



**DOWELL**

SPECIAL HANDLING  
DIVISION OF DOW CHEMICAL U.S.A.  
AN OPERATING UNIT OF THE DOW CHEMICAL COMPANY

JUL 10 1981

OILFIELD SERVICES  
MINING SERV  
INDUSTRIAL



00575418

DOWELL SERVICE ORDER,  
RECEIPT, AND INVOICE NO.

CORRESPONDENCE:  
P.O. BOX 4378  
HOUSTON, TEXAS 77210

REMITTANCE:  
P.O. BOX 100344  
HOUSTON, TEXAS 77212

DOWELL SERVICE LOCATION NA

03-12-3779

CUSTOMER NUMBER  
6029631

CUSTOMER P.O. NUMBER

Ulysses Ks

03-12

CUSTOMER'S  
NAME

ADDRESS

CITY, STATE AND  
ZIP CODE

Texas Oil & Gas  
Suite 1800  
1660 Lincoln St  
Denver Colo 80264

RECEIVED  
AUG 5 1981

TYPE SERVICE CODE  
295

BUSINESS CODES

WORKOVER  
NEW WELL  
OTHER

☐ W  
☒ N  
☐

API OR IC NUMBER  
06153

ARRIVE LOCATION				
MO.	DAY	YR.	TIME	
7	9	81	1000	

SERVICE ORDER I authorize work to begin per service instructions in accordance with terms and conditions printed on the reverse side of this form and represent that I have authority to accept and sign this order.

CUSTOMER AUTHORIZED AGENT

JOB COMPLETION				
MO.	DAY	YR.	TIME	
7	9	81	1730	

SERVICE RECEIPT I certify that the materials and services listed were received and all services performed in a workmanlike manner.

CUSTOMER AUTHORIZED AGENT

STATE Colo	CODE 05	COUNTY / PARISH Prowers	CODE 099	CITY
WELL NAME AND NUMBER / JOB SITE Hope #1		LOCATION AND POOL / PLANT ADDRESS Sec 16-258-42W		

SHIPPED VIA  
Dowell

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
59200-001	Mileage	mi.	45	2.22	99.90
49100-000	Service Charge	ft <sup>3</sup>	70	.87	60.90
49102-000	Hauling 3.3 ton 45 mi.	t/m	148	.78	115.44
48056-005	Combo Pumper	ea.	1	1330.00	1330.00
40015-000	Class H	sk	70	5.95	416.50

SERVICE RECEIPT

Hope #1  
EJ Dunderhall

SUB TOTAL

\$ 2022.74

LICENSE/REIMBURSEMENT FEE

LICENSE/REIMBURSEMENT FEE

REMARKS:

Mileage equalized from Lamar Colo.

STATE M---C 3 % TAX ON \$ 592.84  
COUNTY % TAX ON \$  
CITY % TAX ON \$

DE 7/28/81

DOWELL REPRESENTATIVE

TOTAL \$

2040.53

OP CD	CD	CD	CD	MAJ	MIN	BIL CLS	PERC NUMBER	COST CENTER	WELL OR STA.	AFE NUMBER	A.T.R.	DESCRIPTION/COMMENT	AMOUNT
1306				114246	23				001	810003	181		2040.53

CO. CD.	VOUCHER			VENDOR NUMBER	INVOICE NUMBER	INVOICE DATE			DUE/PAID DATE			CHECK NO. (IF PAID)	INVOICE AMOUNT
	NO.	SUB NO.	MO.			MO.	DAY	YR.	MO.	DAY	YR.		
						03.12.3779	07.10.81						

REC. I.D.  
0,0,1

CODED BY

APPROVED BY

BEST IMAGE  
AVAILABLE