



CONSOLIDATED
Oil Well Services, LLC

269762

TICKET NUMBER 47467
LOCATION O + 7 a w g
FOREMAN Alan Mader

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

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7-18-14	7823	Savage 2-w	NW 5	18	21	FR

CUSTOMER	TRUCK #	DRIVER	TRUCK #	DRIVER
Town Oil	730	Alan Mader	Safety	Moet
	368	Alan Mader		
	558	Barbie		

MAILING ADDRESS	CITY	STATE	ZIP CODE
16205 W 287 St	Paola	KS	66071

JOB TYPE long string HOLE SIZE 5 5/8 HOLE DEPTH 722 CASING SIZE & WEIGHT 2 7/8
 CASING DEPTH 714 DRILL PIPE _____ TUBING _____ OTHER pin 709
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING yes
 DISPLACEMENT 4.12 DISPLACEMENT PSI 800 MIX PSI 200 RATE 4 1/2 pm

REMARKS: Held meeting. Established rate. Mixed & pumped 100# gel followed by 91 sk 50/50 cement plus 2" gel. Circulated cement. Flushed pump. Pumped plug to pin. Well held 800 PSI for 30 minute MIT. Closed valve

Scott Kirkland Drill & H&D

Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	368	1085.00 ✓
5406	20	MILEAGE	368	84.00 ✓
5402	714	Casing footage	368	— ✓
5407	min	ten miles	358	368.00 ✓
1124	91	50/50 cement	1046.50	✓
1100	253#	gel	55.66	✓
		Material sub	1102.16	✓
		less 30% -	330.65	✓
		Material total		771.51 ✓
4402	1	2 1/2 plug		29.50 ✓
			2755.23	
		SALES TAX		66.28 29
		ESTIMATED TOTAL		2399.29 30

AUTHORIZATION Scott Kirkland TITLE 7-18-14 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 fo