



TICKET NUMBER 37226
 LOCATION Oakley
 FOREMAN Fuzz4

PO Box 884, Chanute, KS 66720
 620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

Rs

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10-9-12	1207	Ray 1-30	WELL 30	23	23W	Hodgeman
CUSTOMER Berecso LLC		Jetmore				
MAILING ADDRESS		85		TRUCK #		
		1E		DRIVER		
		19W		TRUCK #		
		Wiv		DRIVER		
CITY	STATE	ZIP CODE				

JOB TYPE 2-stage HOLE SIZE 7 7/8 HOLE DEPTH 4820' CASING SIZE & WEIGHT 5 1/2 15.5
 CASING DEPTH 4820' DRILL PIPE _____ TUBING _____ OTHER DU Tool - 1609
 SLURRY WEIGHT 135-138 SLURRY VOL 1.8 - 1.42 WATER gal/sk _____ CEMENT LEFT in CASING 8168
 DISPLACEMENT 112 2 1/2 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting on Board #2. Customer ran float equip. Rig up and circulate 2 hrs. Pump 5 BBL water mix 200SKS 60/40 890 gel 5* Kolsel, 1/4* Closeal Tail with 125SKS OWC 5* Kolsel. Wash pump and lines. Drop plug and displace 70 BBL water 43 1/2 BBL mud 1000* lift land plug @ 1500*. Drop DU Bomb wait 10 mins open DU Tool @ 1000*. Pump 5 BBL water, mix 200SKS MM, 30SKS RH, mix 325 SKS 60/40 pos 890 gel 1/4* Closeal down 5 1/2 casing. Wash pump and lines Drop plug and displace 38 1/2 BBL water. 600* lift Close DU Tool @ 1800*. Cement did circulate approx 10 BBL to bit

Thanks Fuzz4 & crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401C	1	PUMP CHARGE	3020 ⁰⁰	3020 ⁰⁰
5406	40	MILEAGE	5 ⁰⁰	200 ⁰⁰
5407A	30.6	Ton Mileage Delivery	167	2044 ²⁰
1126	125SKS	OWC	22 ⁵⁵	2818 ⁷⁵
1131	200SKS	60/40 pos (bottom)	15 ¹⁰	3020 ⁰⁰
1131	375SKS	60/40 pos (Top)	15 ¹⁰	5662 ⁵⁰
1110A	1625*	Kolsel	1.56	910 ⁰⁰
1118B	3960*	Bentonite	1.25	990 ⁰⁰
1107	144*	Closeal	2 ⁸²	406 ⁰⁸
4159	1	5 1/2 RTU Float shoe	413 ⁰⁰	413 ⁰⁰
4283	1	5 1/2 DU Tool	3850 ⁰⁰	3850 ⁰⁰
4136	9	5 1/2 Turbulars (W)	72 ⁰⁰	648 ⁰⁰
4104	4	5 1/2 Baskets (W)	276 ⁰⁰	1104 ⁰⁰
4309	1	5 1/2 Limit clamp	41 ⁰⁰	41 ⁰⁰
4454	1	5 1/2 hatchdown Assy	303 ⁰⁰	303 ⁰⁰
		subtotal		25430 ³³
		1755.00%		2543.03
		subtotal		22887.30
		SALES TAX		1352.17
		ESTIMATED TOTAL		24239.47

Ravin 3737

AUTHORIZATION

Mark Zile

TITLE

Foreman

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.

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