



CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 41522 ✓

LOCATION Eureka

FOREMAN Steve Mead

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

FIELD TICKET & TREATMENT REPORT

API 15-207-28544 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
4-29-13	3451	Messley 12i-HP	35	235	14E	Woodson
CUSTOMER			TRUCK #			
Mailing Address			DRIVER			
CITY			TRUCK #			
STATE			DRIVER			
ZIP CODE						

JOB TYPE Surface HOLE SIZE 12 1/4 HOLE DEPTH 42' CASING SIZE & WEIGHT 8 3/8
 CASING DEPTH 40 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT 2 bbls DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: SAFETY Meeting: Rig up to 8 3/8 casing. Break circulation w/ Fresh water. Mix 40 sacks Class A Cement by 3% Caclz. Displace w/ 2 bbls Fresh water - Shut Well in. Good cement returns to surface. Job Complete Rig down

Thank you -

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	870.00	870.00
5406	43	MILEAGE	4.30	189.00
11043	40 sacks	Class A Cement	15.70	628.00
1102	100#	Caclz 3%	.78	78.00
5407	1.88 ton	Ton Mileage Bulk Truck	M/S	368.00
			SubTotal	2133.00
			SALES TAX 7.3%	51.53
			ESTIMATED TOTAL	2184.53

Revin 3737

058401

AUTHORIZATION [Signature] TITLE Toolmaster 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.



CONSOLIDATED
Oil Well Services, LLC

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

TICKET NUMBER 41559
LOCATION Eureka KS
FOREMAN Shannon Feck

API 15-207 28544
FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY																
5-2-13	3451	Masset 12i-HP	35	235	14E	Woodson																
CUSTOMER <u>Haas Petroleum</u>			<table border="1"> <thead> <tr> <th>TRUCK #</th> <th>DRIVER</th> <th>TRUCK #</th> <th>DRIVER</th> </tr> </thead> <tbody> <tr> <td>445</td> <td>Dave G</td> <td></td> <td></td> </tr> <tr> <td>611</td> <td>Joey K</td> <td></td> <td></td> </tr> <tr> <td>515</td> <td>Merle R</td> <td></td> <td></td> </tr> </tbody> </table>				TRUCK #	DRIVER	TRUCK #	DRIVER	445	Dave G			611	Joey K			515	Merle R		
TRUCK #	DRIVER	TRUCK #					DRIVER															
445	Dave G																					
611	Joey K																					
515	Merle R																					
MAILING ADDRESS <u>11551 Ash St Ste 205</u>																						
CITY <u>Leawood</u>	STATE <u>KS</u>	ZIP CODE <u>66211</u>																				
CUSTOMER <u>SKTY</u>																						

JOB TYPE 4/5 HOLE SIZE 6 7/8" HOLE DEPTH 1730' CASING SIZE & WEIGHT 4 1/2" @ 9.50#
 CASING DEPTH 1734' K.B. DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 12.8 + 13.6 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 0
 DISPLACEMENT 28 1/4 Bbl DISPLACEMENT PSI 700 MIX PSI Bump Plug @ 1100 RATE 5 BPM

REMARKS: Safety Meeting, Rig up to 4 1/2" casing, Break circulation w/ 5 Bbl H2O, mixed 150 SKS 60/40 pozmix cement w/ 8% gel & 1# pheno seal/SK @ 12.8 #/gal as our Lead cement. Tailed in w/ 50 SKS Thickset w/ 5# Kol-seal/SK @ 13.6 #/gal. Shut down wash out pump & lines, Displace w/ 28 1/4 Bbl H2O. Final pumping pressure of 700 psi, bumped plug @ 1100 psi. Plug & Float held. Good circulation @ all times, 8 Bbl Slurry to Pit. Job complete.

"Thanks Shannon & crew"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1085.00	1085.00
5406	45	MILEAGE	4.20	189.00
1131	150 SKS	60/40 pozmix cement	13.18	1977.00
1118B	1032 #	6el @ 8%	.22	227.04
1107A	150 #	Pheno seal @ 1#/SK	1.35	202.50
1126A	50 SKS	Thickset Cement	20.16	1008.00
1110A	250 #	Kol-seal @ 5#/SK	.46	115.00
5407	9.2 Tons	Ton mileage bulk Truck (x2)	M/C	736.00
4404	1	4 1/2" Rubber Plug	47.25	47.25
ENTERED				
			Sub Total	5586.79
			SALES TAX 7.3%	261.10
			ESTIMATED TOTAL	5847.89

Revin 3737

AUTHORIZATION [Signature]

TITLE [Signature]

DATE _____

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