



CONSOLIDATED
Oil Well Services, LLC

256174

TICKET NUMBER 39258
LOCATION Oakley, KS
FOREMAN Kelly Gabe

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

FIELD TICKET & TREATMENT REPORT

CEMENT

KS

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
1-23-13	3372	MAP #1-35	35	135	310	Gove
CUSTOMER <u>Grand Mesa</u>			CITY <u>Oakley</u>			
MAILING ADDRESS			TRUCK # <u>463</u>	DRIVER <u>Jerry</u>	TRUCK #	DRIVER
CITY			TRUCK # <u>466</u>	DRIVER <u>Damon M Ridealong</u>		
STATE			TRUCK #	DRIVER <u>Trevise</u>		
ZIP CODE						

JOB TYPE Surface HOLE SIZE 12 1/4 HOLE DEPTH 321 CASING SIZE & WEIGHT 8 5/8 24#
 CASING DEPTH 321 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 148 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 30'
 DISPLACEMENT 12 3/4 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting, rigged up on Muffin #24 hooked up to circulate, mixed 175 SKS com 3% acc 2% gel displaced with 12 3/4 bbl water, shut in, washed out pump lines, rigged down.

CEMENT did circulate

APPROX 9 bbl to pit.

Thank you Kelly Gabe

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE		
5406	20	MILEAGE		
11045	175 SKS	Class A Cement		
1102	493#	Calcium chloride		
11183	329#	Bentonite		
5407	8.22	Ton Mileage delivery		
111	100#	SALT		NC

completed

Last 100# dis

Ravin 3737
 10:30 PM AUTHORIZATION [Signature] TITLE Pusher Rig #24 DATE 1-23-13
 ESTIMATED TOTAL _____ SALES TAX _____

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.

JOB LOG

SWIFT Services, Inc.

DATE 2-2-73 PAGE NO.

CUSTOMER Grand Mesa WELL NO. 1-35 LEASE MAP JOB TYPE 5 1/2 Long String TICKET NO. 23893

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (2000)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1430							on location 5 1/2 x 15.5# TO 4570 Sg. 10 TP 4565 Inset 4555 PC top 54 2312' centralizers 1, 3, 5, 7, 9, 11, 13, 15, 53 Baskets 2, 54
	1620							Start Pipe
	1820							Break circulation Rotate
	1850		7/4					Plug MH 30 MH 20
	1900	5	12		✓		300	Start Mud Flush
		5	20		✓		300	start KCL Flush
		5	30		✓		200	Start Cement 125 SKS
	1920				✓			Drop Plug
	1920							wash out Pump + Lines
	1921	6			✓			Displace
	1945	6	108.4		✓		1500	Land Plug
	1946							Release Dry
								wash up Mack up
	2030							Job complete Thank You Josh, Brian, Bob

JOB LOG

SWIFT Services, Inc.

DATE 3-1-13 PAGE NO.

CUSTOMER Grand Mesa WELL NO. 1-35 LEASE MAP JOB TYPE Cement Port Collar TICKET NO. 23935

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0800							On location
								PC @ 2323 RBP 2608
	0800							Start Port Collar open Tool
	0850		58	✓		1500	W	load hole Pressure test
	0935		14	✓				Spot Sand
								locate Port Collar
	1020	3	35	✓		500		Open Port Collar Start Mud
	1030	4	95/gal	✓		300		Start Cement Brms weight up 200 SXS SMD
			102					Start Displacement
	1115						1000	Close Port Collar
			30	✓				Run 4 joints Reverse out Clean
								Run in to wash sand off plug
	1135	3	80	✓		200		wash sand off plug
								Swab Down
								Pull tools
								wash up Rack up
								Job Complete
								Thank You
								Josh, Brian, Clint

Pro-Stim Chemicals LLC

Acidizing Report

Date **2-26-13**

Customer Grand Mesa		Pro-Stim Chemical Yard Dighton		Pro-Stim Number A-11	
Well Name & Number MAR 1-35		Field		Formation Spot	
County Gove	State KS	BHT	YD	Interval 4442-46	

Well Type: <input checked="" type="checkbox"/> Completion <input type="checkbox"/> Recompletion <input type="checkbox"/> Workover <input type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Water <input type="checkbox"/> Disposal <input type="checkbox"/> Perf <input type="checkbox"/> OH <input type="checkbox"/>							
Job Pumped Via: <input checked="" type="checkbox"/> Tubing <input type="checkbox"/> Casing <input type="checkbox"/> Annulus <input type="checkbox"/> CTU <input type="checkbox"/> Combination <input type="checkbox"/> Plug Depth _____ Packer Depth 4380							
Casing Size: 5 1/2	GRD	WT	Depth	Tubing Size: 2 7/8	GRD	WT	Spot
Casing Vol. 1.43	Tbg Vol 25.4	Ann Vol	OH Vol	Total Displacement 27			
Maximum Pressure	Tubing	Casing	Proposed Pump Time	AOL	Leave Loc		

Special Instructions: **500 gal 15% RWR-1 with 8 RETAB 2 AR630
30 2% KCL**

Treatment Record

Time	Type Fluid	Rate BPM	Increment Vol Bbls	Cum Vol Bbls	Pressure		Observations
					Tubing	Casing	
							Safety Meeting
							Prs Test to _____ psi
	ACID	1.0		1.0	0		spot
0	"	2.4		3.5	0		
4	"	2.4		11.4	0		
4	"	2.4		12.0	0		
9	"	0.0		26.8	40		
11	"	0.0		26.9	400		
17	"	0.0		27	500		
28	"	0.0		27.05	600		
50	"	0.0		27.37	600		
83	"	1.3		28.6	450		
87	"	1.6		30.6	510		
89	"	1.8		32	470		
90.5	"	1.0		33	400		
94.5	"	1.0		37	260		
96.5	"	1.0		39	240		

Treatment Synopsis

Avg Inj Rate	Fluid BPM	Total Injected			H2O 27	Acid 12	Oil
	Max	Final	Avg.	ISIP 200	5'SI 2 min	10'SI	15'SI
Customer Representative	<i>John A. Johnson</i>				Pro-Stim Supervisor: _____		