

Anderson County, KS
Well: Zastrow 16-HP
Lease Owner: Haas Petroleum

Town Oilfield Service, Inc.
(913) 837-8400

Commenced Spudding:
6/27/2013

WELL LOG

Thickness of Strata	Formation	Total Depth
15	Soil-Clay	15
35	Shale	50
17	Lime	77
15	Shale	92
3	Lime	95
3	Shale	98
2	Lime	100
45	Shale	145
11	Lime	156
8	Shale	164
8	Lime	172
13	Sandy Lime	185
16	Lime	201
6	Shale	207
21	Lime	228
3	Shale	231
22	Lime	253
4	Shale	257
3	Lime	260
6	Sandy Shale	266
18	Shale	284
4	Sand	288
7	Shale	295
9	Sand	304
18	Sandy Shale	322
60	Shale	382
6	Sand	388
5	Sandy Shale	393
26	Shale	419
2	Lime	421
7	Shale	428
2	Lime	430
3	Shale	433
10	Lime	443
9	Shale	452
7	Sand	459
4	Sandy Shale	463
9	Shale	472
8	Sand	480
10	Sandy Shale	490



CONSOLIDATED
Oil Well Services, LLC

260210

TICKET NUMBER 42094
LOCATION Ottawa
FOREMAN Alan Maden

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
7-1-13	3451	Zastro 16-HP	NW 13	2D	2D	AN
CUSTOMER Haas Petroleum			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS 11551 Ash Ste 205			516	Alan Maden		
CITY STATE ZIP CODE Leawood KS 66211			368	Alan Maden		
			675	Ken Det		
			503	Dan Det		

JOB TYPE long string HOLE SIZE 5 5/8 HOLE DEPTH 800 CASING SIZE & WEIGHT 2 7/8
 CASING DEPTH 770 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING yes
 DISPLACEMENT 4 1/2 DISPLACEMENT PSI 800 MIX PSI 200 RATE 4 bpm
 REMARKS: Hooked to casing. Established rate. Mixed & pumped 100# gel followed by 98 sk 50/50 cement plus 2% gel. Circulated cement. Flushed pump. Pumped plug to casing TD. Well held 800 PSI. Set float. Closed valve.

TOS, Chad

Alan Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
3401	1	PUMP CHARGE	368	1085.00
5406	25	MILEAGE	368	105.00
5402	770	casing footage	368	—
5407	1/2 min	ton miles	503	187.00
5026	1 1/2	80 gal	675	135.00
1124	98	50/50 Cement		1127.00
118B	265 #	gel		58.30
4402	1	2 1/2 plug		29.50
SCANNED				
completed				
SALES TAX ESTIMATED TOTAL				92.94 2816.74

RAVIN 3737
 AUTHORIZATION *[Signature]* 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.