

CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 29212
LOCATION Eureka
FOREMAN Troy Strickler

4x 884, Chanute, KS 66720
431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY	
10-19-10	13105	Miller 9-A				Qu	
CUSTOMER BRL OIL LLC			Safety meeting JM	TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS 1150 Roper Rd. SE				445	Jurhn		
CITY Burlington				479	Allen B		
STATE Ks				487	Jim		
ZIP CODE 66879							

JOB TYPE P.T.A. New 'o' HOLE SIZE _____ HOLE DEPTH _____ CASING SIZE & WEIGHT _____
CASING DEPTH _____ DRILL PIPE 2270' 3/8" TUBING _____ OTHER _____
SLURRY WEIGHT 14.8# SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety Meeting: Rig up to 3 1/2" Drill Pipe. Set Plugs as Follows:

15sk @ 2277'
15sk @ 1386'
50sk 150' to surface
80sk Total

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405 N	1	PUMP CHARGE	925.00	925.00
5406	30	MILEAGE	3.65	109.50
1131	80skt	60/40 Poz-mix	11.35	908.00
1118B	275#	42 Gel	.20	55.00
5407		Ton-mileage	19/c	315.00
5502C	4hrs	800bl Vac Time	85.00/Lr	740.00
1123	300gal	City water	14.90/1000	44.70
		<u>Thanks</u>	<u>Sub Total</u>	<u>2697.20</u>
			SALES TAX	73.56
			ESTIMATED TOTAL	2770.76

Form 3737

AUTHORIZATION Dan Mueller TITLE 231454 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.