



CONSOLIDATED
Oil Well Services, LLC

263809

TICKET NUMBER 44788
LOCATION Ottawa
FOREMAN Alan Madra

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
11-7-13	7966	Beckmeyer 33	SE 32	15	21	FK
CUSTOMER Triple T			TRUCK #			
MAILING ADDRESS 105 Anity			DRIVER			
CITY Louisburg			TRUCK #			
STATE KS			DRIVER			
ZIP CODE 66053			TRUCK #			
JOB TYPE <u>long string</u>			DRIVER			
HOLE SIZE <u>5 7/8</u>			TRUCK #			
HOLE DEPTH <u>820</u>			DRIVER			
CASING DEPTH <u>791</u>			TRUCK #			
DRILL PIPE			DRIVER			
TUBING			TRUCK #			
OTHER <u>759</u>			DRIVER			
SLURRY WEIGHT			TRUCK #			
SLURRY VOL			DRIVER			
WATER gal/sk			TRUCK #			
CEMENT LEFT in CASING <u>YES</u>			DRIVER			
DISPLACEMENT			TRUCK #			
DISPLACEMENT PSI <u>800</u>			DRIVER			
MIX PSI <u>200</u>			TRUCK #			
RATE <u>4 bpm</u>			DRIVER			
REMARKS: <u>Held meeting. Established rate down casing. Mixed and pumped 108 # gel followed by 109 sk 50/50 cement plus 2 1/2 gal. Circulated cement. Flushed pump. Pumped plug to baffle. Well held 800 PSI. Set plug. Closed valve.</u>						

TDS, Was

Alan Madra

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	368	1085.00
5406	20	MILEAGE	368	89.00
5402	791	casing footage	368	
5407	mi	ten miles	510	368.00
5502C	2	80 vac	369	180.00
1124	109	50/50 Cem		1253.50
118B	283#	gel		62.26
4402	1	2 1/2 plug		29.50
completed				

Ravin 9737

NO company rep available

SALES TAX 102.91
ESTIMATED TOTAL 3165.17

AUTHORIZATION Jim OK'd 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 fo