



18 MAY 2012

TICKET NUMBER 34489

LOCATION Oakley

FOREMAN Fuzzy

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
5-18-12	6335	Odd Williams #4-R	12	21	35	KS
CUSTOMER Pediosantandok USA			READY			
MAILING ADDRESS			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY			504	Cory B		
STATE			528-	Bobby S		
ZIP CODE			T-127			

JOB TYPE Surf HOLE SIZE 12 1/4 HOLE DEPTH _____ CASING SIZE & WEIGHT 8 5/8
 CASING DEPTH _____ DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 14.8-12.5 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT 33.9 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting on Trinidad #215. Rig up and circulate
Mix 150 sacks 65/35 pos 690cc 390cc, 114 lbs seal, Tail with 150 class 'A'
390cc 290cc. Release plug and displace 33 3/4 BBL and shut in.
Cement did circulate approx 10 BBL to pit.

Thanks Fuzzy
+ crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	1085 ⁰⁰	1085 ⁰⁰
5406	50	MILEAGE	5 ⁰⁰	250 ⁰⁰
5407A	13.5 ton	Tow mileage Delivery	167	1127 ⁵⁰
11045	150 sacks	Class 'A' cement	17 ⁶⁵	2647 ⁵⁰
1131	150 sacks	60/40 pos	15 ¹⁰	2265 ⁰⁰
1102	810 #	Calcium Chloride	.89	720 ⁹⁰
1118 B	1056 #	Bentonite	.25	264 ⁰⁰
1107	38 #	Flo-sol	2 ⁸²	107 ¹⁶
4132	not used	8 5/8 - centralizer	82 ⁰⁰	NA
4432	1	8 5/8 wood cup plug	96 ⁰⁰	96 ⁰⁰
		subtotal		8563 ⁰⁰
		less 10%		856 ²⁰
		subtotal		7706 ⁷⁰
		SALES TAX		
		ESTIMATED TOTAL		

AUTHORIZATION [Signature] TITLE APF DATE 5-19-12

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



CONSOLIDATED
Oil Well Services, LLC

21 MAY 2012

TICKET NUMBER 34536
LOCATION Oakley, KS
FOREMAN Kelly Gabe
Walt Dinkel
KS

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
5-24-12	6335	odd Williams 21R	12	21	35 ^W	Kearney
CUSTOMER		MAILING ADDRESS		CITY		
Patio Santander		5000 Finney Coline W+O Bird Rd 25 1W Dinto				
STATE		ZIP CODE		TRUCK #	DRIVER	TRUCK #
				399	Damon M	
				528	Cody R	
				566	THOMAS B	

JOB TYPE 2-stage HOLE SIZE 7 7/8 HOLE DEPTH 5029 CASING SIZE & WEIGHT 5 1/2-15.5#
 CASING DEPTH _____ DRILL PIPE _____ TUBING DV@2017 OTHER 31
 SLURRY WEIGHT 138-125 SLURRY VOL 1.42-1.89 WATER gal/sk 6.9-10.8 CEMENT LEFT in CASING 21.65'
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: safety meeting, rigged up on T rinned 215 hooked up & circulated
 1 hr, Pump 5 bbl water, Mud flush, 5 bbl water, Mixed 225 SKS OWC 5# Kol-seal
 washed out pumps & lines, released Plug, displaced with 70 bbl water & 43 bbl mud
 700 # lift + pressure, land @ 1500 # released pressure float held, dropped down to open DV to
 waited 10 min, opened tool & circulated for 4 hrs, mixed 30 SKS RH, 20 SKS MH
 mixed 450 SKS 60/40 890 gel 1/4 # Flo-seal, washed out pumps & lines
 Released Plug, displaced with 47 bbl water with 700 # lift
 Plug landed @ 1500 released pressure, float held, washed up & rigged down.
 Float Equip on JT # cent. 1, 3, 5, 7, 9, 11, 13, 15, 70, 72 Thank You
 Baskets 71, 72 DV Tool top 71 Walt, Kelly & crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401C	1	PUMP CHARGE	3020 ⁰⁰	3020 ⁰⁰
5406	50	MILEAGE	5 ⁰⁰	250 ⁰⁰
1126	2255KS	OWC	22 ⁵⁵	5073 ⁷⁵
1131	500	60/40 Poz	15 ¹⁰	7550 ⁰⁰
1118B	32140#	Bentonite	.25	8035 ⁰⁰
1107	125#	Flo-seal	2 ⁸²	352 ⁵⁰
1110A	1125#	Kol-seal	1.56	1755 ⁰⁰
5407A	32.1	Ton Mileage	1.67	2680 ³⁵
4159	1	5 1/2 AFU Floatshoe (I)	413 ⁰⁰	413 ⁰⁰
4104	2	5 1/2 Basket (w)	276 ⁰⁰	552 ⁰⁰
4130	10	5 1/2 Centralizer (I)	58 ⁰⁰	580 ⁰⁰
4283	1	5 1/2 DV Tool with latchdown	3850 ⁰⁰	3850 ⁰⁰
1144G	500gal	Mud Flush	1 ⁰⁰	500 ⁰⁰
				26,041 ⁶⁰
				2604 ¹⁶
				23,437 ⁴⁴
			SALES TAX	
			ESTIMATED TOTAL	

Ravin 3737
 AUTHORIZATION Gabe TITLE APE DATE 5-24-12
 1:00 PM 5-25-12

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