

MI-21301 (08/10/2007)

Oil and Gas Field Services

OMB No. 0607-0939: Approval Expires 12/31/2008

DUE DATE FEBRUARY 12, 2008 Mail your completed form to: U.S. CENSUS BUREAU 1201 East 10th Street Jeffersonville, IN 47134-0001	MI-21301
 Please read the accompanying information sheet(s) before answering the questions. Need help or have questions about filling out this form? Visit www.census.gov/econhelp Call 1-800-233-6136, between 8:00 a.m. and 6:00 p.m., Eastern time, Monday through Friday. - OR - Write to the address above. Include your 11-digit Census File Number (CFN) printed in the mailing address. 	(Please correct any errors in this mailing address.)
that receive this question law, YOUR CENSUS RE	COUIRED BY LAW. Title 13, United States Code, requires businesses and other organizations naire to answer the questions and return the report to the U.S. Census Bureau. By the same PORT IS CONFIDENTIAL. It may be seen only by persons sworn to uphold the confidentiality ation and may be used only for statistical purposes. Further, copies retained in respondents' gal process.
service establishr operators of oil an a fee or contract b Oil and gas field se in the United State	for this form is an oil and gas field service establishment. An oil and gas field nent represents all nationwide oil and gas field support activities performed for d gas field properties under your current Employer Identification Number (EIN) on
 EMPLOYER IDENTIFICAT Is the Employer Identificates establishment on its lates 0021 Yes - Go to 3 Not Applicable. 	ION NUMBER Intion Number (EIN) shown in the mailing address the same as the one used for this st 2007 Internal Revenue Service Form 941, Employer's Quarterly Federal Tax Return?

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orm MI-21301 (08/10/2007)				Page 3
If not shown, please enter your 11-digit Census File Number (CFN) from the mailing address.				
EMPLOYMENT AND PAYROLL				
Include:				
 Full- and part-time employees working at this establishment whose payroll was re Revenue Service Form 941, Employer's Quarterly Federal Tax Return, and filed un Identification Number (EIN) shown in the mailing address or corrected in 1. 	ported der the	on Inter Employ	rnal ver	
Exclude:				
 Full- or part-time leased employees whose payroll was filed under an employee le Temporary staffing obtained from a staffing service. Subcontractors and their employees. 	easing o	company	∕'s EIN.	
For further clarification, see information sheet(s).				
A. Number of employees		Mark "X"	20	007
		if None	Nur	mber
 Number of production, development, and exploration workers for pay period including March 12 	0325			
2. Number of other employees for pay period including March 12	0336			
3. TOTAL (Add lines A1 and A2)	0320			
	Mark "X		2007	
B. Payroll before deductions (<i>Exclude employer's cost for fringe benefits.</i>)	if None		Mil.	Thou.
1. Annual payroll				
a. Production, development, and exploration workers				
b. All other employees				
c. TOTAL (Add lines B1a and B1b)				
2. First quarter payroll (January-March, 2007)			1 1	
		Mark "X"		007
		if None		ours Iou.
C. Number of hours worked by production, development, and exploration workers (Annual hours worked by production, development, and exploration		_		
workers reported on line A1.)	0200			
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D. Employer's cost for fringe benefits - Employer's cost for legally required	Mark "X"		2007	
programs and programs not required by law.	if None	\$ Bil.	Mil.	Thou.
1. Health insurance - Insurance premiums on hospitals, medical plans, and single service plans such as dental, vision, and prescription drug plans. Include premium equivalents for self-insured plans and fees paid to third party administrators (TPAs). Do not include employee contributions 033	33			
2. Pension plans				
 a. Defined benefit pension plans - Costs for both qualified and unqualified defined pension plans. Pension plans that specify the benefit to be paid to employees upon retirement, generally either a specific amount or a percentage of compensation. Employer contributions are based on actuarial computations that include the employee's compensation and years of service and are not allocated to specific accounts maintained for employees. 	35			
b. Defined contribution plans - Costs under defined contribution plans. Pension plans that define the employer contributions to a separate account provided for each employee. The employee "benefit" at retirement depends on the amount contributed and the results of the account's activity. Examples include profit sharing plans, money purchase (e.g., 401k, 403b) and stock bonus plans (e.g., ESOPs) 033	37			
3. Other - Other fringe benefits (e.g., Social Security, workers' compensation insurance, unemployment tax, state disability insurance programs, life insurance benefits, Medicare)	39			
4. TOTAL (Add lines D1 through D3)	20			
lot Applicable.				
NVENTORIES				
Report inventories at cost or market using generally accepted accounting practices.				
A. Did this establishment own inventories, regardless of where held, at the end of 20	07 and/or	2006?		
486 Ves - Go to line B				
487 🔲 No - <i>Go to</i> 😰				
Report inventories for products avenue by this establishment on of Mark "X" End of 2007			End of 20	06
owned by this establishment as of <i>Mark "X"</i> End of 2007 December 31. <i>if None</i> \$ Bil. Mil. Thou.	Mark "X" if None	\$ Bil.	Mil.	Thou.
1. Total inventories before Last- in, First-out (LIFO) adjustment (if any)	70			
2. LIFO reserve (if any)	76			
3. Total inventories after LIFO adjustment value (Line B1 minus line B2)	59			

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f not shown, please enter your 11-digit Census File lumber (CFN) from the mailing address.				
INVENTORIES BY VALUATION METHOD				
Report how much of the inventory reported in 9 , line B1 is subject to the following va	luation r	nethod	S.	
Mark "X" End of 2007			End of 20	06
<i>Mark "X"</i> End of 2007 <i>if None</i> \$ Bil. Mil. Thou.	Mark "X" if None	\$ Bil.	Mil.	Thou.
A. LIFO valuation method before adjustment				
B. Any non-LIFO valuation method - Specify method				
0895 0487 0487 0485				
C. TOTAL (Add lines A and B. Total should equal 9, line B1.) 0510				
and 12 Not Applicable.				
3 ASSETS, CAPITAL EXPENDITURES, RETIREMENTS, AND DEPRECIATION				
See information sheet(s) on how to report leasing arrangements.				
	Mark "X"		2007	
	if None	\$ Bil.	Mil.	Thou.
A. Gross value of depreciable assets (acquistion cost) at the beginning of the year		1		
B. Capital expenditures for new and used buildings, structures, machinery, and equipment depreciable assets (<i>Exclude land.</i>)				
C. Total retirements and disposition of depreciable assets for the year (<i>Gross value of assets sold, retired, scrapped, destroyed, etc.</i>)				
D. Gross value of depreciable assets at the end of the year (Add lines A and B minus C)				
E. Depreciation charges for the year				
4 RENTAL PAYMENTS			0007	
	Mark "X" if None	\$ Bil.	2007 Mil.	Thou.
A. Rental payments for buildings and other structures (Include land.) 0551				
B. Rental payments for machinery and equipment				
C. TOTAL (Add lines A and B)				
5 Not Applicable.				

. Selected production related costs	Mark "X"		2007	
	if None	\$ Bil.	Mil.	Thou.
 Cost of supplies used, minerals received for preparation and purchased machinery installed (<i>Report detail in</i> D.) 	121			
2. Cost of products bought and sold as such without further processing <i>(Report sales in </i> 2 <i>.)</i>	26			
3. Cost of purchased fuels consumed for heat, power, or the generation of electricity (<i>Report detail in</i> 1).	130			
4. Cost of purchased electricity (<i>Report quantity on line B1.</i>)	125			
5. Cost of work done for you by others on your materials	124			
6. TOTAL (Add lines A1 through A5)	120			
			2007	
. Quantity of Electricity	Mark "X" if None	D:1	Kilowattho	-
		Bil.	Mil.	Thou.
1. Purchased electricity (<i>Quantity comparable to cost reported on line A4.</i>)				
2. Generated electricity (<i>Gross less generating station use.</i>)	137			
3. Electricity sold or transferred to other establishments (<i>Include on lines</i> B1 or B2.)	138			
DI UI D2.)	138			
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shov ber (C	vn, please enter your 11-digit Census File FN) from the mailing address.				
SELEC	TED EXPENSES - Continued				
• •••		Mark "X"		2007	
. Uth	er operating expenses paid by this establishment	if None	\$ Bil.	Mil.	Thou.
1.	Temporary staff and leased employee expense - Total costs paid to Professional Employer Organizations (PEOs) and staffing agencies for personnel (Include all charges for payroll, benefits and services.)	76			
2.	Expensed equipment - Expensed computer hardware and other equipment (e.g., copiers, fax machines, telephones, shop and lab equipment, CPUs, monitors) (<i>Report packaged software on line C3.</i>)	44			
3.	Expensed purchases of software - Purchases of prepackaged, custom coded or vendor customized software (Include software developed or customized by others, web-design services and purchases, licensing agreements, upgrades of software; and maintenance fees related to software upgrades and alterations.)	88			
4.	Data processing and other purchased computer services (Include computer facilities management services, computer input preparation, data storage, computer time rental, optical scanning services, and other computer-related advice and services, including training. Exclude expensed integrated systems, repair and maintenance of computer equipment, payroll processing and credit card transaction fees, and expenses for telecommunication services (e.g., Internet, connectivity, telephone).)	98			
5.	Purchased communication services - Telephone, cellular, and fax services; computer-related communications (e.g., Internet, connectivity, online) and other wired and wireless communication services	02	1		
6.	Purchased repairs and maintenance to buildings and/or machinery and equipment (<i>Exclude materials, parts, and supplies used for repairs and maintenance performed by this firm's employees.</i>)	94			
7.	Water, sewer, refuse removal, and other utility payments (<i>Include the costs of hazardous waste removal.</i>)	07			
8.	Purchased advertising and promotional services (Include marketing and public relations services.).	05		1 1	
9.	Purchased professional and technical services (Include management consulting, accounting, auditing, bookkeeping, legal, actuarial, payroll processing, architectural, engineering, and other professional services. Exclude salaries paid to your own employees for these services.	16			
10.	Governmental taxes and license fees - Payments to government agencies for taxes and licenses (Include business and property taxes. Exclude income taxes.)	96			
11.	All other operating expenses - All other operating expenses not reported elsewhere (Exclude purchases of merchandise for resale and nonoperating expenses.) - Specify				
	0897	97			
	TOTAL (Add lines C1 through C11)				

DETAILED COST OF MATERIALS, PARTS, AND SUPPLIES

Report:

Delivered cost of individual items listed below. Delivered cost is the amount paid or payable after discounts and including freight and other direct charges incurred by the establishment in acquiring the materials. The figures reported should represent the total purchase cost of supplies, minerals received for preparation, machinery installed, etc., actually used or processed during 2007. Include purchases, interplant transfers, and withdrawals from inventories. If the data are not available from your records, reasonable estimates are acceptable.

Include:

Items listed below whether charged to current or capital accounts.

Cost of items for which less than \$25,000 worth was used in "All other supplies," line 11.

Supplies purchased by this establishment for use by companies performing subcontract work at this establishment.

Exclude:

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Associated labor costs of the kind reported in **7** and **6**, line A5.

Payments made for subcontract services performed, including payments for supplies and equipment furnished by the contractor incidental to this work.

Line No.	Machinery installed and supplies used	Census material , code	or re esta	hased from eceived fror blishments company ncluding del (freight-in	n other of this ivery cost
	0634	0630	\$ Bil. 0631	Mil.	Thou.
		1630	0631		
1	Machinery, purchased and installed (including mobile loading, transportation, and other equipment installed at the operation) (<i>Including</i> <i>charges to both current and capital accounts.</i>)	333000 07			
2	Parts and attachments for mining, mineral preparation, construction, and conveying machinery and equipment	333000 09			
	Supplies used		1	1 1	1 1
3	Lubricating oils and greases (including hydraulic oils)	324191 00			
4	Explosive materials (including ammonium nitrate) and blasting	325920 01			
5	Drillinig fluids (drilling mud, drilling mud materials, mud thinners, thickeners, and purifiers)	325998 03			
6	Industrial chemicals (chemical reagents, calcium chloride, acidizing materials, etc.) (excluding explosive materials, blasting accessories, and drilling fluids)	325000 74			
7	Cement	327310 01			
8	Steel shapes and forms (excluding castings and forgings) such as plates, sheets, strip, piling, bars, rails, wheels, track accessories, pipe, tubing, wire, wire products, and structural shapes	331000 52			
9	Drill bits and reamers	333515 06			
10	Measuring and controlling instruments and devices (seismometers, surveying and plotting instruments, etc.)	334519 00			
11	All other supplies (Specify the three principal types of supplies included here.)	009700 98			
					F
12	TOTAL (Should equal total reported in 😨, line A1)	771000 00			

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18										
							2	007 co	nsumpti	on
Line No.	Kind of fuel (Report total delivered cost, not cost per unit. Freeeived from other establishments of your company should included at estimated market value.)	uels d be	Census fue	el code	Unit o measure quantit	e for	Quantity	,	delive	ncluding ery cost ght-in)
:-									\$ Mil.	Thou.
	0643		0640		0645	0	642	0	641	
1	Coal (bituminous, subbituminous, lignite, and anthracit consumed as a fuel	te)	212110	03	short to	ons				
	Fuel oil				L Î					
2	Distillate (light) grade numbers 1, 2, 4, and light die	esel	004440	47	barre					
2	fuel	· · -	324110	17	barre					
3	Residual (heavy) grade numbers 5 and 6 and heavy diesel fuel	, L	324110	19	¥					
4	Gas (natural, manufactured, and mixed)		211110	15	mil fi	t ³			++	
5	Gasoline		324110	15	1000 ç	gal				
	Other fuels (liquefied petroleum gas, coke, wood, and other) (<i>Specify.</i>)									
6			009600	18						1 1
7	TOTAL (Should equal total reported in @ , line A3)		007720	00						
19	-21 Not Applicable.									
-										
22		NUE				•				
	DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVEN		eld contra	ct work	< during	2007.				
		gas fie e, such	i as: ceme	ent, cas				uipme	ent, acid	lizing
	DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVEN Report total amounts received or due you for oil and Include the value of materials incidental to the service	gas fie e, such	i as: ceme	ent, cas				uipme	ent, acid	lizing
22	DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVEN Report total amounts received or due you for oil and Include the value of materials incidental to the service and fracturing fluids, etc., with the receipts for the indi Exclude receipts for work performed prior to 2007.	gas fie e, such ividual	as: ceme services.	ent, cas	of	l well	head eq	-		lizing ed or due
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Line No.	DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVEN Report total amounts received or due you for oil and Include the value of materials incidental to the service and fracturing fluids, etc., with the receipts for the indi Exclude receipts for work performed prior to 2007. Description 0734 Work performed Exploration services, excluding mapping and surveying services	gas fie e, such ividual Census cc 0730 21311 21311	as: ceme services.	Unit quanti	of re for ities	l well Quant	head eq ity	Amour	nt receive	ed or due
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Line No.	DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVEN Report total amounts received or due you for oil and Include the value of materials incidental to the service and fracturing fluids, etc., with the receipts for the indi Exclude receipts for work performed prior to 2007. Description 0734 Work performed Exploration services, excluding mapping and surveying services	gas fie e, such ividual Census cc 0730 21311 21311 21311	as: ceme services.	Unit measur quanti	of re for ities 07	l well Quant	head eq ity	Amour	nt receive	ed or due
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Line No.	DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVEN Report total amounts received or due you for oil and Include the value of materials incidental to the service and fracturing fluids, etc., with the receipts for the indi Exclude receipts for work performed prior to 2007. Description 0734 Work performed Exploration services, excluding mapping and surveying services Well surveying and well logging Drilling oil and gas wells, including drilling in, spudding in or tailing in Directional drilling control Reworking wells Reworking wells Running, cutting, and pulling casings, tubes, or	gas fie e, such ividual Census cc 0730 21311 21311 21311 21311 21311	a as: ceme services. product de 2 1100 2 3215 1 0441 1 0341 1 0551	Unit measur quanti	of re for ities 07	l well Quant	head eq ity	Amour	nt receive	ed or due
.ov I 2 3 4 5	DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVEN Report total amounts received or due you for oil and Include the value of materials incidental to the service and fracturing fluids, etc., with the receipts for the indizer to 2007. Exclude receipts for work performed prior to 2007. 0734 0734 Work performed Exploration services, excluding mapping and surveying services Well surveying and well logging Drilling oil and gas wells, including drilling in, spudding in or tailing in Directional drilling control Reworking wells	gas fie e, such ividual Census cc 0730 21311 21311 21311 21311 21311	a as: ceme services. product de 2 1100 2 3215 1 0441 1 0341	Unit measur quanti	of re for ities 07	l well Quant	head eq ity	Amour	nt receive	ed or due

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22	DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVE	ENUE - Continued	k				
Line No.	Description	Census product code	Unit of measure for quantities	Quantity		unt receive	
Lin	0734	0730	0736	0732	\$ Bil. 0731	Mil.	Thou.
	Work performed - Continued						
8	Perforating well casing	213112 3551					
9	Hydraulic fracturing	213112 3321					
10	Installing production equipment, including wellhead fittings, pumps, and engines	213112 3561					
11	Pumping wells but not operating leases	213112 3581					
12	Oil and gas field machine-shop work	332710 0100			ļ		
	Other repair and maintenance (<i>Specify kind.</i>)						
13		213112 3593					
	All other oil and gas field services (<i>Specify kind.</i>)						
14		213112 3595					
15	Hauling minerals and mine equipment beyond mine property	999830 1000					
	Other miscellaneous receipts (including receipts for repair work, etc.) (<i>Specify kind.</i>)						
16		999809 8000					
	Products						
	Crude petroleum, including lease condensate (<i>Report volumes corrected to 60 degrees F.</i>)		1000 661				
17	Shipped	211111 1111	1000 bbl				
18	From stripper well leases <i>(included in line</i> 17)	211111 1121	•				
	Natural gas (Adjust volume to a pressure base of 14.73 pounds absolute at 60 degrees F.) Shipped to consumers (domestic, commercial, and industrial, including own refineries), distributors, transmission companies, and natural gas liquids plants operated by your company and operated		mil ft ³				
19	by others, less any volume of residue gas returned to you for field or lease operations .	211111 3100	•				
	All other products made in this establishment - Specify and report each product with sales value of \$50,000 or more that cannot be assigned to one of the "listed products and services". For all remaining products, write "Other" and report a single total value.						
20		18					
21		26					
	CONTINUE	WITH 😨 ON PAGE	11				

	n MI-2130 ot shown, j mber (CFN)	1 (08/10/2007) please enter your 11-digit Census File from the mailing address.		•					Page 11
22		SALES, SHIPMENTS, RECEIPTS, OR REVI		- Continued	b				
Line No.		Description	Cen	sus product code	Unit of measure for	Quantity	Amo	unt rec	eived or due
Line	0734		0730	1	quantities	0732	\$ Bil. 0731	Mil.	Thou.
2			34						
22			<u> </u>						
3	without fur assembly (ales of products bought and sold ther manufacture, processing, or The cost of such items should be (, line A2.)	99	9890 0000					
4	-	oould equal ⑤, line A)		0000 0000					
23		pplicable.		0000 0000					
26		NQUIRIES SES OPERATED you operate oil and gas field leases for yo	our ov	wn account (or for others	during 2007	?		
	8811	Yes - Go to line 1						20	
	8812	□ No - <i>Go to</i> 					Prod leases	uction c which	uantities for you operated
		Specify state 🏹					Thou barrels		Million cubic feet of gas
		1							
		2 3.							
		3 4.							
		5. TOTAL (Add lines 1 through 4.) (Report totals in 2 , lines 17 and 19.)							
27	-29 Not A	pplicable.							
									ON PAGE 12

REMARKS (Please use this space for any explanations that may be essential in understanding your reported data.)

30 CERTIFICATION - This report is substantially accurate and was prepared in accordance with the instructions

	Is the time period covered by this report a calendar year?					Month	n Year				Month	Ye	ear	
	Yes	🗌 No - En	ter time period covere	d→	FROM				то					
	Name of person to contact regarding this report				Title)								
Г		Area code	Number	Exte	ension			Area	Area code			Number		
	Telephone		-			Fax					-			
	Internet e-mail address									Month	Day	Ye	ear	
				Date completed										
	Thank you for completing your 2007 ECONOMIC CENSUS form. PLEASE PHOTOCOPY THIS FORM FOR YOUR RECORDS AND RETURN THE ORIGINAL.													