



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 34718
LOCATION Eureka
FOREMAN Rick Letford

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8678

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6-8-12	2092	Oliver SWD Rebill	1	325	10E	Chaut.
CUSTOMER			TRUCK #			
C+E Oil			DRIVER			
MAILING ADDRESS			TRUCK #			
422 Elm St			DRIVER			
CITY			TRUCK #			
Malone			DRIVER			
STATE			TRUCK #			
KS			DRIVER			
ZIP CODE			TRUCK #			
67353			DRIVER			

Ca Tools


JOB TYPE Inc HOLE SIZE _____ HOLE DEPTH _____ CASING SIZE & WEIGHT 4 1/2"
 CASING DEPTH 2292' DRILL PIPE _____ TUBING 2 7/8" OTHER _____
 SLURRY WEIGHT 13.5" SLURRY VOL 40 Bbl WATER gal/blk 6.5 CEMENT LEFT IN CASING _____
 DISPLACEMENT 13 Bbl DISPLACEMENT PSI 900 PSI 500 Shut in RATE _____

REMARKS: Safety meeting - Rig up to 2 7/8" tubing, load casing w/ fresh water. Established rate @ 3 bpm @ 400 PSI. Circulated hole clean w/ 35 Bbl fresh water. Mixed 160 sacks class A cement w/ 2% gel @ 13.5" / gal. yield 1.35. shut down, washout pump & lines, Displace w/ 13 Bbl fresh water. Shut tubing in @ 500 PSI. Job complete. Rig down.

Thank You

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1030.00	1030.00
5406	30	MILEAGE	4.00	120.00
1145	160 sacks	Class A cement	14.95	2392.00
1118	300"	2% gel	.21	63.00
5407	7.53	for mileage back to	m/c	350.00
			Subtotal	3955.00
			SALES TAX	203.77
			ESTIMATED TOTAL	4158.77

Favin 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