



CONSOLIDATED
Oil Well Services, LLC

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

264957

TICKET NUMBER 44930

LOCATION Ottawa, KS

FOREMAN Casey Kennedy

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12/19/13	7818	Eggers # N-11	SW 7	26	17	WO
CUSTOMER Three Way Oil Co.			TRUCK #		DRIVER	
MAILING ADDRESS PO Box 1000			729		Casper	
CITY Miami			57		Garman	
STATE OK			510		Set Inc	
ZIP CODE 74354			675		Kei Det	
			TRUCK #		DRIVER	
			729		Casper	
			57		Garman	
			510		Set Inc	
			675		Kei Det	

JOB TYPE long string HOLE SIZE 5 7/8" HOLE DEPTH 932' CASING SIZE & WEIGHT 2 7/8" EUE
 CASING DEPTH 924' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT IN CASING _____
 DISPLACEMENT 5.35 bbls DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 bpm

REMARKS: held safety meeting, established circulation, mixed & pumped 100# Premium Gel followed by 10 bbls fresh water, mixed & pumped 115 sks OWC cement, cement to surface, flushed pump clean, pumped 2 1/2" rubber plug to casing TD w/ 5.35 bbls fresh water, pressured to 800 PSI, released pressure, shut in casing.

[Signature]

Customer supplied H₂O

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		1085.00
5406	70 mi	MILEAGE		294.00
5402	924'	casing footage		
5407A	414.575	ton mileage		584.55
1126	115 sks	owc cement		2276.25
1118B	100 #	Premium Gel		22.00
4402	1	2 1/2" rubber plug		29.50
			7.15%	
		SALES TAX		1166.07
		ESTIMATED TOTAL		4452.37

Authorization No Co. Rep. on location TITLE _____ 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