

**CASED HOLE SOLUTIONS**



<b>Rev.042519 A</b>	CUSTOMER P. O. NUMBER	Ticket No. (SO) <b>F-4765</b>	PAGE <b>1 of 1</b>
* 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.			DATE <b>11/15/2019</b>
To CASED HOLE SOLUTIONS, INC 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	<b>KAUFFMAN WELL SERVICE INC</b>		
FURNISHED	LEASE	<b>UPRR 43 PAN AM I</b>	WELL NUMBER	<b>9</b>
LEASE/WELL	LEGAL & LOCATION	<b>0</b>		
INFORMATION	FIELD	<b>Wattenberg</b>	PARISH/COUNTY	<b>Weld</b>
			STATE	<b>CO</b>

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 CASED HOLE SOLUTIONS, INC. IN ACCORDANCE WITH THE APPLICABLE PROVISIONS OF YOUR CURRENT PRICE SCHEDULE.  
 IN CONSIDERATION OF THE PRICES AS 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 SERVICE INC**

INVOICE MAILING ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

SIGNATURE OF CUSTOMER OR AUTHORIZED REPRESENTATIVE  
**X** *Rich Ramos* Thank you for using Casedhole Solutions!! Total runs, all pages **4**

THE ESTIMATED CHARGES AND DATA SHOWN ARE SUBJECT TO CORRECTION BY CASED HOLE SOLUTIONS, INC. ACCOUNTING

UNIT NUMBER **200128** OPERATION TYPE: **DAYLIGHT** WELL TYPE: **WORKOVER** ROUND TRIP MILEAGE \_\_\_\_\_  
 TRIP: **SUBSEQUENT** HOISTING TYPE: **WORKOVER RIG**

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			B - Packoff	each	1	391	0.000	391	391.00	Plug			
2	6 SHOTS	2500	B - Squeeze Gun - 1st Gun	each	1	1270.8	0.000	1271	1270.75	Perf			
3		2450	B - Plug or Retainer - setting (3rd party)	each	1	2248.3	0.000	2248	2248.25				
4			B - Squeeze Gun - 1st Gun	each	1	1270.8	0.000	1271	1270.75				
5			B - Plug or Retainer - setting (3rd party)	each	1	2248.3	0.000	2248	2248.25				
6													
7													
8													
9													
10													

Runs for this job made in November were 4	STANDARD PRICING													
	TOTAL OF BOOK PRICE								7429.00					
	TOTAL DISCOUNT								0.00					
	TOTAL DISCOUNT PERCENTAGE								0.00%					
<b>ESTIMATED TOTAL CHARGE PAGE 1</b>								<b>\$7,429.00</b>	<b>NO</b>					

THE SERVICE(S) AND/OR EQUIPMENT COVERED BY THIS SERVICE ORDER HAVE BEEN PERFORMED OR RECEIVED AS SET FORTH ABOVE

SIGNATURE OF CUSTOMER OR AUTHORIZED REPRESENTATIVE **X** *Rich Ramos* RICK RAMOS LOGS RECEIVED AT WELL \_\_\_\_\_ CUST. INITIALS \_\_\_\_\_ SIGNATURE OF CASED HOLE SOLUTIONS ENGINEER *Robert Gardner*

SIZE	WEIGHT	TYPE	FROM	TO	PERM. DEPTH DATUM	GROUND LEVEL	ELEV.	ELEV K.B.
		Casing 1			LOG MEAS. FROM	WHICH IS	ABOVE PERM DATUM	D.F. G.L.
		Casing 2			Fluid Type	Fluid Weight	Fluid Level	REMARKS
		Tubing			lbs/gal	feet		District doing job: Fort Lupton, CO
		Liner						Line of Business:
		Drill Pipe			Bottom Hole Temperature	Degrees F		Type of Job:
CASED HOLE ENGINEER NAMES		WORK WITNESSED BY NAME		Class:		District job is in: Fort Lupton, CO		
Gardner, Robert Russell		RICK RAMOS		Crew 1		AFE#:		
				Crew 2		Engineer:		
				Crew 3		MSA#:		
				Crew 4				
				Crew 5				
				Crew 6				

**CASEDHOLE SOLUTIONS**



<b>Rev.042519 A</b>	CUSTOMER P. O. NUMBER	Ticket No. (SO) <b>F-6739</b>	PAGE <b>1 of 1</b>
* 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.			DATE <b>11/14/2019</b>
To CASEDHOLE SOLUTIONS, INC 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

API # 05-123-08879

CUSTOMER FURNISHED LEASE/WELL INFORMATION	COMPANY	<b>KAUFFMAN WELL SERVICE INC</b>		
	LEASE	<b>UPRR 43 PAN AM I</b>	WELL NUMBER	<b>9</b>
	LEGAL & LOCATION	<b>NESE S10 T1N R68W</b>		
	FIELD	<b>Wattenberg</b>	PARISH/COUNTY	<b>Weld</b>
		STATE	<b>CO</b>	

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 CASEDHOLE 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 <b>KAUFFMAN WELL SERVICE INC</b>	CITY	STATE	ZIP CODE
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SIGNATURE OF CUSTOMER OR AUTHORIZED REPRESENTATIVE <b>X Rick Ramos</b>	Thank you for using Casedhole Solutions!!	Total runs, all pages	<b>2</b>
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UNIT NUMBER <b>200032</b>	OPERATION TYPE: <b>DAYLIGHT</b>	WELL TYPE: <b>WORKOVER</b>	ROUND TRIP MILEAGE
	TRIP: <b>FIRST</b>	HOISTING TYPE: <b>WORKOVER RIG</b>	BOTTOM HOLE PRESSURE: <b>PSI</b>

Desc. NO.	PERF. INTERVAL	PLUG DEPTH	OPERATION	ITEM	QUAN.	UNIT PRICE	DISC.	DISC. PRICE	AMOUNT	SERVICE	FIRST READING	LAST READING	FOOTAGE DEL.	PSI			
														MAX. WELLHEAD PRESSURE			
1			B - Packoff	each	1	391	0.000	391	391.00	Plug							
2		4668'	B - Set & Supply 4 1/2 CIBP	each	1	2248.3	0.000	2248	2248.25	Perf							
3			B - Dump Bailer(2 SXs Cement)	per run	1	879.75	0.000	879.8	879.75								
4																	
5																	
6																	
7																	
8																	
9																	
10																	
11																	
12																	
13																	
14																	
15																	

Runs for this job <b>2</b>	STANDARD PRICING	TOTAL OF BOOK PRICE	<b>3519.00</b>
	Set CIBP in 4 1/2 @ 4668', 2 sx on BP	TOTAL DISCOUNT	<b>0.00</b>
		TOTAL DISCOUNT PERCENTAGE	<b>0.00%</b>
	<b>ESTIMATED TOTAL CHARGE PAGE 1</b>	<b>\$3,519.00</b>	<b>NO</b>

SIGNATURE OF CUSTOMER OR AUTHORIZED REPRESENTATIVE <b>X Rick Ramos</b> Rick Ramos	LOGS RECEIVED AT WELL	CUST. INITIALS	SIGNATURE OF CASEDHOLE SOLUTIONS ENGINEER <i>Scott Erb</i> Erb, Scott Travis
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SIZE	WEIGHT	CASING/TUBING RECORD	TYPE	FROM	TO	PERM. DEPTH DATUM	GROUND LEVEL	ELEV.	ELEV K.B.
4 1/2		Casing 1							
		Casing 2							
		Tubing							
		Liner							
		Drill Pipe							
Casedhole Engineer Names						WORK WITNESSED BY NAME			
Erb, Scott Travis						Rick Ramos			
Crew 1									
Crew 2									
Crew 3									
Crew 4									
Crew 5									
Crew 6									
						REMARKS			
						District doing job: Fort Lupton, CO			
						Line of Business: Workover			
						Type of Job: Vertical P and A			
						Class: Vert. Domestic			
						District job is in: Fort Lupton, CO			
						AFE#:			
						Engineer: Erb, Scott Travis			
						MSA#:			