



**CONSOLIDATED**  
Oil Well Services, LLC

265004

TICKET NUMBER 45790  
LOCATION Eureka, KS  
FOREMAN David Gardner

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

**FIELD TICKET & TREATMENT REPORT**

**CEMENT**

API # 15-207-28788

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-20-13	8520	Earl Davidson #12	6	25S	16E	Woodson
CUSTOMER			TRUCK #			
Verde Oil			DRIVER			
MAILING ADDRESS			TRUCK #			
3345 Arizona Rd.			DRIVER			
CITY			TRUCK #			
Savanburg			DRIVER			
STATE			TRUCK #			
KS			DRIVER			
ZIP CODE			TRUCK #			
66722			DRIVER			

JOB TYPE 1/2 O HOLE SIZE \_\_\_\_\_ HOLE DEPTH 1055' CASING SIZE & WEIGHT \_\_\_\_\_  
 CASING DEPTH 1036' DRILL PIPE \_\_\_\_\_ TUBING 2 7/8" OTHER \_\_\_\_\_  
 SLURRY WEIGHT 13.8\*/gal SLURRY VOL 39 Bbl WATER gal/sk 6 CEMENT LEFT in CASING 0  
 DISPLACEMENT 6 Bbl DISPLACEMENT PSI 450 ~~Bump~~ Plug 950 PSI RATE 1 BPM

REMARKS: Safety Meeting. Rig up to 2 7/8" Tubing. Break circulation w/ 10 Bbl Fresh water. Mix 200# Gel-Flush. 5 Bbl water spacer. Mix 1100 sks 50/50 Pozmix Cement w/ 5# Katseal /sk, 2% Gel, 5% Salt, + 1/4# Phenaseal/sk. Shut down. Washout pump + lines. Load 2 7/8" Latch down plug in tubing. Displaced w/ 6 Bbl Fresh water. Final pumping pressure of 450 PSI. Bump plug to 950 PSI. Release pressure. Plug held. Shut well in @ 0 PSI. Good circulation @ all times. 7 Bbl cement slurry to pit. Job Complete. Rig down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5901	1	PUMP CHARGE	1085.00	1085.00
5406	35	MILEAGE	4.20	147.00
1124	1160 SKS	50/50 Pozmix Cement	11.50	1840.00
11104	800#	Katseal @ 5#/sk	.46	368.00
1118B	300#	Gel @ 2%	.22	66.00
1111	400#	Salt @ 5%	.39	156.00
1107A	40#	Phenaseal @ 1/4#/sk	1.35	54.00
1118B	200#	Gel-Flush	.22	44.00
5407	6.72 Tons	Ton Mileage Bulk Truck	M/C	368.00
5502C	3 HRS.	80 Bbl Vac Truck	90.00	270.00
1123	3360 Gals.	City Water	17.30/1000	58.13
			Subtotal	4456.13
		"Thank You"	SALES TAX 7.15%	184.91
			ESTIMATED TOTAL	4641.04

completed

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... and conditions of service on the back of this form are in effect for services identified on this form