



**CONSOLIDATED**  
Oil Well Services, LLC

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

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

TICKET NUMBER 38721

LOCATION Ottawa KS

FOREMAN Fred Mader

| DATE   | CUSTOMER # | WELL NAME & NUMBER | SECTION | TOWNSHIP | RANGE | COUNTY |
|--------|------------|--------------------|---------|----------|-------|--------|
| 1/9/13 | 1318       | Aust. #29-08A      | 29      | 29       | 24    | LN     |

|   |                    |                          |                   |                |              |
|---|--------------------|--------------------------|-------------------|----------------|--------------|
| CUSTOMER<br><u>Bayswater Expl &amp; Prod</u>  |                    | TRUCK #                  |                   | DRIVER         |              |
| MAILING ADDRESS<br><u>730 17th ST Ste 610</u> |                    | <u>506</u>               | <u>Fred Mader</u> | <u>Safe</u>    | <u>Libby</u> |
| CITY<br><u>Denver</u>                         | STATE<br><u>CO</u> | ZIP CODE<br><u>80202</u> | <u>495</u>        | <u>Harbec</u>  | <u>HB</u>    |
|   |                    |                          | <u>370</u>        | <u>Kelcar</u>  | <u>KC</u>    |
|   |                    |                          | <u>558</u>        | <u>Brieman</u> | <u>BM</u>    |

JOB TYPE Longstring HOLE SIZE 6 1/4 HOLE DEPTH 502 CASING SIZE & WEIGHT 2 3/8 EUE  
 CASING DEPTH 495 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 2 1/2" Plug  
 DISPLACEMENT 2.88 BBL DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 5 BPM

REMARKS: Wait on location for logging ch. & pulling rig to run casing. Establish circulation. Mix Pump @ 100# gel. Flush Mix & Pump 99 sks 50/50 Poz Mix Cement 2 3/8 C&L Cement to surface. Flush pump & lines clean. Displace 2 1/2" Rubber plug to casing TD. Pressure to 800\* PSI. Release pressure to set float valve. Shut in casing.

McPherson Drilling - Willis Well Ser. Jack Mader

| ACCOUNT CODE | QUANTITY or UNITS | DESCRIPTION of SERVICES or PRODUCT | UNIT PRICE | TOTAL   |
|--------------|-------------------|------------------------------------|------------|---------|
| 5401         | 1                 | PUMP CHARGE                        | 495        |         |
| 5406         | 60 mi             | MILEAGE                            | 495        | 1030.00 |
| 5402         | 495               | Casing footage                     |            | 240.00  |
| 5407         | Minimum           | Ten Miles                          | 558        | N/C     |
| 5502C        | 5 hrs             | 80 BBL Vac Truck                   | 370        | 350.00  |
| 5404         | 1 hr              | Standby Time x 3 men               |            | 450.00  |
|              |                   |                                    |            | 252.00  |
| 1124         | 99 sks            | 50/50 Poz Mix Cement               |            | 1084.05 |
| 1118B        | 267#              | Premium Gel                        |            | 56.07   |
| 4402         | 1                 | 2 1/2" Rubber Plug                 |            | 25.00   |
|              |                   |                                    |            |         |
|              |                   |                                    |            |         |
|              |                   |                                    |            |         |
|              |                   |                                    |            |         |
|              |                   |                                    |            |         |
|              |                   |                                    |            |         |
|              |                   |                                    |            |         |
|              |                   |                                    |            |         |
|              |                   |                                    |            |         |
|              |                   |                                    |            |         |
|              |                   |                                    |            |         |
|              |                   |                                    |            |         |

Ravin 3737 6.3% SALES TAX 73.59  
 AUTHORIZATION [Signature] 255747 ESTIMATED TOTAL 3563.21  
 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.