

FIELD TICKET & TREATMENT REPORT

CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
8-27-12	4418	Weide # 18	31	235	15E	Hudson
CUSTOMER			TRUCK # DRIVER TRUCK # DRIVER 520 John 479 Merle 637 Jim			
MAILING ADDRESS						
CITY						
STATE	ZIP CODE					
Kraft Oil LLC 434 Iris Rd SW Gridley, KS 66852						

JOB TYPE Surface 0 HOLE SIZE 12 1/4 HOLE DEPTH 41' 6.1 CASING SIZE & WEIGHT 8 5/8"
 CASING DEPTH 40' 6.1 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 15# SLURRY VOL 9 WATER gal/sk 6.5 CEMENT LEFT in CASING 5'
 DISPLACEMENT 2 1/2 BW DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting. Rig up to 8 5/8" casing. Break circulation w/ fresh water. Mixed 40 sacks class A cement w/ 3% cacl2 + 2% ge' @ 15#/gal. Displace w/ 2 1/2 BW water. Shut casing in w/ good cement returns to surface. Job complete.

"Thank You"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54013	1	PUMP CHARGE	825.00	825.00
5406	35	MILEAGE	4.00	140.00
11043	40 sacks	class A cement	14.95	598.00
1102	110#	3% cacl2	.79	81.40
1118B	75#	2% ge'	.21	15.75
5407		ten mileage bulk trk	m/l	350.00
5502C	3 hrs	80 BW WAC. TEL	90.00	270.00
1123	3000 gals	city water	16.50/1000	49.50
			Subtotal	2329.65
			SALES TAX 2.3%	54.35
			ESTIMATED TOTAL	2384.00

Ravin 3737

AUTHORIZATION Ron [Signature]

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.