotters while backing 	BK
OTHER HAZARDS SPECIFIC TO LOCATION OR ENVIRONMENT NOT ADDRESSED ABOVE:			BK
DESIGNATED EMERGENCY MUSTER AREA: <input type="text" value="Lease Road to Rig"/>		NEAREST EMERGENCY MEDICAL FACILITY (OTHER THAN 911): <input type="text" value="Greeley"/>	

State Peterson 2D-20H

M/D TOTCO 2000 SERIES

