

ALLIED CEMENTING CO., LLC. 034585

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT

Orkley

DATE <i>2-11-12</i>	SEC. <i>28</i>	TWP. <i>16</i>	RANGE <i>34</i>	CALLED OUT	ON LOCATION <i>1:30 PM</i>	JOB START <i>3:30 PM</i>	JOB FINISH <i>4:00 PM</i>
LEASE <i>Deanna E</i>		WELL# <i>1-28</i>	LOCATION <i>Pence 1W - 4 1/2 N - 1W</i>		COUNTY <i>Hogan</i>	STATE <i>Ks.</i>	
OLD OR <u>(NEW)</u> (Circle one)			<i>North into</i>				

CONTRACTOR *HD #2*
 TYPE OF JOB *Surface*
 HOLE SIZE ~~8 5/8~~ *12 1/4* T.D. *274*
 CASING SIZE *8 5/8* DEPTH *271.30*
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX MINIMUM
 MEAS. LINE SHOE JOINT
 CEMENT LEFT IN CSG. *15 ft*
 PERFS.
 DISPLACEMENT *16.40*

OWNER *Same*
 CEMENT
 AMOUNT ORDERED *180 SKs Com 3% CC*
2% Gel

COMMON	<i>180 SKs</i>	@ <i>16.25</i>	<i>\$2925.00</i>
POZMIX		@	
GEL	<i>3 SKs</i>	@ <i>21.25</i>	<i>\$63.75</i>
CHLORIDE	<i>6 SKs</i>	@ <i>58.20</i>	<i>\$349.20</i>
ASC		@	
		@	
		@	
		@	
		@	
		@	
		@	
		@	
HANDLING	<i>189 SKs</i>	@ <i>2.25</i>	<i>\$425.25</i>
MILEAGE	<i>11¢ Per mile</i>		<i>\$1039.50</i>
TOTAL			<i>\$4802.70</i>

EQUIPMENT

PUMP TRUCK CEMENTER *Lakene*
 # *431* HELPER *Darren/Dane*
 BULK TRUCK
 # *347* DRIVER *Billy*
 BULK TRUCK
 # DRIVER

REMARKS:

Mix 180 SKs Cement
Displace with water
Cement Did Circulate

Thank You

CHARGE TO: *Russell Oil*
 STREET
 CITY STATE ZIP

SERVICE

DEPTH OF JOB	<i>271.30</i>		
PUMP TRUCK CHARGE			<i>\$1125.00</i>
EXTRA FOOTAGE		@	
MILEAGE	<i>50</i>	@ <i>7.00</i>	<i>\$350.00</i>
MANIFOLD <i>Swedge</i>		@	<i>\$325.00</i>
<i>LV mileage</i>		@ <i>4.00</i>	<i>\$200.00</i>
		@	
TOTAL			<i>\$2000.00</i>

PLUG & FLOAT EQUIPMENT

	@	
	@	
	@	
	@	
	@	
TOTAL		

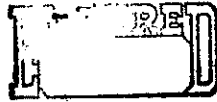
To Allied Cementing Co., LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME *Broad Roberts*
 SIGNATURE *Broad Roberts*

SALES TAX (If Any)
 TOTAL CHARGES
 DISCOUNT IF PAID IN 30 DAYS



CONSOLIDATED
Oil Well Services, LLC



TICKET NUMBER 33887
LOCATION Oakley, KS
FOREMAN Walt Dinkel

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
2-24-12	7043	Deanna E #1-28	28	15 ^S	34 ^W	Logan
CUSTOMER Russell Oil		Pense 1W 4 1/2 IN 1W 1 IN	TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS			456-T118	Wiles Shaw		
CITY	STATE	ZIP CODE	566 -	Bobby Stienert		
			528-T127	Cochy Roets		

JOB TYPE Prod-DY HOLE SIZE 7 7/8 HOLE DEPTH 4650' CASING SIZE & WEIGHT 5 1/2 -
CASING DEPTH 4639 DRILL PIPE _____ TUBING _____ OTHER DV 2427'
SLURRY WEIGHT 13.8, 12.5 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 42.14'
DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE 6-7 BPM

REMARKS: Safety Meeting, Rig up on HD #2, ran casing to bottom
Circ 1 Hr, Pumped 500 gal Mud Flush, mixed 150 sks OWC, 5#
Kolseal, clear Pump+Lines, Displace 50 BBL H₂O + 62 BBL Mud
2 800# Landed Plug @ 1200#, release Pressure, Float held
Open DV Tool, Circ 1 Hr, mix 30 sks in RH, mixed 445 sks 60/40 per
8% Gel, 1 1/4" Flo-Seal, clear Pump+Lines, release Plug + Displace
59 BBL H₂O @ 900#, Landed Plug @ 1500#, release Pressure
Tool held

Circ 15 BBL Cement to Pt. Thank You
Walt + Crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401C	1	PUMP CHARGE	3020.00	3,020.00
5406	40	MILEAGE	5.00	200.00
1126	150 SKS	OWC	22.55	3,382.50
1131	475 SKS	60/40 per	15.10	7,172.50
1118B	3272#	Gel	.25	818.00
1110A	750#	Kolseal	.56	420.00
1107	119#	Flo-Seal	2.82	335.58
1144 G	500 gal	Mud Flush	1.00	500.00
5407A	27.48	Ten Mileage Delivery	1.67	1,835.60
4159	1	5 1/2-AFU Float Sleeve	413.00	413.00
4454	1	5 1/2 - Latch down Plug Assy	303.00	303.00
4136	6	5 1/2 - Turbo-Centralizers	72.00	432.00
4104	1	5 1/2 Basket	276.00	276.00
4277	1	5 1/2 - DV Tool - W	4700.00	4700.00
				23,808.18
		Less 10% Disc	-	2,380.82
				21,427.36
		248015	SALES TAX	1316.44
			ESTIMATED TOTAL	22743.82

Ravin 3737

AUTHORIZATION Todd Brown TITLE _____ DATE 2/24/2012

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.