



#1 Mendenhall Unit
2165' FSL & 2600' FWL
185' N & 40' W of N/2 S/2 Section 15-13S-28W
Gove County, Kansas
API# 15-063-22137-00-00
Elevation: 2568' GL, 2573' KB

Sample Tops			Ref. Well
Anhydrite	2051'	+522	-10
B/Anhydrite	2091'	+482	-10
Stotler	3338'	-765	N/A
Heebner	3701'	-1128	+10
Toronto	3723'	-1150	+9
Lansing	3740'	-1167	+8
Muncie Shale	3882'	-1309	+9
Stark Shale	3979'	-1406	+6
Hush	4011'	-1438	+6
BKC	4032'	-1459	+6
Altamont	4089'	-1516	+4
Pawnee	4157'	-1584	+2
Myrick	4194'	-1621	+5
Fort Scott	4238'	-1665	+7
Cherokee Shale	4264'	-1691	+5
Johnson	4311'	-1738	+2
Mississippian	4350'	-1777	Flat
RTD	4500'	-1927	



262747

TICKET NUMBER 44330
 LOCATION Oakley, Ks.
 FOREMAN Dawson

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
9/28/13	7173	mendenhall #1	15	13	28	Gove Ks.
CUSTOMER Ritchie Exploration			Gove S			
MAILING ADDRESS			To O RD			
CITY			2E-15			
STATE			2E Nite			
ZIP CODE						
			TRUCK #	DRIVER	TRUCK #	DRIVER
			463	Cory		
			466	Steven		

JOB TYPE PTA HOLE SIZE 7 7/8 HOLE DEPTH 4500' CASING SIZE & WEIGHT _____
 CASING DEPTH _____ DRILL PIPE 4 1/2 2070' TUBING _____ OTHER _____
 SLURRY WEIGHT 12 1/2 - 13 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT In CASING _____
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety Meeting Rig up on WW-2 Plug as ordered
2070' - 25 SKs
1120' - 100 SKs
225' - 40 SKs 205 SKs 60/40 4% Gel 1/4" Floseal
40' - 10 SKs
Plug Rathole 30 SKs.

Thank Dawson & Crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405N	1	PUMP CHARGE	\$1395.00	\$1395.00
5406	30	MILEAGE	\$5.25	\$157.50
5407A	8.82	Ton Mileage Delivery	\$1.75	\$154.35
1131	20.5 SKs	60/40 100 P32	\$15.86	\$325.13
1118B	705*	Bentonite	\$.27	\$190.35
1107	51*	Floseal	\$2.92	\$149.12
4432	1	Wooden Plug 8 3/8	\$100.75	\$100.75
			Sub Total	\$5709.57
			Less 10%	\$570.96
				\$5138.61
			7.90%	
			SALES TAX	262.64
			ESTIMATED TOTAL	5401.25

Rev'n 3737

AUTHORIZATION [Signature] TITLE [Signature] 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.

