



BISON

Bison Oil Well Cementing Inc.
1547 Gaylord Street
Denver, CO 80206
303-296-3010

Invoice

Date	Invoice #
3/1/2014	12358

Bill To
Noble Energy Inc. Attn: Accounting 1625 Broadway Ste 2000 Denver, CO 80202

Location	Well Name & No.	Terms	Job Type		
Weld CO	BADGER FEDERAL #103-64HN	Net 30	P/A		
Item	Description	Qty	U/M	Rate	Amount
P & A	P & A	1			
MILEAGE	Mileage charge-Truck	260			
MILEAGE	Mileage charge-Pick up	65			
Data Acquisition ...	Data Acquisition Charge	1			
Service Charge	Iron Inspection	1			
Service Charge	Supervisor Fee	1			
HOURS	Wait Time	2			
	Subtotal of Services				
BFN IH Winter ...	BFN IH Blend	655	Sack		
	Subtotal of Materials				

Please Remit Payment To:

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

Subtotal	
Sales Tax	
Total	
Balance Due	

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 12358

WELL NO. AND FARM 1# Badger Federal	COUNTY weld	STATE Colorado	DATE 3-1-19
CHARGE TO Noble	WELL LOCATION SEC. 17 TWP. 6N RANGE 62	CONTRACTOR	
DELIVERED TO CR103CR96		LOCATION 1 Lasalle	CODE
SHIPPED VIA		LOCATION 2 CR103CR96	CODE
TYPE AND PURPOSE OF JOB Plug and Abandon		LOCATION 3 LaBalle	CODE
		WELL TYPE	CODE

PRICE REFERENCE	DESCRIPTION	QTY.	UNIT
	Pump Charge	1	
	mile age	65	
	iron inspection	1	
	Supervisor charge	1	
	Data Ag Fee	1	
	mile age	65	
	Cement	65	
	wait time	2	
	Badger Federal #2		
	Badger Federal		
	LF 3-2414N		
	134169		
	3-2-2019		
	CHAS L. HNSTEIN		
	Total Weight		
	Loaded		

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 1/4% which is equal to an ANNUAL PERCENTAGE RATE OF 18%.

TAX REFERENCES

"TAXES WILL BE ADDED AT CORPORATE OFFICE"

Aaron Ca

Customer or His Agent

Bison Oil Well Cement

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.



INVOICE #
LOCATION
FOREMAN

Treatment Report Page 2

DESCRIPTION OF JOB EVENTS

Safety Meeting	ID	Displace 1			Displace 2			Displace 3			Displace 4			Displace 5		
		BBS	Time	PSI	BBS	Time	PSI	BBS	Time	PSI	BBS	Time	PSI	BBS	Time	PSI
MIRU	10.49	01	1.58	480	0			0			0			0		
CIRCULATE	10.52	10			10			10			10			10		
Drop Plug		20			20			20			20			20		
		30			30			30			30			30		
		40			40			40			40			40		
		50			50			50			50			50		
M & P		60			60			60			60			60		
Time	Sacks	70			70			70			70			70		
1.20	055	80			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:

X

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X	Title
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1

X	Date
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