



CONSOLIDATED
Oil Well Services, LLC

269631

TICKET NUMBER 47402

LOCATION Ottawa

FOREMAN Alan Mader

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
7-3-14	1601	Schmidt 14-14	SW 5	15	22	JO

CUSTOMER
Bradley, Oil

MAILING ADDRESS
P.O. Box 21614

CITY
Oklahoma City STATE
OK ZIP CODE
73156

TRUCK #	DRIVER	TRUCK #	DRIVER
730	Alan Mader	Safety Moot	
368	Art McJ		
369	Mik Hog		
503	Trotter		

JOB TYPE long string HOLE SIZE 5 7/8 HOLE DEPTH 898 CASING SIZE & WEIGHT 2 7/8

CASING DEPTH 893 DRILL PIPE _____ TUBING _____ OTHER _____

SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING yes

DISPLACEMENT 5.19 DISPLACEMENT PSI 800 MIX PSI 200 RATE 4 bpm

REMARKS: Held meeting. Established circulation. Mixed & pumped 100# gel followed by 125 sk 50/50 cement plus 2% gel. Circulated cement. Flushed pump. Pumped plug to casing TD. Well held 800 PSI. Set float. Closed valve.

HAT, Eric

Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	368	1085.00 ✓
5406	30	MILEAGE	368	126.00 ✓
5402	893	casing footage	368	✓
5407	m.i	ton miles	503	368.00 ✓
5502C	2	80 vac	369	200.00 ✓
1124	125	50/50 cement	1437.50	✓
1118B	310 #	gel	68.20	✓
		material sub	1505.70	✓
		less 30%	-451.71	✓
		material total		1053.99 ✓
4402	1	2 1/2 plug		29.50 ✓
			3427.42	
		SALES TAX		79.92 ✓
		ESTIMATED TOTAL		2942.41 ✓

Ravin 3737

AUTHORIZATION *Joe*

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.