



CONSOLIDATED
Oil Well Services, LLC

256288

TICKET NUMBER 38753

LOCATION Attacog

FOREMAN Alan Mader

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

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
1-25-13	4448	Guetterman KR-729	NE-19	14	22	JO
CUSTOMER Kansas Resources EtD			TRUCK #			
MAILING ADDRESS 9893 W 110th			DRIVER		TRUCK #	
CITY Overland Park			DRIVER		TRUCK #	
STATE KS			DRIVER		TRUCK #	
ZIP CODE 66210			DRIVER		TRUCK #	
JOB TYPE <u>long string</u>			HOLE SIZE <u>5 7/8</u>		HOLE DEPTH <u>989</u>	
CASING DEPTH <u>879</u>			DRILL PIPE		TUBING	
SLURRY WEIGHT			SLURRY VOL		WATER gal/sk	
DISPLACEMENT <u>5.1</u>			DISPLACEMENT PSI <u>800</u>		MIX PSI <u>200</u>	
			CEMENT LEFT in CASING <u>YES</u>		RATE <u>4 bpm</u>	

REMARKS: Held meeting. Established rate. Mixed & pumped 100# gel followed by 135 sk 50150 cement plus 20% gel & 1/2 phenoseal per sack. Circulated cement. Flushed pump. Pumped 2 plugs to casing TD. Well held 800 PSI. Set float. Closed valve.

Evans, Mitchell

Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	368	1030.00
5406	30	MILEAGE	368	120.00
5402	879	casing footage	368	
5407	ten miles	ten miles	510	350.00
5502C	2	80 val	675	180.00
1124	135	50150 cement		1478.25
1118B	327#	gel		68.67
1107A	68#	phenoseal		87.72
4402	2	2 1/2 plug		56.00

completed

Ravin 3737

AUTHORIZATION [Signature] TITLE _____ DATE _____

SALES TAX ESTIMATED TOTAL 127.22
3497.86

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.