



CONSOLIDATED
Oil Well Services, LLC

267544

TICKET NUMBER 47073
LOCATION Ottawa
FOREMAN Alan Mader

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
4/28/14	7823	howe T:8	64 18	17	25	MI
CUSTOMER			TRUCK #			
Mailing Address			DRIVER			
CITY			TRUCK #			
STATE			DRIVER			
ZIP CODE			TRUCK #			
HOLE SIZE			HOLE DEPTH			
DRILL PIPE			TUBING			
SLURRY VOL			WATER gal/sk			
DISPLACEMENT PSI			MIX PSI			
CEMENT LEFT in CASING			RATE			

CUSTOMER: Town Oil
 Mailing Address: 16205 W 287
 CITY: Paola STATE: KS ZIP CODE: 66071
 HOLE SIZE: 5 5/8 HOLE DEPTH: 493 CASING SIZE & WEIGHT: 2 1/2
 DRILL PIPE: _____ TUBING: _____ OTHER: _____
 SLURRY VOL: _____ WATER gal/sk: _____ CEMENT LEFT in CASING: yes
 DISPLACEMENT PSI: _____ MIX PSI: _____ RATE: 4 bpm
 REMARKS: Held needles. Established rate. Mixed and pumped 23 sk 50/50 cement plus 20% gel. Circulated cement. Flashed pump. Pumped plug to casing TD. Well held 800 PGL for 30 minute M.B.T. Set float.

1.05 Chad
Town Water

Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	368	1085.00
5406	40	MILEAGE	368	168.00
5402	472	casing footage	368	
5407	mi	fun miles	503	368.00
1124	23	50/50 cement	839.50	
1118B	123#	gel	2706	
		material sub	866.56	
		less 30%	-259.97	
		material total		606.59
4402	1	2 1/2 plug		29.50
			2585.61	

RAVIN 3787

AUTHORIZATION [Signature]

TITLE _____

DATE _____

completed
SALES TAX ESTIMATED 48.60
TOTAL 2306.25

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.