

CASEDHOLE SOLUTIONS



Rev.032718 A	CUSTOMER P. O. NUMBER	ORDER NUMBER F-5430	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.			DATE 05/15/2019
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

RC

CUSTOMER	COMPANY	NOBLE ENERGY		
FURNISHED	LEASE	DPG	WELL NUMBER	F01-13
LEASE/WELL	LEGAL & LOCATION	SWSW,S.1,T5N,R.65W		
INFORMATION	FIELD	WATTENBERG	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 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 **NOBLE ENERGY**

INVOICE MAILING ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

SIGNATURE OF CUSTOMER OR AUTHORIZED REPRESENTATIVE
X Thank you for using Casedhole Solutions!! Total runs, all pages **1**

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

UNIT NUMBER **200054** OPERATION TYPE: **DAYLIGHT** WELL TYPE: **WORKOVER** ROUND TRIP MILEAGE _____

TRIP: **FIRST** HOISTING TYPE: **WORKOVER RIG**

Desc. NO.	PERF. INTERVAL	PLUG DEPTH	OPERATION	ITEM	QUAN.	MAX. WELLHEAD PRESSURE		BOTTOM HOLE PRESSURE:		SERVICE	FIRST READING	LAST READING	FOOTAGE DEL.
						PSI	PSI	PSI	PSI				
1			N - Crane Rental	well/day	1					Plug			
2			N - Full Lubricator 5K (Packoff)	well/day	1					Perf			
3	2498-2500'		N - Tubing Puncher	each	1								
4													
5													
6													
7													
8													
9													
10													

Runs for this job 1		STANDARD PRICING		TOTAL OF BOOK PRICE		TOTAL DISCOUNT		TOTAL DISCOUNT PERCENTAGE	
						0.00			
		ESTIMATED TOTAL CHARGE PAGE 1				NO			

Was catering provided by Casedhole Solutions?

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** **TYSON HAMACHER** LOGS RECEIVED AT WELL: _____ CUST. INITIALS: _____ SIGNATURE OF CASEDHOLE SOLUTIONS ENGINEER: **McKie, James Malcom**

SIZE	WEIGHT	TYPE	FROM	TO	PERM. DEPTH	DATUM	GROUND LEVEL	ELEV.	ELEV. K.B.
		Casing 1							
		Casing 2							
		Tubing							
		Liner							
		Drill Pipe							

CASEDHOLE ENGINEER NAMES		WORK WITNESSED BY NAME		REMARKS	
McKie, James Malcom	Crew 1	TYSON HAMACHER		District doing job: Fort Lupton, CO	
	Crew 2			Line of Business: Completions	
	Crew 3			Type of Job: Vertical Perf. and Logging	
	Crew 4			Class: Vert. Domestic	
	Crew 5			District job is in: Fort Lupton, CO	
	Crew 6			AF#: _____	
				Engineer: McKie, James Malcom	
				MSA#: _____	



JOB DATA SHEET

Company NOBLE ENERGY Well Name and No. DPG F01-13 Engineer ADAM KERR
 County WELD Date 9/13/2019 Ticket No. 3814-0225 Unit No. 3814
 District GREELEY CO 0928-120 Line Size 0 Line Length 0
 Job Time: 9:00 AM Shop Time: 7:00 AM Leave Shop: 8:20 AM Arrive Location: 8:35 AM
 Field Hrs. 1:00:00 Standby Hours: 0:00:00 Total Hours 1:35:00 Travel Time Hrs. 0:35:00
 Trip Miles 12 Leave Location: 11:20 AM Arrive Shop: 11:40 AM

Notice: Engineer to monitor for stray voltage prior to rig up: Wellhead volts: 0 Rig volts : 0

Were there any equipment or down hole failures? Yes No X If yes explain on Quality Control Analysis Form

Were there any hot shots required? Yes No X If yes explain on Quality Control Analysis Form

Were there any personnel problems? Yes No X If yes explain on Quality Control Analysis Form

Were there any accidents? Yes No X If yes explain on Quality Control Analysis Form

Were there any near misses? Yes No X If yes explain on Quality Control Analysis Form

Well Information

Casing Size 4.5" Liner Size Tubing Size 2 3/8" Drill Pipe Size
 Drill Collar Minimum I.D. Fluid Level FULL Deviation
 Max. Temp. 275* Max. Pressure

Run Data

RUN INFORMATION

*******REMARKS SECTION*****DESCRIBE RUN DETAILS IN FULL*******

1 Time In 9:45 AM Out 10:00 AM
 From SURFACE To 700'
 Service CUT TUBING

RIH WITH 1.88" JET CUTTER, CUT 2 3/8" TUBING @ 700'
 POOH

2 Time In 10:50 AM Out 11:05 AM
 From SURFACE To 678'
 Service CUT CASING

RIH WITH 3 5/8" JET CUTTER, CUT 4.5" CASING @ 678'
 POOH

3 Time In 12:00 AM Out 12:00 AM
 From 0 To 0
 Service 0

4 Time In 12:00 AM Out 12:00 AM
 From 0 To 0
 Service 0

5 Time In 12:00 AM Out 12:00 AM
 From 0 To 0
 Service 0

6 Time In Out 12:00 AM
 From To 0
 Service

7 Time In Out
 From To
 Service

8 Time In Out
 From To
 Service