



**CONSOLIDATED**  
Oil Well Services, LLC

TICKET NUMBER 47547

LOCATION Ottawa, KS

FOREMAN Casey Kennedy

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

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

| DATE   | CUSTOMER # | WELL NAME & NUMBER | SECTION                  | TOWNSHIP | RANGE | COUNTY |         |        |         |        |     |       |   |                |      |        |   |  |     |        |   |  |     |        |   |  |
|--|------------|--------------------|--------------------------|----------|-------|--------|---------|--------|---------|--------|-----|-------|---|----------------|------|--------|---|--|-----|--------|---|--|-----|--------|---|--|
| 8/1/14   | 2579       | Anderson #BSI-AL22 | SW 29                    | 18       | 21    | FR     |         |        |         |        |     |       |   |                |      |        |   |  |     |        |   |  |     |        |   |  |
| CUSTOMER<br><u>Enerjex Resources</u>   |            |                    |                          |          |       |        |         |        |         |        |     |       |   |                |      |        |   |  |     |        |   |  |     |        |   |  |
| MAILING ADDRESS<br><u>10975 Grandview Dr</u>   |            |                    |                          |          |       |        |         |        |         |        |     |       |   |                |      |        |   |  |     |        |   |  |     |        |   |  |
| CITY<br><u>Overland Park</u>   |            | STATE<br><u>KS</u> | ZIP CODE<br><u>66210</u> |          |       |        |         |        |         |        |     |       |   |                |      |        |   |  |     |        |   |  |     |        |   |  |
| <table border="1"> <thead> <tr> <th>TRUCK #</th> <th>DRIVER</th> <th>TRUCK #</th> <th>DRIVER</th> </tr> </thead> <tbody> <tr> <td>729</td> <td>Coker</td> <td>✓</td> <td>Safety Meeting</td> </tr> <tr> <td>6666</td> <td>Keitar</td> <td>✓</td> <td></td> </tr> <tr> <td>548</td> <td>DusWeb</td> <td>✓</td> <td></td> </tr> <tr> <td>675</td> <td>MikFox</td> <td>✓</td> <td></td> </tr> </tbody> </table> |            |                    |                          |          |       |        | TRUCK # | DRIVER | TRUCK # | DRIVER | 729 | Coker | ✓ | Safety Meeting | 6666 | Keitar | ✓ |  | 548 | DusWeb | ✓ |  | 675 | MikFox | ✓ |  |
| TRUCK #  | DRIVER     | TRUCK #            | DRIVER                   |          |       |        |         |        |         |        |     |       |   |                |      |        |   |  |     |        |   |  |     |        |   |  |
| 729  | Coker      | ✓                  | Safety Meeting           |          |       |        |         |        |         |        |     |       |   |                |      |        |   |  |     |        |   |  |     |        |   |  |
| 6666   | Keitar     | ✓                  |                          |          |       |        |         |        |         |        |     |       |   |                |      |        |   |  |     |        |   |  |     |        |   |  |
| 548  | DusWeb     | ✓                  |                          |          |       |        |         |        |         |        |     |       |   |                |      |        |   |  |     |        |   |  |     |        |   |  |
| 675  | MikFox     | ✓                  |                          |          |       |        |         |        |         |        |     |       |   |                |      |        |   |  |     |        |   |  |     |        |   |  |

JOB TYPE long string HOLE SIZE 6" HOLE DEPTH 700' CASING SIZE & WEIGHT 2 7/8" EVE  
 CASING DEPTH 667' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING \_\_\_\_\_  
 DISPLACEMENT 3.86 bbls DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 4 bpm

REMARKS: held safety meeting, established circulation, mixed & pumped 200# Premium Gel followed by 10 bbls fresh water, mixed & pumped 93 sks 70/30 Pozmix cement w/ 2% gel, 3% salt, + 1/2# Phenoseal per sk, cement to surface, flushed pump clean, pumped 2 1/2" rubber plug to casing TD w/ 3.86 bbls fresh water pressured to 800 PSI, well held pressure for 30 min MIT, released pressure, shut-in casing.

*Handwritten signature*

| ACCOUNT CODE | QUANTITY or UNITS | DESCRIPTION of SERVICES or PRODUCT | UNIT PRICE      | TOTAL   |
|--------------|-------------------|------------------------------------|-----------------|---------|
| 5401         | 1                 | PUMP CHARGE                        |                 | 1085.00 |
| 5406         | 20 mi             | MILEAGE                            |                 | 84.00   |
| 5402         | 667'              | casing footage                     |                 |         |
| 5407         | minimum           | tax mileage                        |                 | 368.00  |
| 5502c        | 2 hrs             | 80 vac                             |                 | 200.00  |
| 1127         | 93 sks            | 70/30 Pozmix cement                | 13.35           | 1241.55 |
| 1118B        | 364 #             | Premium Gel                        | 80.30           |         |
| 1111         | 205 #             | Salt                               | 79.95           |         |
| 1107A        | 47 #              | Phenoseal                          | 63.45           |         |
|              |                   | materials                          | 1465.25         |         |
|              |                   | - 30%                              | 439.58          |         |
|              |                   | Subtotal                           |                 | 1025.67 |
| 4402         | 1                 | 2 1/2" rubber plug                 |                 | 29.50   |
|              |                   |                                    | 3345.86         |         |
|              |                   | 7.65%                              | SALES TAX       | 80.72   |
|              |                   |                                    | ESTIMATED TOTAL | 2872.89 |

Revin 3737

AUTHORIZATION No Co. Rep.

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.