

# NABORS

PLEASE REMIT TO:  
**NABORS COMPLETION & PRODUCTION SERVICES CO.**  
P.O. BOX 975682  
DALLAS, TX 75397-5682  
435-725-5344

FIELD TICKET No.

45-28092

DELIVERED FROM

Sterling

DATE 5-13-15

[illegible]

**\*ACCIDENT REPORT MUST BE ATTACHED WHEN NOT SIGNED**

WITH MY INITIALS, I CONFIRM THAT THE TIME SHOWN IN THE "HOURS" COLUMN, ACCURATELY REFLECTS MY COMPENSABLE TIME.

Employee Name (Print)	Hours	Initials
Eric S.		
Eric E.		

CUSTOMER AGREES to pay Nabors Completion & Production Services Co. (the "Company") on a net 30 day basis from date of invoice. If Customer disputes any item invoiced, Customer shall, within 20 days after receipt of invoice, notify the Company of the item(s) disputed, specifying the reason(s) therefor; payment of the disputed item(s) may be withheld until settlement of dispute, but payment of undisputed portion of invoice shall be made without delay. All payments shall be made at the address shown on the reverse side of this document. In the absence of a separate written contract, CUSTOMER REPRESENTATIVE REPRESENTS AND WARRANTS THAT HE/SHE IS AUTHORIZED TO ENTER INTO THIS AGREEMENT ON BEHALF OF CUSTOMER AND ACCEPTS ALL TERMS AND CONDITIONS AS PRINTED ON THE REVERSE SIDE OF THIS DOCUMENT (WHICH INCLUDES INDEMNITY LANGUAGE THAT ALLOCATES RISKS RELATED TO THE ABOVE DESCRIBED SERVICES). Pricing and extensions, if shown above, are subject to verification and correction at time of invoicing.

**NABORS COMPLETION & PRODUCTION SERVICES CO.**

**CUSTOMER REPRESENTATIVE**





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P.O. BOX 975682  
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435-725-5344

FIELD TICKET No.

45-28093

DELIVERED FROM

Storling

DATE

5-14-15

INVOICE NO.		P.O. NO.	AFE NO.
CUSTOMER NO.		LEASE <b>Sharkey</b>	WELL NO. <b>9-35</b>
CUSTOMER <b>Anadarko</b>		FIELD	STATE <b>CO</b> COUNTY <b>Weld</b>
ADDRESS		LOCATION <b>CR 38+23</b>	
CITY		CASING SIZE & WT. <b>4 1/2</b>	TBG. SIZE
STATE	ZIP	TYPE OF JOB <b>Sguc Holes</b>	
ORDERED BY <b>Nate Windholz</b>		TITLE <b>Adam Frank</b> SERVICE SUPV.	

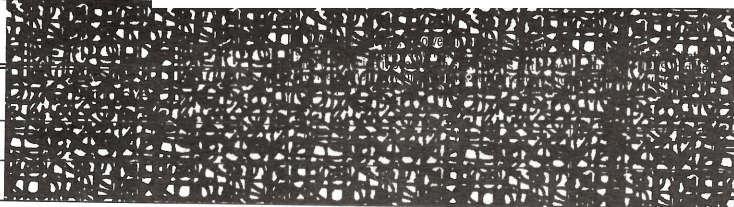
PART NO.	DESCRIPTION	REV. CODE	QTY.	UNIT PRICE	AMOUNT
70-255-0100	Back - OFF				
75-810-1111	Sguc Gun - 20g Jets				
75-810-1111	Additional Sguc Gun - Select Fire				
Sguc Holes: <u>Top Holes (6) @ 3920'</u>					
<u>Bottom Holes (6) @ 4320'</u>					
<b>OPEN Charges</b> <b>2-2'-3sps - 12 Total Shots</b> <b>20 g. Jets</b> <b>120° Phasing</b> <b>.73 EH</b> <b>6.05 Pen.</b>					
<b>Ed Griebel</b> <b>USER ID: gbx025</b> <b>WBS/NO/CC: 2091210</b> <b>G/L Acct: 30012230</b> <b>Consultant: [Signature]</b>					
<div style="text-align: right;"> <b>THANK YOU</b>  </div>					

<b>CALLED OUT</b> _____ Time _____ Date	<b>ON LOCATION</b> <b>7:00a</b> Time <b>5-14</b> Date	<b>COMPLETED</b> <b>8:00a</b> Time <b>5-14</b> Date
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Eric S.		
Eric C.		



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X

NABORS COMPLETION & PRODUCTION SERVICES CO.

X

CUSTOMER REPRESENTATIVE

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P.O. BOX 975682  
DALLAS, TX 75397-5682  
435-725-5344

FIELD TICKET No.

45- 28096

DELIVERED FROM

## Stirling

DATE 5-18-15

INVOICE NO.		P.O. NO.	AFE NO.		
CUSTOMER NO.		LEASE	WELL NO.		
CUSTOMER Anadarko		FIELD	STATE CO	COUNTY Weld	
ADDRESS		LOCATION Cr 38+23			
CITY		CASING SIZE & WT. 4 1/2		TBG. SIZE	
STATE	ZIP	TYPE OF JOB Jet Cut			
ORDERED BY Nate Windholz		TITLE Adam Frank		SERVICE SUPV.	
PART NO.	DESCRIPTION	REV. CODE	QTY.	UNIT PRICE	AMOUNT
70-255-0100	Perk-off				
70-250-1111	4 1/2 Jet Cut @ 970'				
Ed Griebel					
USER ID: gbx025					
WBS/WO/CC: 2091210					
G/L Acct: 30012230					
Consultant: [Signature]					
THANK You					
CALLED OUT		ON LOCATION		COMPLETED	
Time		7:00a Time		7:50a Time	
Date		5-18 Date		5-18 Date	

THANK  
You

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Erre S.		
Eric E.		

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~~45~~ 28097

DELIVERED FROM

Storling

DATE \_\_\_\_\_

5-18-15

INVOICE NO.		P.O. NO.	AFE NO.	
CUSTOMER NO.		LEASE	WELL NO.	
CUSTOMER	ADDRESS	FIELD	STATE	COUNTY
CITY	ZIP	LOCATION	TBG. SIZE	
STATE	TYPE OF JOB			
ORDERED BY		TITLE	SERVICE SUPV.	
PART NO.	DESCRIPTION	REV. CODE	QTY.	UNIT PRICE
AMOUNT				
75-820-1111	3rd Party Fly - Thunderbird 85/r CISP sat @ 20'			
Ed Griebel				
USER ID: gbx025				
WBS/WO/CC: 2091210				
G/L Acct: 80012230				
Consultant: [Signature]				
THANK You				
CALLED OUT		ON LOCATION		COMPLETED
Time		7:30a Time		8:15a Time
Date		5-19 Date		5-19 Date

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**CUSTOMER REPRESENTATIVE**

**White – Main**      **Canary – Customer**      **Pink – Field**