



CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
Fax 620/431-0012

INVOICE

Invoice # 261032

Invoice Date: 07/30/2013 Terms:

Page 1

KREMEIER OIL & GAS, INC
3183 US HIGHWAY 56
HERINGTON KS 67449
(785) 258-2321

CARL #3
42894
32-13-3E
07-23-13
KS

Part Number	Description	Qty	Unit Price	Total
1131	60/40 POZ MIX	37.00	13.1800	487.66
1118B	PREMIUM GEL / BENTONITE	74.00	.2200	16.28

Description	Hours	Unit Price	Total
446 P & A OLD WELL	1.00	500.00	500.00
446 EQUIPMENT MILEAGE (ONE WAY)	.00	4.20	.00
491 MIN. BULK DELIVERY	.00	368.00	.00

Parts:	503.94	Freight:	.00	Tax:	36.03	AR	1039.97
Labor:	.00	Misc:	.00	Total:	1039.97		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____

Date _____

BARTLESVILLE, OK
918/338-0808

EL DORADO, KS
316/322-7022

EUREKA, KS
620/583-7664

PONCA CITY, OK
580/762-2303

OAKLEY, KS
785/672-8822

OTTAWA, KS
785/242-4044

THAYER, KS
620/839-5269

GILLETTE, WY
307/686-4914

CUSHING, OK
918/225-2650



ENTERED

TICKET NUMBER 42894 X
 LOCATION 180
 FOREMAN Jacob Storm

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
7-23-13	4493	CAF1 #3	32	13	3E	Maris
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Kremer oil and gas			446	Josh		
MAILING ADDRESS			491	Jeramym		
3183 us Highway 56			702	Jacob		
CITY	STATE	ZIP CODE				
Herinton	KS	67449				

JOB TYPE plug B HOLE SIZE _____ HOLE DEPTH _____ CASING SIZE & WEIGHT 2 7/8
 CASING DEPTH _____ DRILL PIPE _____ TUBING 1" OTHER _____
 SLURRY WEIGHT 13 15 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting Run 1" to 30 ft mix shs
60/40 p02 2 1/2 gal pull 1" top off with 7 shs 60/40
p02 B/gel Job complete

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405N	1	PUMP CHARGE	500.00	500.00
5406	80	MILEAGE	4.20	N/K
5407	1	min bulk delivery	368.00	N/K
1131	37	60/40 p02	13.18	487.66
1118 B	74	gel	.22	16.28
			Subtotal	1003.94
			SALES TAX	36.03
			ESTIMATED TOTAL	1039.97

Ravin 3737

061032

AUTHORIZATION Josh 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.