



**CONSOLIDATED**  
Oil Well Services, LLC

264937

TICKET NUMBER 45814

LOCATION Eureka

FOREMAN Steve Neal

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

**FIELD TICKET & TREATMENT REPORT**

CEMENT APT 15-209-28791

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-19-13	8530	E. Davidson 17-A	6	25S	16E	Woodson
CUSTOMER <u>Verde oil</u>						
MAILING ADDRESS <u>3345 Arizona Rd</u>						
CITY <u>Savannah</u>		STATE <u>KS</u>	ZIP CODE <u>66732</u>			
			TRUCK #	DRIVER	TRUCK #	DRIVER
			<u>485</u>	<u>Alan</u>		
			<u>611</u>	<u>Joey</u>		
			<u>637</u>	<u>Jim</u>		

JOB TYPE <u>L/S</u>	HOLE SIZE	HOLE DEPTH <u>1055'</u>	CASING SIZE & WEIGHT
CASING DEPTH <u>1047'</u>	DRILL PIPE	TUBING <u>2 3/8</u>	OTHER
SLURRY WEIGHT	SLURRY VOL	WATER gal/sk	CEMENT LEFT in CASING
DISPLACEMENT <u>6.07 bbls</u>	DISPLACEMENT PSI <u>600*</u>	Bump MIX PSI <u>plug 1200*</u>	RATE

REMARKS: Safety Meeting. Rig up to 2 3/8 tubing. Break Circulation w/ 9 bbls Fresh Water. Pump 200\* Gel Flush + 5 bbls water spacer. Mix 160 sks 50/50 Pozmix Cement w/ 5\* Kal-Seal, 2% Gel, 5% Salt + 1/4\* Phenoseal per 1 sk. Shut down Washout Pump & lines. Load Latchdown Plug in Tubing. Displace w/ 6.07 bbls Fresh water. Final pumping Pressure 600\* Bump Plug 1200\*. Release pressure Plug held. Shut well in 0\*. Good Cement Return to surface 6 bbl to pit. Job Complete Rig down

*Thank you*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1085.00	1085.00 ✓
5406	35	MILEAGE	4.20	147.00 ✓
1124	160 sks	50/50 Pozmix cement	11.50	1840.00 ✓
1110A	800*	Kal-Seal 5* per 1 sk	.46	368.00 ✓
1118B	300*	Gel 2%	.22	66.00 ✓
1111	400*	Salt 5%	.39	156.00 ✓
1107A	40*	Phenoseal 1/4* per 1 sk	1.35	54.00 ✓
1118B	200*	Gel Flush	.22	44.00 ✓
5407	6.73 Ton	Ton mileage Bulk Truck	n/c	368.00 ✓
5502C	3 hrs	80 bbl vacuum Truck	90.00	270.00 ✓
1123	3000 gallons	City Water	17.39/gal	51.90 ✓
			<b>SubTotal</b>	<b>4449.90</b>
			SALES TAX	184.46
			ESTIMATED TOTAL	4634.36 ✓

**completed**

Ravin 3737

AUTHORIZATION Darrin Bryant

TITLE \_\_\_\_\_ DATE \_\_\_\_\_

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's...