





**CONSOLIDATED**  
Oil Well Services, LLC

**ENTERED**

TICKET NUMBER 38372

LOCATION Eureka

FOREMAN Steve Mead

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

**FIELD TICKET & TREATMENT REPORT**

**CEMENT** APT 15-207-28028

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-14-72	3451	B Edwards 1 HP	35	235	14E	Woodson
CUSTOMER <u>Haas Petroleum</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS <u>11551 Ash St. Ste. 205</u>			<u>485</u>	<u>Alan m.</u>		
CITY <u>Leawood</u>			<u>466</u>	<u>Joey</u>		
STATE <u>Ks</u>			<u>479</u>	<u>Mark</u>		
ZIP CODE						

JOB TYPE Logging HOLE SIZE 6 3/4 HOLE DEPTH 1750' CASING SIZE & WEIGHT 4 1/2 9.5\*  
 CASING DEPTH 1748' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT In CASING \_\_\_\_\_  
 DISPLACEMENT 28.4 DISPLACEMENT PSI 700\* Pump Play 1200\* RATE \_\_\_\_\_

REMARKS: Safety meeting: Rig up to 4 1/2 casing. Break circulation. Pump 10 bbls fresh water ahead. Pump 150 sks 60/40 Pozmix Cement w/ 8% Gel, 1<sup>st</sup> phenoseal per/sk. Tail in with 50 sks Thick set cement w/ 5% Kol seal per/sk. Wash out pump & lines. Shut down Release plug. Displace with 28.4 bbls fresh water. Final pumping pressure 700\* Pump plug 1200\*. Wait 2 min Release pressure Plug held. Shut well in OP. Good cement Return to surface 2 bbl slurry to pit.  
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	45	MILEAGE	4.00	180.00
1171	150 sks	60/40 Pozmix Cement	12.55	1882.50
1118B	1035*	Gel 8% <u>Yield</u>	.21	217.35
1107A	150*	Phenoseal 1 <sup>st</sup> per/sk	1.29	193.50
1126A	50 sks	Thick-Set Cement	19.20	960.00
1110 A	250#	Kol seal 5 <sup>th</sup> per/sk <u>Tail</u>	.46	115.00
5407	9.2 Ton	Ton mileage Bulk Trucks	mic x 3	290.00
4404	1	4 1/2 Top Rubber Plug	45.00	45.00
			SubTotal	5323.35
			SALES TAX	249.19
			ESTIMATED TOTAL	5572.54

255450 7.3%

AUTHORIZATION Ben Hunt TITLE Toolpusher 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.