



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 47696

LOCATION Oakley Ks.

FOREMAN Daven

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
9/18/14	2199	Thurrow 3-11	11	23	41	Hamilton
CUSTOMER		Syracuse		TRUCK #		DRIVER
MAILING ADDRESS		N To Rd 15		731		Cory
CITY		STATE		693		Lance
ZIP CODE				530		Eric

JOB TYPE AWP HOLE SIZE _____ HOLE DEPTH _____ CASING SIZE & WEIGHT 4 1/2
 CASING DEPTH _____ DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13 8 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting Rig up on Well head mix 180 SKs 60/40 4% Gel 1/4 Floseal Pressure to 400* Hook up To Backside mix 15 SKs unhook Rig Down

AFE # 803110

Thanks Daven + Crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405 A	1	PUMP CHARGE	\$650.00	\$650.00
5406	75	MILEAGE	\$5.25	NC
5407 A	8.39	Ton mileage Delivery	\$1.75	\$146.82
1131	195 SKs	60/40 Poz mix	\$15.86	\$3092.70
1118 B	671 #	Bentonite	\$0.27	\$181.17
1107	49 #	Floseal	\$2.92	\$145.53
1105	250 #	Cotton Seed Hulls	\$0.58	\$145.00
			SubTotal	\$5315.58
			Less 10%	\$531.56
			SubTotal	\$4784.02
			SALES TAX	
			ESTIMATED TOTAL	

AUTHORIZATION Dennis Dail 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

LOG-TECH OF KANSAS, INC.

P.O. BOX 885
GREAT BEND, KANSAS 67530
(620) 792-2167

INVOICE

8182

Date 9-15-2014

CHARGE TO: Chesapeake Operating, Inc.
 ADDRESS _____
 R/A SOURCE NO. _____ CUSTOMER ORDER NO. AFE 802976
 LEASE AND WELL NO. Gould A# 7-11 FIELD _____
 NEAREST TOWN Tribune COUNTY Hamilton STATE K.S.
 SPOT LOCATION _____ SEC. 11 TWP. 22S RANGE 41W
 ZERO Ground Level CASING SIZE 5 1/2 WEIGHT _____
 CUSTOMER'S T.D. _____ LOG TECH # 53 FLUID LEVEL Full
 ENGINEER Lance Gregg OPERATOR J. Vetcher

PERFORATING

Description	No. Shots	Depth		Amount
		From	To	
<u>OWEN HSC (3125-372)</u>	<u>4</u>	<u>290</u>	<u>291</u>	<u>850⁰⁰</u>

DEPTH AND OPERATIONS CHARGES

Description	From	Depth To	Total No. Ft.	Price Per Ft.	Amount
<u>" " "</u>	<u>700</u>	<u>0</u>	<u>14.2</u>	<u>29</u>	<u>550⁰⁰</u>

MISCELLANEOUS

Description	Quantity	Amount
<u>Service Charge</u>	<u>1</u>	<u>550⁰⁰</u>

PRICES SUBJECT TO CORRECTION BY BILLING DEPARTMENT

RECEIVED THE ABOVE SERVICES ACCORDING TO THE TERMS AND CONDITIONS SPECIFIED ON THE REVERSE SIDE TO WHICH WE HEREBY AGREE.

Dennis J. [Signature] 9-15-2014
 Customer Signature Date

..... Sub Total	<u>2,600⁰⁰</u>
Code Ref. Tool Insurance	
..... Tax	
.....	
.....	<u>2340⁰⁰</u>