CONSOLIDATED
Oil Well Services, LLC

#241259

TICKET NUMBER 32062
LOCATION Bartlesville, OK
FOREMAN Donnie Tate

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
5-7-2011	6972	RBN #6				Mont. KS

CUSTOMER: RBN
MAILING ADDRESS:
CITY: | STATE: | ZIP CODE:

TRUCK #	DRIVER	TRUCK #	DRIVER
419	JAMES N		
551	JEFF F		
412 T97	John E		

JOB TYPE LS HOLE SIZE 5 5/8 HOLE DEPTH ____ CASING SIZE & WEIGHT ____
CASING DEPTH 700' DRILL PIPE ____ TUBING 2 7/8 OTHER ____
SLURRY WEIGHT 13.8 SLURRY VOL 1.75 WATER gal/sk 8.5 CEMENT LEFT in CASING 0
DISPLACEMENT 4 DISPLACEMENT PSI 300# MIX PSI 250# RATE 4 1/2 BPM

REMARKS: EST CIRC W/GEL-H2O - RUN 75SX THICK SET W/5# KOL to 1/4 Pheno - WASH OUT PUMP AND LINES - RELEASE PLUG - DISP 4 BBL TO SET SHOE

CMT TO SURF

Plug Down @ 11:30 A.M
Plug Psi 1200#

Safety Mtg
JF JE

ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		975.00
5406	—	MILEAGE		—
5402	700'	FOOTAGE		147.00
5407	—	BULK TRK		—
5501C	1.5 HR	TRANSPORT		168.00
1126	75 SX	THICK SET		1342.50
1110A	400#	KOL SEAL		176.00
1107A	80#	PHENO		97.60
1118B	150#	GEL		30.00
1123	3150 GAL	CITY WATER		49.14
4402	1	2 7/8 RUBBER PLUG		28.00
			SALES TAX	97.71
			ESTIMATED TOTAL	3110.95

10% DISC IF PAID WITHIN 30 DAYS $2809.63

Ravin 3737

AUTHORIZTION ____ 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.