



BISON

Bison Oil Well Cementing Inc.
 1547 Gaylord Street
 Denver, CO 80206
 303-296-3010

Invoice

Date	Invoice #
10/16/2013	12846

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

Location	Well Name & No.	Terms	Job Type		
Weld CO	<i>Rahn</i> Rhen State LD09-65-1HN	Net 30	Surface Pipe		
Item	Description	Qty	U/M	Rate	Amount
Pump surface	PUMP Charge-surface pipe	1			
Discount 15%	Discount 15%				
MILEAGE	Mileage charge	380			
Discount 15%	Discount 15%				
Data Acquisition ...	Data Acquisition Charge	1			
Discount 15%	Discount 15%				
	Subtotal of Services				
N-Gel-12	Lead 12lb	230	Sack		
Discount 15%	Discount 15%				
BG-Lite	Tail 13.8 lb/gal 50/50 Poz	230	Sack		
Discount 15%	Discount 15%				
Dye - 4880	Dye (Hot Pink 4880)	16	oz		
Discount 15%	Discount 15%				
	Subtotal of Materials				
		+ 100			
			Sacks - tail		

Please Remit Payment To:

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

Subtotal	
Sales Tax (2.9%)	
Total	
Balance Due	

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



№ 12846

WELL NO. AND FARM <u>Rhon State LD09-65-1HN</u>		COUNTY <u>Weld</u>	STATE <u>CO</u>	DATE <u>Oct 16 2013</u>	
CHARGE TO <u>Noble Energy</u>		WELL LOCATION SEC. _____ TWP. _____ RANGE _____		CONTRACTOR	
		DELIVERED TO <u>New Ramer</u>		LOCATION 1	CODE
		SHIPPED VIA <u>3106 / 2017 / 111</u>		LOCATION 2	CODE
		TYPE AND PURPOSE OF JOB <u>Lead + Tail Surface</u>		LOCATION 3	CODE
				WELL TYPE	CODE

PRICE REFERENCE	DESCRIPTION	UNITS		UNIT PRICE	AMOUNT
		QTY.	MEAS.		
	Pump Charge	1	ea		
	Truck mileage 4 ⁰⁰ mile 60 mile min round trip	2	ea		
	Pickup mileage 1 ⁵⁰ mile 60 mile min round trip	1	ea		
	Cement.	460	SKS		
	Dye	16	oz		
	Torn Inspection	1	ea		
	Data Acquisition	1	ea		

WIG NAME & NUMBER:
NAP326

WALL NAME & NUMBER:
ROHN STATE L609-651 NAP

AFE NUMBER:
139970

TASK (DRI, COMP, W/O, PMA):
DRI

EXP TYPE:
1.1

ACTG CODE:
0017

DOLLAR TOTAL BEING APPOD:
13,321.00

FIELD APPROVAL: *[Signature]* DATE: 10/19/13

Total Loaded Weights TO APPROXIMATE

Ton

Miles

If this account is not paid within 30 days of invoice date a FINANCE CHARGE will be made. Computed at a single monthly rate of 1% which is equal to an ANNUAL PERCENTAGE RATE OF 18%.

"TAXES WILL BE ADDED AT CORPORATE OFFICE"

TOTAL

SUBJECT TO CORRECTION

Customer or His Agent

Brad Kasim S.

Bison Oil Well Cementing, Inc. Representative

Customers hereby acknowledges and specifically agrees 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.

1547 Gaylord Street
Denver, Colorado 80206
Phone: 303-296-3010
Fax: 303-298-8143
E-mail: bisonoil1@qwestoffice.net



INVOICE #
LOCATION
FOREMAN

12846
New Raner
Brad Kosinski

TREATMENT REPORT

DATE	WELL NAME	SECTION	TWP	RGE	COUNTY
Oct 16 2013	Rhen State LD09-65-1HN				Weld.
BILL TO	OWNER	CONSULTANT			
Noble Energy		Shane Heard			
MAILING ADDRESS	RIG NAME & NUMBER				
	H&P 326				
	DISTANCE TO LOCATION	UNITS ON LOCTION			
	62	310614017/111			
CITY	TIME REQUESTED	TIME ARRIVED ON LOCATION			
	5:30	6:00			
STATE, ZIP	TIME LEFT LOCATION				

WELL DATA

Cement Makeup

HOLE SIZE	TUBING SIZE	PERFORATIONS	Cement Blend			
12 7/8 13 3/4			Lead N-Gel-12			
			Tail Bq-Lite			
TOTAL DEPTH	TUBING DEPTH	SHOTS/FT	Cement - Specs	Yield	Water Requirements	
1299			13.1	1.69	8.64	
			15.2	1.27	5.89	
CASING SIZE	TUBING WEIGHT	OPEN HOLE	Annulus Factor	Capacity Factor		
9 5/8			3131	0773		
CASING DEPTH	TUBING CONDITION	TREATMENT VIA	TYPE OF TREATMENT			
1289			<input type="checkbox"/> Surface Pipe <input checked="" type="checkbox"/> Production <input type="checkbox"/> Squeeze <input type="checkbox"/> MISC Pump <input type="checkbox"/> P&A			
CASING WEIGHT	PACKER DEPTH					
36						
CASING CONDITION	Good					
Max Rate	5					
Max Pressure	2500					

HYD HHP = RATE X PRESSURE / 40.8

% Excess
BBL to Pit

DESCRIPTION OF JOB EVENTS

MIRU Safety meeting presure test lines to 1000psi release presure pump
bbls ahead then m+p 4100sk of lead then m+p 1000sk of tail
then drop plug then dis 96 bbls of water then rigdown & clean up.
460

X Authorization To Proceed

W.S.S. Title

X Oct 16 2013 Date

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INVOICE #
LOCATION
FOREMAN

Treatment Report Page 2

12846	New Ranger	Brook Kasinski
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DESCRIPTION OF JOB EVENTS

Safety Meeting MIRU CIRCULATE Drop Plug 3:38	Displace 1			Displace 2			Displace 3			Displace 4			Displace 5		
	BBLs	Time	PSI	BBLs	Time	PSI	BBLs	Time	PSI	BBLs	Time	PSI	BBLs	Time	PSI
	0	338	50	0			0			0			0		
	10	340	50	10			10			10			10		
	20	343	100	20			20			20			20		
	30	345	100	30			30			30			30		
	40	348	150	40			40			40			40		
	50	350	170	50			50			50			50		
M & P	60	354	220	60			60			60			60		
Time	70	358	280	70			70			70			70		
255	80	402	320	80			80			80			80		
	90	416	800	90			90			90			90		
	100			100			100			100			100		
	110			110			110			110			110		
	120			120			120			120			120		
	130			130			130			130			130		
	140			140			140			140			140		
	150			150			150			150			150		

Notes:

MIRU, Safety meeting pressure test lines to 100psi, then release pressure then pump 50 bbls of water ahead, then MxP 460 sks of lead then 100 sks of tail then drop plug then cl's 96 bbls of water then rig down cleanup

X W.S.S.

Date X Oct + 16 2013

Work Performed



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 Oct 16 2013 Invoice Number 12846
Invoice Amount 13,321.00 Well Permit Number HFF 139470
Well Name PhenStat 1D09-65-1HN Well Type Gas + Oil
Well Location New Pamer Well Number 1D09-65-1HN
County Weld Lease _____
SEC/TWP/RNG _____ Job Type Lead + Tail
State CO Company Name Noble
Supervisor Name Brad Kosinski Customer Representative _____
Customer Phone Number _____
Employee Name _____ Exposure Hours (Per Employee) _____
Brad 11
Dario 11
Jairo 11
Total Exposure Hours 33 Did we encounter any problems on this job? Yes No

To Be Completed By Customer

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

Opportunity

- Best Practices
- Potential Best Practice
- Prevention/Improvement

RATING / CATEGORY

- | | |
|-----------------------------------|--|
| <u>4</u> Personnel - | CUSTOMER SATISFACTION RATING |
| <u>4</u> Equipment - | Did our personnel perform to your satisfaction ? |
| <u>4</u> Job Design - | Did our equipment perform to your satisfaction ? |
| <u>4</u> Product / Material - | Did we perform the job to the agreed upon design ? |
| <u>4</u> Health & Safety - | Did our products and materials perform as you expected ? |
| <u>4</u> Environmental - | Did we perform in a safe and careful manner (Pre / post mtgs, PPE, TSMR, etc..) ? |
| <u>4</u> Timeliness - | Did we perform in an environmentally sound manner (Spills, leaks, cleanup, etc..) ? |
| <u>4</u> Condition / Appearance - | Was job performed as scheduled (On time to site, accessible to customer, completed when expected)? |
| <u>5</u> Communication - | Did the equipment condition and appearance meet your expectation? |
| <u>5</u> Improvement - | How well did our personnel communicate during mobilization, rig up, and job execution? |
| | 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:

Please Circle:

- 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?

THE INFORMATION HEREIN IS CORRECT -

Customer Representative's Signature

Oct 16 2013
Date

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