2155

SUMMIT
SLICKLINE INC.

ENTERED

Phone: (970) 397-1380

Accounting
P.O. Box 279
LaSalle, CO 80645
Office: (970) 397-1808

Charge To	Invoice Address			
Kerr Mc Gee				
City	State	Zip	Well No.	Date
			HSR GOLDSMITH 11-31	12-31-15
Legal Description	Field	County	State	
		weld	Co	

SERVICE	AMOUNT
SLT	
RIH - W - 2" JUC	
NF @ 7205	
RIH - W - 1.75 LIB TD @ 7353	
RIH - W - VES gyro tool from 100' to 7100'	
making stops every 100'	
1 extra hour @ 200.00 hr	
Trax Dead	

Customer agrees to be bound by the terms and conditions set forth on the reverse side of this form. If account is not paid when due, customer shall be responsible for reasonable attorney's fees, interest and costs of collection until account is "fully paid."

AM
PM

Signature of Customer or Authorized Representative Date Time

SUBTOTAL	
TAX	
ESTIMATED TOTAL	

Prices Subject To Correction
by Billing Department

I certify that the above ordered services, equipment, materials and products have been received.

Signature of Customer Date

UNIT NUMBER	OPERATOR	Round Trip Miles	Time on Job
3	Shon	60	7:30 11:3
ASSISTANT	ASSISTANT	AFE/WO	
Johnny		889058	