



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 27183
LOCATION Ottawa KS
FOREMAN Fred Mader

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10/5/10	1448	Boy Scout # D-110	NW 14	17	21	Mi
CUSTOMER Bobcat Oilfield Serv.						
MAILING ADDRESS 30805 Coldwater Rd						
CITY Louisburg		STATE KS	ZIP CODE 66092			
		TRUCK #	DRIVER	TRUCK #	DRIVER	
		506	Fred	Safety Mtg		
		368	Ken	KH		
		510	Derek	DM		

JOB TYPE Longstring HOLE SIZE 5 7/8 HOLE DEPTH 815' CASING SIZE & WEIGHT 2 7/8" 10 RB
CASING DEPTH 809' DRILL PIPE Pin in TUBING @ 804' OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/2" Plug
DISPLACEMENT 4.67 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 4BPM

REMARKS: Establish circulation. Mix + Pump 100# Premium Gel flush. Mix + Pump 115 sks 60/40 Por Mix Cement 290 lbs. Cement to surface. Flush pump + lines & clean. Displace 2 1/2" Rubber plug to pin in casing w/ 4.67 BBL Fresh water. Pressure to 700# PSI. Shut in casing.

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Customer Supplied H₂O

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		925 ⁰⁰
5406	20 mi	MILEAGE Pump Truck on lease		NK
5402	809'	Casing Footage		NK
5407	1/2 Minimum	Tom Miles		157 ⁵⁰
1131	113 sks	60/40 Por Mix Cement		1282 ⁵⁰
1118B	298#	Premium Gel		5960
4402	1	2 1/2" Rubber Plug		203 ⁰⁰
		WO# 237114		
			7.55%	SALES TAX
				ESTIMATED TOTAL
				10307
				255023

Ravin 3737

AUTHORIZATION _____ TITLE _____ DATE _____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.