







# NABORS

FIELD TICKET No.

- 28698

PLEASE REMIT TO:  
NABORS COMPLETION & PRODUCTION SERVICES CO.  
P.O. BOX 975682  
DALLAS, TX 75397-5682  
435-725-5344

DELIVERED FROM \_\_\_\_\_

DATE 9-19-15

INVOICE NO.	P.O. NO.	AFE NO.
CUSTOMER NO.	LEASE <u>State 16-6</u>	WELL NO.
CUSTOMER <u>Synergy</u>	FIELD <u>Wattenberg</u> STATE <u>Colo</u>	COUNTY <u>Weid</u>
ADDRESS	LOCATION <u>44+17</u>	
CITY	CASING SIZE & WT. <u>2 7/8 6.5#</u>	TBG. SIZE
STATE ZIP	TYPE OF JOB <u>P+A</u>	

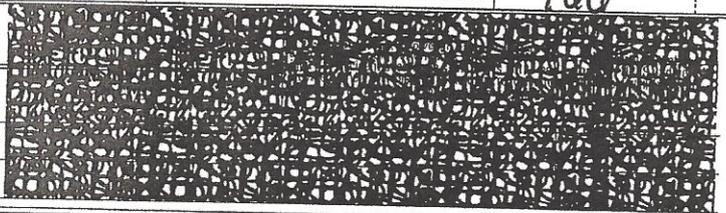
ORDERED BY \_\_\_\_\_ TITLE \_\_\_\_\_ SERVICE SUPP. K.G.

PART NO.	DESCRIPTION	REV. CODE	QTY.	UNIT PRICE	AMOUNT
<u>70-210-1111</u>	<u>1" 1/16 Sinker Bar Run</u>		<u>1</u>		<u>644</u>
<u>75-810-1111</u>	<u>Pack off</u>		<u>1</u>		<u>322-</u>
	<u>Run sinker bar to 4062'</u>				

CALLED OUT _____ Time _____ Date	ON LOCATION <u>9:00</u> Time <u>9-19</u> Date	COMPLETED <u>10:30</u> Time <u>9-19</u> Date	TOTAL SERVICE & MATERIALS DISCOUNT TAX TOTAL CHARGES <u>966-</u>
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WITH MY INITIALS, I CONFIRM THAT THE TIME SHOWN IN THE "HOURS" COLUMN, ACCURATELY REFLECTS MY COMPENSABLE TIME.

Employee Name (Print)	Hours	Initials
<u>Herrick, Milton</u>		



CUSTOMER AGREES to pay Nabors Completion & Production Services Co. (the "Company") on a net 30 day basis from date of invoice. If Customer disputes any item invoiced, Customer shall, within 20 days after receipt of invoice, notify the Company of the item(s) disputed, specifying the reason(s) therefor; payment of the disputed item(s) may be withheld until settlement of dispute, but payment of undisputed portion of invoice shall be made without delay. All payments shall be made at the address shown on the reverse side of this document. In the absence of a separate written contract, CUSTOMER REPRESENTATIVE REPRESENTS AND WARRANTS THAT HE/SHE IS AUTHORIZED TO ENTER INTO THIS AGREEMENT ON BEHALF OF CUSTOMER AND ACCEPTS ALL TERMS AND CONDITIONS AS PRINTED ON THE REVERSE SIDE OF THIS DOCUMENT (WHICH INCLUDES INDEMNITY LANGUAGE THAT ALLOCATES RISKS RELATED TO THE ABOVE DESCRIBED SERVICES). Pricing and extensions, if shown above, are subject to verification and correction at time of invoicing.

X [Signature]  
NABORS COMPLETION & PRODUCTION SERVICES CO.

X \_\_\_\_\_  
CUSTOMER REPRESENTATIVE



Casedhole Solutions

Please Remit To:  
P.O. Box 267  
Weatherford, OK 73096  
Phone: (580) 772-3100  
Fax: (580) 772-3105

www.casedhole-solutions.com

FIELD TICKET No.

32625

RVICES CO.

DELIVERED FROM

DATE 9-21-15

INVOICE NO.	P.O. NO.	AFE NO.
CUSTOMER NO.	LEASE State 16-6	WELL NO.
CUSTOMER Synergy	FIELD Wallenberg	STATE Colo
ADDRESS	LOCATION 44+17	COUNTY Weld
CITY	CASING SIZE & WT. 2 7/8 6.5#	TBG. SIZE
STATE	ZIP	TYPE OF JOB

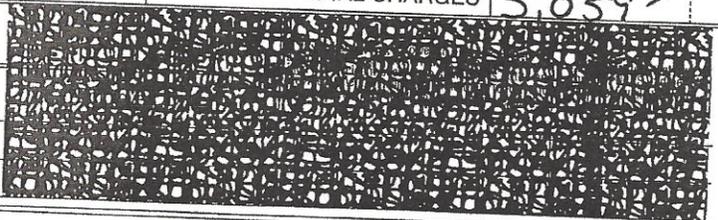
ORDERED BY		TITLE			SERVICE SUPV. K.G.	
PART NO.	DESCRIPTION	REV. CODE	QTY.	UNIT PRICE	AMOUNT	
75-810-1111	Pack o'PP		1		322'	
75-810-1111	Flange		1		1021'	
70-252-1111	2.063 Jet Cutter		1		2,576'	
	Cut @ 5000'					

CALLED OUT _____ Time _____ Date	ON LOCATION 10:30 Time 9-21 Date	COMPLETED 11:30 Time 9-21 Date	TOTAL SERVICE & MATERIALS DISCOUNT TAX	TOTAL CHARGES 3,059'
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\*ACCIDENT REPORT MUST BE ATTACHED WHEN NOT SIGNED

WITH MY INITIALS, I CONFIRM THAT THE TIME SHOWN IN THE "HOURS" COLUMN, ACCURATELY REFLECTS MY COMPENSABLE TIME.

Employee Name (Print)	Hours	Initials
Hernandez, Milton		



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X   
NABORS COMPLETION & PRODUCTION SERVICES CO.

X   
CUSTOMER REPRESENTATIVE