

[illegible]

CASEHOLE SOLUTIONS

CASEHOLE SOLUTIONS																
G Casedhole Solutions		Rev.121316 A					CUSTOMER P. O. NUMBER				SERVICE ORDER F-3187		PAGE 1 of 1			
* Service charges include a daily per diem of \$30.00/employee and a daily catering charge (when provided by Casedhole Solutions) of \$25.00/employee.																
16 CASEHOLE SOLUTIONS, INC													DATE 07/28/2017			
You are hereby requested to perform or attempt to perform the following service(s) or furnish the following equipment:																
SERVICE(S) AND/OR EQUIPMENT REQUESTED																
CUSTOMER		COMPANY Kauffman Well Services														
FURNISHED		LEASE Walter Hunziker										WELL NUMBER 2				
LEASE/WELL		LEGAL & LOCATION 0														
INFORMATION		FIELD 0				PARISH/COUNTY Weld				STATE Colorado						
THE UNDERSIGNED, HEREINAFTER REFERRED TO AS CUSTOMER AGREES TO PAY YOU FOR THE ABOVE SPECIFIED SERVICE(S) (INCLUDING LEASED EQUIPMENT) AND ANY ADDITIONAL SERVICE(S) REQUESTED, AT THE FIELD OFFICE OF CASEHOLE SOLUTIONS, INC. IN ACCORDANCE WITH THE APPLICABLE PROVISIONS OF YOUR CURRENT PRICE SCHEDULE.																
IN CONSIDERATION OF THE PRICES AS ARE SET OUT IN YOUR CURRENT APPLICABLE PRICE SCHEDULE WE CHOOSE TO BE BOUND BY THE TERMS AND CONDITIONS SET OUT IN THE CURRENT PRICE SCHEDULE (ALSO PRINTED ON THE REVERSE SIDE HEREOF), INCLUDING THE ASSUMPTION BY US OF THE LIABILITIES AND RESPONSIBILITIES CONTAINED IN THE RESPONSIBILITIES HEREIN ASSUMED BY US.																
WHEN SIGNED BY AN AGENT ON BEHALF OF CUSTOMER, SAID AGENT REPRESENTS THAT HE HAS FULL AUTHORITY FROM HIS PRINCIPAL TO EXECUTE SAME, IN THE ABSENCE OF AUTHORITY, THE SIGNER AGREES THAT HE SHALL BE OBLIGATED HEREUNDER AS CUSTOMER.																
CUSTOMER NAME Kauffman Well Services																
INVOICE MAILING ADDRESS										CITY		STATE		ZIP CODE		
SIGNATURE OF CUSTOMER OR AUTHORIZED REPRESENTATIVE																
X Rick Ramos										Thank you for using Casedhole Solutions!!		Total runs, all pages		0		
THE ESTIMATED CHARGES AND DATA SHOWN ARE SUBJECT TO CORRECTION BY CASEHOLE SOLUTIONS, INC. ACCOUNTING																
UNIT NUMBER 92-3376		OPERATION TYPE:		WELL TYPE:		ROUND TRIP MILEAGE										
		TRIP:		HOISTING TYPE:												
WIRELINE DEPTH				MAX. WELLHEAD PRESSURE				PSI				BOTTOM HOLE PRESSURE: PSI				
DESC. NO.	PERF. INTERVAL	PLUG DEPTH	OPERATION			ITEM	QUAN.	UNIT PRICE	DISC	DISC. PRICE	AMOUNT		SERVICE	FIRST READING	LAST READING	FOOTAGE DEL.
1			N - Squeeze Gun - 1st Gun			each	1	994.18	0.000	994.2	994.18		Plug			
													Perf			
	4 Holes @ 282'															