

262229

LOCATION OF Laws

FOREMAN Alga Mades

PO Box 884, Charute, KS 66720 620-431-92*0 or 800-467-8676

FIELD TICKET & TREATMENT REPORT

7-10-13 JSTOMER TTC				ENT			
JSTOMER TTC	CUSTOMER#	WELL NAME 8		SECTION	TOWNSHIP	RANGE	COUNTY
JTC (4015 W:	180n.	I./	NE 4	18	22	M:
	0:1			TRUCK#			
AILING ADDRESS	1			516	DRIVER	SG Fex	DRIVER
3568R	Plum Cr.	eck		368	Al Mad	OGIETY	Mact
ΤΥ	STATE	ZIP COL	Œ	370	Ka: Can		
Sawaton	mie. 163	Will	4	548	Mik Has		
B TYPE fonc	String HOLES	IZE 5	B HOLE DE		CASING SIZE & W	JEIGHT 27	10
SING DEPTH	594 DRILLE	PIPE	TUBING_		O SILL G	OTHER_	8
URRY WEIGHT_	SLURRY	Y VOL	WATER g	al/sk	CEMENT LEFT In		, <
PLACEMENT	3.5 DISPLA	CEMENT PSI_	OD MIX PSI_	200	RATE 46	on	<u> </u>
MARKS: He	d neetin	g. Hook	ed bo c	using Es	tablishe	0 vate	
Nixed 1	pumped	100 \$ se	1 Follo	ved by	72 5%	owe of	luste
floseal	per Souk	Cra	nlated o	ewent.	Flush	Ech in	W10 17
Lumped	2 plus to	casing	TD.	Well he	d 800	PSI 7	For
DO ME	nute Mi	E/ 50	+ floa	1. Close	d vale	Je.	
			·			4	
	N . (7)					11/11	,
116	Willing				1 Jours	name	
ACCOUNT				/	Jun w		
CODE	QUANITY or UNITS	S	DESCRIPTION	of SERVICES or PRO	DUCT	UNIT PRICE	TOTAL
5401		PUMP C	HARGE		368		10850
9406	25	MILEAGE			368		10500
5402	554	- lea	Sinc 1	potage.	318		
407A	93.6	70	n miles		548		131.98
3026	1/2	80	VGC		370		135,00
	<u> </u>						:
126	フ み	Du	-C				1422.00
11813	100#	Se	<i>></i> 1			- 1, 1	22.00
	100-	- 101	seal				4446
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107						complete	
107						经过期间的 医克里斯氏性 医克里斯氏征	
107						经过期间的 医克里斯氏性 医克里斯氏征	
107 4402							112 321
107						经过期间的 医克里斯氏性 医克里斯氏征	112.33

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.