

2 HP WEST 20 FT. 7" SUS 40 PIPE

Installed 10/28/13

- 0-4 CLAY
- 4-50 LIME
- 50-78 Schale
- 78-93 lime
- 93-113 Schale
- 113-115 lime
- 115-175 Schale
- 175-214 lime
- 214-220 Black Slate
- 220-240 lime
- 240-260 Schale
- 260-270 lime
- 270-280 Schale
- 280-360 lime
- 360-510 Big Schale
- 510-514 lime
- 514-527 Schale
- 527-602 lime
- 602-610 Schale
- 610-615 lime
- 615-657 Schale
- 657-665 Sand
- ~~665-690~~ Schale
- 690 TD

679 pipe



CONSOLIDATED
Oil Well Services, LLC

263577

TICKET NUMBER 44767

LOCATION Ottawa, KS

FOREMAN Casen Kennedy

PO Box 834, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10/28/13	3457	West # 848	NE 1	16	21	M1
CUSTOMER Hess Petroleum			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS 11551 Ash St Suite 205			481	Cashen	✓	Safety Meeting
CITY STATE ZIP CODE Leawood KS 66211			1006	Carlson	✓	
			548	Mikhaa	✓	
			340	Keitar	✓	

JOB TYPE longstring HOLE SIZE 5 5/8" HOLE DEPTH 690' CASING SIZE & WEIGHT 2 7/8" EUE
 CASING DEPTH 684' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT 3.96 bbls DISPLACEMENT PSI _____ MIX PSI _____ RATE 4.5 bpm

REMARKS: held safety meeting, established circulation, mixed & pumped 200 # Premium Gel followed by 10 bbls fresh water, mixed & pumped 120 sks 50/50 Pozmix cement w/ 2% gel per sk, cement to surface. Flushed pump clean, pumped 2 1/2" rubber plug to casing TD w/ 3.96 bbls fresh water, pressured to 800 PSI, released pressure, shut in casing.

[Handwritten signature]

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		1085.00
5406	20 mi	MILEAGE		84.00
5402	684'	casing footage		
5407	minimum	van mileage		368.00
5502C	3 hrs	80 Vac		270.00
1124	120 sks	50/50 Pozmix cement		1380.00
1118B	402 #	Premium Gel		88.44
4402	1	2 1/2" rubber plug		29.50
completed				
			7.4%	SALES TAX
				110.84
				ESTIMATED TOTAL
				3415.78

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