



CONSOLIDATED
Oil Well Services, LLC



TICKET NUMBER 33657
LOCATION Oakley, KS
FOREMAN Walt Drinkel

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
10-22-11	5459	Bill 1-3	3	15 ^s	27 ^w	Gove
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Mull Dels Co			463	Josh Budge		
MAILING ADDRESS			460	Cory Davis - Derek Glassman		
CITY						
STATE						
ZIP CODE						

Outer
205
4W
15
6%

JOB TYPE PTA-O HOLE SIZE 7 1/8 HOLE DEPTH 4350' CASING SIZE & WEIGHT _____
CASING DEPTH _____ DRILL PIPE 4 1/2 x H TUBING _____ OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety Meeting, Plug as ordered

25 sks @ 1880'
100 sks @ 840'
40 sks @ 270'
10 sks @ 40' w/ Plug
30 sks to R.H.

205 sks @ 40' per, 4% bal, 1/4" Flo-Seal

9:15P

Thank You
Walt (screw)

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405N	1	PUMP CHARGE	1,250 ⁰⁰	1,250 ⁰⁰
5406	40	MILEAGE	5 ⁰⁰	200 ⁰⁰
1131	205 sks	60/40 per	14 ³⁵	2941 ⁷⁵
11180	704#	Bentonite	1 ²⁴	168 ⁹⁶
1107	51#	Flo-Seal	2 ⁶⁶	135 ⁶⁶
5407A	8.82	Ton Mileage Delivery	1 ⁵⁸	557 ⁶⁰
4432	1	8 5/8 wooden Plug	96 ⁰⁰	96 ⁰⁰
				5349 ⁹⁷
		Less 10% Disc		- 535 ⁰⁰
				4814 ⁹⁷
		243277		
			SALES TAX	242.15
			ESTIMATED TOTAL	5057 ¹²

Form 3737

AUTHORIZATION Mull Dels Co 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.