



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 47512
LOCATION Ottawa, KS
FOREMAN Casper 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
7/29/14	3372	Vesect #3-5	W 23	14	20	D6

CUSTOMER	TRUCK #	DRIVER	TRUCK #	DRIVER
Grand Mesa	729	Casken	✓	Safety Meeting
	666	Kei Car	✓	
	548	Danliha	✓	
	675	Lisk Fox	✓	

MAILING ADDRESS	CITY	STATE	ZIP CODE
1700 N. Waterfront Pkwy	Widita	KS	67206

JOB TYPE longstring HOLE SIZE 5 7/8" HOLE DEPTH 782' CASING SIZE & WEIGHT 2 7/8" EUE
 CASING DEPTH 7ft DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT 4.4 bbls DISPLACEMENT PSI _____ MIX PSI _____ RATE 5 bpm

REMARKS: held safety meeting, established circulation, mixed & pumped 200# Precious Gel followed by 19 bbls fresh water, mixed & pumped 116 sks 50/50 Pozmix cement w/ 2% gel, 5% salt, + 5# Kalsol per sk, cement to surface, pushed pump clean, pumped 2 1/2" rubber plug to casing TD w/ 4.40 bbls fresh water, pressured to 800 PSI, released pressure, shut in casing.

[Handwritten signature]

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		
5406	on lease	MILEAGE		
5402	7ft	casing footage		
5407	1/2 minimum	ten mileage		
5502C	1.5 hrs	80 Vac		
1124	116 sks	50/50 Pozmix cement		
118B	395 #	Precious gel		
111	245 #	salt		
110A	580 #	Kalsol		
		materials		
		subtotal		
4402	1	2 1/2" rubber plug		
		Consolidated	7.156	
		SALES TAX		
		ESTIMATED		
		TOTAL		

Ravin 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