



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 # 266092

Invoice Date: 02/21/2014 Terms: 0/0/30,n/30

Page 1

D.E. EXPLORATION
DOUG EVANS
P.O. BOX 128
WELLSVILLE KS 66092
(785) 883-4057

WEBB A R-15
42598
NE 10-23-16
02-20-2014
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	30.00	11.5000	345.00
1118B	PREMIUM GEL / BENTONITE	51.00	.2200	11.22
1111	SODIUM CHLORIDE (GRANULA	58.00	.3900	22.62
1110A	KOL SEAL (50# BAG)	150.00	.4600	69.00
Description		Hours	Unit Price	Total
370	80 BBL VACUUM TRUCK (CEMENT)	1.00	90.00	90.00
495	CEMENT PUMP (SURFACE)	1.00	870.00	870.00
495	EQUIPMENT MILEAGE (ONE WAY)	.00	4.20	.00
495	CASING FOOTAGE	40.00	.00	.00
548	TON MILEAGE DELIVERY	69.75	1.41	98.35

Parts: 447.84 Freight: .00 Tax: 27.54 AR 1533.73
 Labor: .00 Misc: .00 Total: 1533.73
 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



CONSOLIDATED
Oil Well Services, LLC

266092

TICKET NUMBER 42598

LOCATION Ottawa KS

FOREMAN Fred Maden

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
2/20/14	2355	Webb "A" # R-15	NE 10	23	16	CF
CUSTOMER D E Exploration Inc			TRUCK #			
MAILING ADDRESS P.O. Box 128			DRIVER			
CITY Wellsville		STATE KS	ZIP CODE 66092	TRUCK #		
				DRIVER		
				712	FreMad	
				495	HarBoc	
				370	Jas Ric	
				548	MikHaa	

JOB TYPE Surface HOLE SIZE 12 1/4 HOLE DEPTH 40' CASING SIZE & WEIGHT 7"
 CASING DEPTH 40' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 10'
 DISPLACEMENT 1.75 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 5 BPM

REMARKS: Hold crew safety meeting. Establish circulation thru 7" casing.
Mix + Pump 30 sks 50/50 Por Mix Cement 2% Gel 5% Salt
5# Kal Seal/sk. Cement to surface. Displace 7" casing clean
w/ 1.75 BBL water. Shut in casing.

Finney Drilling

Fred Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	495	495.00 ✓
5406	-	MILEAGE		N/C ✓
5402	40'	Casing footage		N/C ✓
5407A	69.75	Ton Miles	548	9835.50 ✓
5502C	1	80 BBL Vac Truck	370	370.00 ✓
1124	30 SKS	50/50 Por Mix Cement		345.00 ✓
1115B	51 #	Premium Gel		1123.50 ✓
111	58 #	Granulated Salt		2263.00 ✓
110A	150 #	Kal Seal		69.00 ✓
			6.15%	SALES TAX
				ESTIMATED TOTAL
				2754.00 ✓
				153373.00 ✓

Ravin 3737

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.



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 Dept. 970
 P.O. Box 4346
 Houston, TX 77210-4346

MAIN OFFICE
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 Chanute, KS 66720
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 Fax 620/431-0012

INVOICE

Invoice # 266182

Invoice Date: 02/27/2014 Terms: 0/0/30,n/30

Page 1

D.E. EXPLORATION
 DOUG EVANS
 P.O. BOX 128
 WELLSVILLE KS 66092
 (785) 883-4057

WEBB A R-15
 42599
 NE 10-23-16
 02-24-2014
 KS

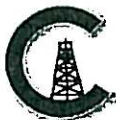
Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	160.00	11.5000	1840.00
1118B	PREMIUM GEL / BENTONITE	369.00	.2200	81.18
1111	SODIUM CHLORIDE (GRANULA	310.00	.3900	120.90
1110A	KOL SEAL (50# BAG)	800.00	.4600	368.00
4402	2 1/2" RUBBER PLUG	1.00	29.5000	29.50

Description	Hours	Unit Price	Total
495 CEMENT PUMP	1.00	1085.00	1085.00
495 EQUIPMENT MILEAGE (ONE WAY)	50.00	4.20	210.00
495 CASING FOOTAGE	1057.00	.00	.00
548 TON MILEAGE DELIVERY	372.00	1.41	524.52
675 80 BBL VACUUM TRUCK (CEMENT)	2.00	90.00	180.00

Parts:	2439.58	Freight:	.00	Tax:	150.03	AR	4589.13
Labor:	.00	Misc:	.00	Total:	4589.13		
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



CONSOLIDATED
Oil Well Services, LLC

266182

TICKET NUMBER 42599

LOCATION Ottawa KS

FOREMAN Fred Madur

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	
2-24-14	2355	Webb "A" # R.15	NE 10	23	16	CF	
CUSTOMER <u>D E Exploration Inc</u>							
MAILING ADDRESS <u>P.O. Box 128</u>							
CITY <u>Wellsville</u>							
STATE <u>KS</u>							
ZIP CODE <u>66092</u>							
TRUCK #		DRIVER		TRUCK #		DRIVER	
712		Fred Mad					
495		Har Bec					
675		Kai Bost					
548		Mik Haa					

JOB TYPE Long string HOLE SIZE 5 7/8 HOLE DEPTH 1062 CASING SIZE & WEIGHT 2 7/8" 10 RD
 CASING DEPTH 1059 DRILL PIPE Baffle in TUBING @ 1026 OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 30' + Plug
 DISPLACEMENT 5.96 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 5 BPM

REMARKS: Hold crew safety meeting. Establish circulation. Mix Pump 100# Gel
Flush Mix Pump 160 sks 50/50 Por Mix Cement 290 Gal 5% Salt
5# Kal Seal/sk. Cement to surface. Flush pump + lines clean
Displace 2 1/2" Rubber plug to baffle in casing. Pressure to 400
PSI. Release pressure to set float valve. Shut in Casing

Finney Drilling

Fred Madur

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	1085 ⁰⁰
5406	50 mi	MILEAGE	495	210 ⁰⁰
5402	1057	Casing footage		N/C
5407A	372	Ten Miles	548	52452 ⁰⁰
5502C	2 hrs	80 BBL Nac Truck	675	180 ⁰⁰
1124	160 sks	50/50 Por Mix Cement		1840 ⁰⁰
1118B	369#	Premium Gel		8118
1111	310#	Granulated Salt		12090
1110A	800#	Kal Seal		368 ⁰⁰
4402	1	2 1/2" Rubber Plug		2950
			6.15%	SALES TAX
				ESTIMATED
				TOTAL
				4589 ¹³

completed!

Ravin 3737

AUTHORIZATION Kay J Mu 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.