



CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 43429
LOCATION Eureka KS
FOREMAN Shannon Feck

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

API # 15-205-28211

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-4-13	8926	Pier Point # Strat 2				WL
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Wilson County Holdings LLC			445	Dave G		
MAILING ADDRESS			611	Joey K		
111 Congress Ave Ste 400			88	Rudy M	MLCoy Trucking	
CITY	STATE	ZIP CODE				
Austin	TX	78701				

JOB TYPE P.T.A HOLE SIZE 6 7/8" HOLE DEPTH 1115' CASING SIZE & WEIGHT 7" Surface Pipe
 CASING DEPTH _____ DRILL PIPE _____ TUBING 2 3/8" OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____
 REMARKS: Rig up to 2 3/8" tubing + set following plugs

- #1 @ 1110' w/ 25 SKS
- #2 @ 500' w/ 25 SKS
- #3 @ 250' to surface w/ 60 SKS

"Thanks Shannon & Crew"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405A	1	PUMP CHARGE	500.00	500.00
5406	φ	MILEAGE N/C on Location #4 of 4 wells	N/C	N/C
1131	110 SKS	60/40 Pozmix cement	13.18	1449.80
1118B	380 #	Gel @ 4%	.22	83.60
5407	4.73 Tons	Ton mileage bulk Truck	m/c	368.00
5502C	3 Hrs	80 Bd Vac Truck	90.00	270.00
1123	3300 gal	City #120	17.30/1000	57.09
			SubTotal	2728.49
			SALES TAX 6.15%	97.81
			ESTIMATED TOTAL	2826.30

Revin 3737

062006

AUTHORIZATION _____

TITLE _____

DATE _____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's office, and conditions of service on the back of this form are in effect for services identified on this form.