



Bison Oil Well Cementing Inc.  
1738 Wynkoop St.  
Suite 102  
Denver, CO 80202  
303-296-3010

Bill To	Noble Energy Inc. Attn: Accounting 1625 Broadway Ste 2000 Denver, CO 80202
---------	---

Date	4/8/2012
Invoice #	11488

Invoice

Location	Well Name & No.	Terms	Job Type
Weld, CO.	Five Rivers K17-27	Net 30	Surface Pump

Item	Description	Qty	U/M	Rate	Amount
Pump surface	PUMP Charge-surface pipe	1		1,400.00	1,400.00
Discount 15%				-15.00%	-210.00
MILEAGE	Mileage charge	360		1.50	540.00
Discount 15%				-15.00%	-81.00
Data Acquisition ...	Data Acquisition Charge	1		225.00	225.00
Discount 15%				-15.00%	-33.75
BFN III Winter ...	Subtotal of Services				1,840.25
Discount 15%				-15.00%	-276.04
KCL Mud Flush	(BHS 117)	4	qt	7.50	30.00T
Discount 15%				-15.00%	-4.50
Dye - 4880	Dye (Hot Pink 4880)	10	oz	15.00	150.00T
Discount 15%				-15.00%	-22.50
Sugar	Sugar	10	lb	2.00	20.00T
Discount 15%				-15.00%	-3.00
Subtotal of Materials					4,110.17

Please Remit Payment To:

Bison Oil Well Cementing, Inc.  
P.O. Box 29671  
Thornton, CO 80229

Subtotal	\$5,950.42
Sales Tax (2.9%)	\$119.19
Total	\$6,069.61
Balance Due	\$6,069.61

# BISON OIL WELL CEMENTING, INC.



1738 Wynkoop St., Ste. 102  
 Denver, Colorado 80202  
 Phone: 303-296-3010  
 Fax: 303-298-8143  
 E-mail: bisonoil@gwwestoffice.net

## SERVICE INVOICE

№ 11488

WELL NO. AND FARM		Five Rivers K17-27	
COUNTY	WELL LOCATION	SEC.	CHARGE TO
weld	TWP. 41N	8	Noble
STATE	RANGE 66W		
DATE	CONTRACTOR		
4-8-12	Zinsign 136		

DELIVERED TO	SHIPPED VIA	TYPE AND PURPOSE OF JOB	WELL TYPE
4/6-29	3103 - 3203	Surface Pipe	6x5
LOCATION	LOCATION	LOCATION	CODE
1 Shop	2 46-29	3 Shop	
CODE	CODE	CODE	CODE

PRICE REFERENCE	DESCRIPTION	UNITS	QTY.	MEAS.	UNIT PRICE	AMOUNT
-----------------	-------------	-------	------	-------	------------	--------

Ring Charge	1	each	1400.00		1400.00	00
35' N III 3% BCL 4-1, 25 lbs per SK BSLT-1	254	SKS	1825		4635.50	50
BCLT-1	4	each	75.00		30.00	00
Pyc	10	each	15.00		150.00	00
1/2 mile large 1/2 mile per mile in hand trip	3	each	180.00		540.00	00
Ditch fee	1	each	225.00		225.00	00
Sugar	10	lbs	2.00		20.00	00

DRILLING

RIG NO. F559H136

WELL NAME NO. Five Rivers K17-27

PROJECT NO. 129184

TASK NO. 129184

ACTG. CODE 129184

DOLLAR TOTAL BEING APPROVED 1000.00

DATE 4-8-12

INITIALS APPROVAL [Signature]

2ND LEVEL APPROVAL [Signature]

MAIL TO: NOBLE ENERGY INC.  
 1625 BROADWAY  
 SUITE 2700  
 DENVER, CO 80202

NO INVOICE WILL BE PAID W/O ALL SIGNED FIELD TICKETS

### TAX REFERENCES

SUB TOTAL 7000.50

TAX 2.9% 119.19

TOTAL 7119.69

"TAXES WILL BE ADDED AT CORPORATE OFFICE"

SUBJECT TO CORRECTION

Bison Oil Well Cementing, Inc. Representative

Customer or His Agent

Customers hereby acknowledge and specifically agree to the terms and conditions on this work order, including, without limitation, the provisions on the reverse side hereof which include the release and indemnity.



# BISON OIL WELL CEMENTING, INC.



1738 Wynkoop St., Ste. 102  
 Denver, Colorado 80202  
 Phone: 303-296-3010  
 Fax: 303-298-8143  
 E-mail: bisonoil1@qwestoffice.net

## TREATMENT REPORT

DATE	4-8-12	WELL NAME	Five Rivers R. 17-27	SECTION	8	TWP	4N	RGE	66W	COUNTY	Weld	FORMATION	
------	--------	-----------	----------------------	---------	---	-----	----	-----	-----	--------	------	-----------	--

CHARGE TO	Acble	OWNER	
MAILING ADDRESS		OPERATOR	Acble
CITY		CONTRACTOR	Engsig 136
STATE ZIP CODE		DISTANCE TO LOCATION	
TIME ARRIVED ON LOCATION	5:45 am	TIME LEFT LOCATION	10:15 am

PERFORATIONS		THEORETICAL	INSTRUCTED
TUBING SIZE	12 1/4		
TUBING DEPTH	703		
SHOTS/FT			
TUBING WEIGHT	PTD 649		
CASING SIZE	8 5/8		
TUBING CONDITION			
CASING DEPTH	693		
CASING WEIGHT	2415		
PACKER DEPTH			
CASING CONDITION	Good		

BREAKDOWN or CIRCULATING	psi	AVERAGE	psi	ISIP	psi	ACID BREAKDOWN	psi	MINIMUM BPM	psi	FINAL BPM	psi	BREAKDOWN BPM	psi
BREAKDOWN or CIRCULATING	psi	AVERAGE	psi	ISIP	psi	ACID BREAKDOWN	psi	MINIMUM BPM	psi	FINAL BPM	psi	BREAKDOWN BPM	psi
ACID STIMULATION	psi	ISIP	psi	ACID STIMULATION	psi	ACID STIMULATION	psi	MAXIMUM BPM	psi	MAXIMUM BPM	psi	MAXIMUM BPM	psi
ACID SPOTTING	psi	ISIP	psi	ACID SPOTTING	psi	ACID SPOTTING	psi	AVERAGE BPM	psi	AVERAGE BPM	psi	AVERAGE BPM	psi
MAXIMUM	psi	15 MIN SIP	psi	MAXIMUM	psi	15 MIN SIP	psi	MAXIMUM	psi	15 MIN SIP	psi	MAXIMUM	psi
MINIMUM	psi	15 MIN SIP	psi	MINIMUM	psi	15 MIN SIP	psi	MINIMUM	psi	15 MIN SIP	psi	MINIMUM	psi
OTHER				OTHER				OTHER				OTHER	

INSTRUCTIONS PRIOR TO JOB: Rig up, safety meeting, BSL test, Per cement C/C 4035 KCL H2O 2nd 10-12% mix, Pump 2585 Ks cement at 3000 excess at 127 yd of 152 lbs or until cement stops, Release Plug, Disp 413 BBLs 1420 Bump Plug at 150 PSI or 1.5 FT PSI, wait 5 min, Release PSI, wash up, Rig down, Arrived w/ 750 SLS cement 4 gal KCL 160 Dye 67.4 BBLs slurry 1120 for OK

JOB SUMMARY: Description of Job Events: Safety meeting, 8:42 am C/C 9:00 am cement 9:07 am slurry 9:19 am Pump Plug 9:21 am Displace 9:21 am 10 BBLs at 6.0 BBLs/min 9:23 am 300psi 20 BBLs at 6.0 BBLs/min 9:25 am 450psi 30 BBLs at 6.0 BBLs/min 9:26 am 530psi 40 BBLs at 1.0 BBLs/min 9:28 am 320psi 41.3 BBLs at 1.0 BBLs/min 9:29 am 320psi Bump Plug 9:29 am 630psi

Signature: John M. Taylor  
 TITLE: Co. Manager  
 DATE: 4-8-12  
 AUTHORIZATION TO PROCEED  
 LFW/4965 Ks cement 3 gal KCL 60 Dye  
 BLS Back 7

Customers hereby acknowledge and specifically agree to the terms and conditions on this work order, including, without limitation, the provisions on the reverse side hereof which include the release and indemnity.

Bison Oil Well Cementing, Inc  
1738 Wynkoop St., Ste. 102  
Denver, CO 80202  
303-296-3010  
www.BisonOilWell.com



### Cementing Customer Satisfaction Survey

Service Date	4-8-12
Invoice Amount	
Well Name	Five Rivers K
Well Location	46-29
County	Weld
SEC/TWP/RNG	8 41N 66W
State	CO
Supervisor Name	Kirk Kelly
Employee Name	
Exposure Hours (Per Employee)	4.5
Invoice Number	11488
Well Permit Number	665
Well Type	
Well Number	17-27
Lease	
Job Type	Shut-In Pipe
Company Name	Acute
Customer Representative	John Taylor
Customer Phone Number	
Total Exposure Hours	
Did we encounter any problems on this job? Yes/No	No

### Rating/Description

- 5 - Superior Performance ( Established new quality / performance standards )
- 4 - Exceeded Expectations ( Provided more than what was required / expected )
- 3 - Met Expectations ( Did what was expected )
- 2 - Below Expectations ( Job problems / failures occurred [ \* Recovery made ] )
- 1 - Poor Performance ( Job problems / failures occurred [ \* Some recovery made ] )
- \* Recovery: resolved issue(s) on jobsite in a timely and professional manner

### RATING / CATEGORY

Personnel -	4
Equipment -	4
Job Design -	4
Product / Material -	4
Health & Safety -	5
Environmental -	5
Timeliness -	5
Condition / Appearance -	5
Communication -	5
Improvement -	

### CUSTOMER SATISFACTION RATING

Did our personnel perform to your satisfaction?	Yes/No
Did our equipment perform to your satisfaction?	Yes/No
Did we perform the job to the agreed upon design?	Yes/No
Did our products and materials perform as you expected?	Yes/No
Did we perform in a safe and careful manner ( Pre / post mtgs, PPE, TSMR, etc.. ) ?	Yes/No
Did we perform in an environmentally sound manner ( Spills, leaks, cleanup, etc.. ) ?	Yes/No
Was job performed as scheduled (On time to site, accessible to customer, completed when expected)?	Yes/No
Did the equipment condition and appearance meet your expectation?	Yes/No
How well did our personnel communicate during mobilization, rig up, and job execution?	Yes/No
What can we do to improve our service?	

### Please Circle:

Yes / No	Did an accident or injury occur?
Yes / No	Did an injury requiring medical treatment occur?
Yes / No	Did a first-aid injury occur?
Yes / No	Did a vehicle accident occur?
Yes / No	Was a post-job safety meeting held?

### Additional Comments:

Yes / No	Was a pre-job safety meeting held?
Yes / No	Was a job safety analysis completed?
Yes / No	Were emergency services discussed?
Yes / No	Did environmental incident occur?
Yes / No	Did any near misses occur?

### Please Circle:

THE INFORMATION HEREIN IS CORRECT -

Customer Representative's Signature

Any additional Customer Comments or HSE concerns should be described on the back of this form

Date

4-8-12





1738 Wynkoop St., Ste. 102  
Denver, Colorado 80202  
Phone: 303-296-3010  
Fax: 303-298-8143  
E-mail: bisonoil1@qwestoffice.net

## B.O.C. Tailgate Safety Meeting Report

INVOICE 11488

Date 4-8-12 Time 8:12 AM ☒ PM Meeting Facilitator K. K. Kallala  
Facility Name and Location Fox River K-17-27 46-29 Work to be Undertaken Surface Pipe  
Nearest Emergency Medical Service Number (Other than 911) Gracie  
MINIMUM STANDARDS REQUIREMENT VERIFICATION (must be verified for all members of a work party)  
☒ Hard Hat ☒ Safety Glasses w/ Sideshields ☒ Safety Toed Footwear ☒ Personal Methane Monitor ☒ Verify Safety Training  
☒ Flame Resistant Clothing ☒ New on Job Review ☒ Onsite Orientation ☒ Other (specify)

### HAZARD IDENTIFICATION AND SAFETY BRIEFING DISCUSSION (Check and Discuss all Relevant Hazards)

- ☒ Job Safety Analysis Reviewed (if applicable)
- ☒ NORM or Other Radiation
- ☒ Overhead work/suspended Loads/Chains/Slings
- ☒ Trapped Pressure
- ☒ Flammable/Combustible/Explosives
- ☒ Pinch Points/Moving/Rotating Equipment
- ☒ Waste Handling/Disposal
- ☒ Excavation Collapse
- ☒ Overhead Power Lines
- ☒ Flying Particles
- ☒ Spills/Releases
- ☒ Overexertion/Heavy Lifting
- ☒ Electrical Current
- ☒ Extreme Heat/Cold
- ☒ Slips/Trips/Falls
- ☒ Falling from Heights
- ☒ Positions of People
- ☒ Hazardous Substance
- ☒ Hazardous Atmosphere
- ☒ Walking/Working Surfaces
- ☒ Noise Levels
- ☒ Sharp Edges
- ☒ Insects/Snakes/etc.
- ☒ MSDS's Reviewed
- ☒ Walk Around Site Assessment

### ADDITIONAL PPE REQUIREMENT (based on the job specific hazards, check all that apply)

- ☒ Eyes/Face
- ☒ Tinted Lenses
- ☒ Goggles
- ☒ Hearing Protection
- ☒ Hands
- ☒ Chemical Resistant Gloves
- ☒ Heat Resistant Gloves
- ☒ Cotton or Leather Gloves
- ☒ Dielectric Gloves
- ☒ Feet
- ☒ Rubber Boots
- ☒ Over Boots
- ☒ Dielectric Boots
- ☒ Other
- ☒ Air Purifying Respirator
- ☒ Supplied Air Respirator
- ☒ Personal H2S Monitor (if in sour area)
- ☒ Chemical Resistant Clothing
- ☒ Personal Fall Arrest Systems

### EMERGENCY PREPARATIONS

- ☒ Muster Areas
- ☒ Communication Methods
- ☒ Means of Egress
- ☒ Emergency Equipment

### Additional Topics Covered:

Attendees (Signature)/Company  
Attendees (Signature)/Company

Other Considerations and Field Notes: