DATE: 19-Jul-2014

PIONEER

Pioneer Wireline Services, LLC.
Phone: 970.867.5171
Fax: 970.867.5323

INVOICE # 2-250106

COMPANY SYNERGY RESOURCES BY TIM REESE

ADDRESS

LEASE/LOCATION IMOGENE #2

STATE Colorado COUNTY WELD LEGAL

ELEV. KB ELEV. DRILLER TD FIELD Wattenberg

ENGINEER T. REESE OPERATOR M. hansen OPERATOR M. TORREZ OPERATOR UNIT# 96

ENGINEER OPERATOR OPERATOR OPERATOR

PIONEER WIRELINE SERVICES IS REQUESTED TO PERFORM THE FOLLOWING SERVICES ACCORDING TO THE TERMS PRINTED ON THE REVERSE OF THIS ORDER

UNIT	CODE	SERVICE	UNIT PRICE	AMOUNT
1	10000	Rig-Up on WO rig or Crane	$ 2,200.00	$ 2,200.00
1	11000	Standard Pack-off W/ Lubricator Only	$ 800.00	$ 800.00
1	15072	Setting Service For Tubing And Casing Applications Operation Charge	$ 2,600.00	$ 2,600.00
7060	15071	Setting Service For Tubing And Casing Applications Depth Charge	$ 0.40	$ 2,824.00
7060	15021	Dump Bailer Depth Charge (1) (2)	$ 0.29	$ 2,047.40
1	15022	Dump Bailer Operation Charge (1) (2)	$ 2,400.00	$ 2,400.00
6650	15071	Setting Service For Tubing And Casing Applications Depth Charge	$ 0.40	$ 2,660.00
1	15072	Setting Service For Tubing And Casing Applications Operation Charge	$ 2,600.00	$ 2,600.00
6650	15021	Dump Bailer Depth Charge (1) (2)	$ 0.29	$ 1,928.50
1	15022	Dump Bailer Operation Charge (1) (2)	$ 2,400.00	$ 2,400.00
			SUB TOTAL	$ 22,459.90
			DISCOUNT	$ (15,721.93)
			DISCOUNT	

EQUIPMENT, RENTALS, PERSONNEL, MILEAGE

1	10020	Environmental Charge	$ 550.00	$ 550.00
2		4.5 CAST IRON BRIDGE PLUG	$ 1,200.00	$ 2,400.00

EST. FIELD TOTAL $ 9,687.97

Sub total

OTHER

TOTAL CHARGES

TAXES

TOTAL CHARGES

INFORMATION

CASING	LB/FT	FROM	TO

FLUID SURFACE

PRESSURE ENDING

PIONEER MEASUREMENTS ARE FROM (MARK ONE):

KB GL PREV. LOG

PWS TD DRILLER

PLUG SIZE DEPTH

PACKER SIZE DEPTH

PERFORATIONS

INTERVALS	SPF	TOTAL#

TOTAL PERFORATIONS:

REMARKS: SET 4.5 CIBP @7060'

DUMPED TWO SACKS OF CEMENT ON CIBP @ 7060'

SET 4.5 CIBP @6650'

DUMPED TWO SACKS OF CEMENT ON CIBP @ 6650'

ON LOC.	7/19/2014 8:00	LEAVE LOC.	7/19/2014 10:00

TOTAL MAN HOURS: 2.00

AFE #:

WITNESSED BY: X

PIONEER WS: (SIGNATURE)

Original - Please pay from this invoice -Due 30 days from above date.

Pioneer Office Use: