

Town Oilfield Service

P.O Box 339 Louisburg, Ks 66053
913-837-8400

Ticket Number _____
Location _____
Foreman _____

Field Ticket & Treatment Report Cement

Date	Customer#	Well Name & Number	Section	Township	Range	County
7-24-14	KRAO	Joctel CW-3A				
Customer			Mailing Address			
			City	State	Zip Code	

Job Type Plug Hole Size 2 1/2 Hole Depth _____ Casing Size & Weight _____
Casing Depth _____ Drill Pipe _____ Tubing _____ Other _____
Displacement 4.6 Displacement PSI 1000 Mix PSI 200 Rate _____

Remarks Spud with 35 sacs of class A cement

Account Code	Quantity or Units	Description of Services or Product	Unit Price	Total
		Pump Charge		400
		Cement Truck		100
		Water Truck		100
	35	Cement	10	350
		Gel		
		Plug		
			Sales Tax	
Estimated Total				950

Authorization [Signature] Title _____ Date 7-24-14

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.