



10244 NE Hwy. 61  
 P.O. Box 8613  
 Pratt, Kansas 67124  
 Phone 620-672-1201

FIELD SERVICE TICKET

1718 07609 A

DATE \_\_\_\_\_ TICKET NO. \_\_\_\_\_

DATE OF JOB: 2-7-2015		DISTRICT		NEW WELL <input checked="" type="checkbox"/>	OLD WELL <input type="checkbox"/>	PROD <input type="checkbox"/>	INJ <input type="checkbox"/>	WDW <input type="checkbox"/>	CUSTOMER ORDER NO.:	
CUSTOMER: F9 HILL CO. LLC				LEASE: WOLF		WELL NO: 3-10				
ADDRESS				COUNTY: BARTON		STATE: Ks.				
CITY				STATE		SERVICE CREW: LESLEY, MARCOZ, PATES				
AUTHORIZED BY				JOB TYPE: C/W - 8 1/2" S.P.						
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
37586	6.5						2-7-15			7:00
11891	6.5									1:00
1180	6.5									1:00
										12:45
										1:30
										60

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP.

SIGNED: \_\_\_\_\_  
 (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CE 101	A-COMPLIANT COMMON	SK	200		
CE 100C	COMMON CMT.	SK	175		
CE 102	CELLULOSE	LB	99		
CE 104	CALCIUM CHLORIDE	LB	814		
CE 165	TOT RUBBER CMT. PLUG 1/4"	EA	1		
CE 1753	CENTRALIZER 1/4"	EA	3		
E 100	PICKUP MILEAGE	MI	60		
E 101	HEAVY EQUIPMENT MILEAGE	MI	120		
E 113	BULK DELIVERY CHARGE	TRK	1057		
CE 201	DEPTH CHARGE, 50' KICK	HR	1.96		
CE 240	BENDING SERVICE CHARGE	BR	575		
CE 504	LOG CONTAINER CHARGE	YB	1		
S 003	SERVICE SUPPLIER	EA	1		

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX
MATERIALS	%TAX

SERVICE REPRESENTATIVE: \_\_\_\_\_  
 FIELD SERVICE ORDER NO. \_\_\_\_\_

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: \_\_\_\_\_  
 (WELL OWNER OPERATOR CONT)

