Joh Charries



FIELD SERVICE TICKET

1718 11016 A

			10244 NE Hwy. 61 P.O. Box 8613 Pratt, Kansas 6712
	ENERGY	SERVICES	Phone 620-672-120
Alle Marian Paris	PRESSURE PUMP	ING & WIRELINE	

A September of the Sept	PRESSURE PUM						DATE	TICKET	NO						
DATE OF JOB	11 122014 E	DISTRICT POSSE,	NEW WELL	OLD PROD INJ WDW CUSTOMER ORDER NO.:											
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CITY		STATE		SERVICE CI		WELL NO PROD INJ WDW CUSTOMER ORDER NO: SOBRE STATE KS EW DCCIN, F. CNW/POI+ CO/JS ARRIVED AT JOB START OPERATION FINISH OPERATION RELEASED MILES FROM STATION TO WELL SIGNED: (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT) UNIT QUANTITY UNIT PRICE \$ AMOUNT SIGNED: (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT) UNIT QUANTITY UNIT PRICE \$ AMOUNT SIGNED: (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT) UNIT QUANTITY UNIT PRICE \$ AMOUNT SIGNED: (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT) UNIT QUANTITY UNIT PRICE \$ AMOUNT SIGNED: (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT) UNIT QUANTITY UNIT PRICE \$ AMOUNT SIGNED: (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT) UNIT QUANTITY UNIT PRICE \$ AMOUNT SIGNED: (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT) UNIT QUANTITY UNIT PRICE \$ AMOUNT SIGNED: (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT) UNIT QUANTITY UNIT PRICE \$ AMOUNT SIGNED: (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT) UNIT QUANTITY UNIT PRICE \$ AMOUNT SIGNED: (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT) UNIT QUANTITY UNIT PRICE \$ AMOUNT SIGNED: (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT) UNIT QUANTITY UNIT PRICE \$ AMOUNT SIGNED: (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT) UNIT QUANTITY UNIT PRICE \$ AMOUNT SIGNED: (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT) UNIT QUANTITY UNIT PRICE \$ AMOUNT SIGNED: (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT) UNIT QUANTITY UNIT PRICE \$ AMOUNT SIGNED: (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)									
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73768		19907			*						<u> 50</u>				
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FIELD SERVICE ORDER NO.

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)



10244 NE Hwy. 61 P.O. Box 8613 Pratt, Kansas 67124

FIELD SERVICE TICKET

1718 A

	PRESSURE I	PUMPI	SERVICES Pho NG & WIRELINE	ne 620-6	572-120) <u>1</u> 	1. 	DATE	TICKET NO					
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ADDRESS					COUNTY) }\$, 7.	,-	STATE	ķ.					
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AUTHORIZED BY	Υ		<u></u>		JOB TYPE:	Cay	1 120	7.51						
EQUIPMENT	# H	RS	EQUIPMENT#	HRS	Е	QUIPMENT#	HRS	TRUCK CAL	LED	DAT	E AM TIN	VIE		
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SERVICE REPRESENTATIVE		- - 1923, st	S* .			ERIAL AND SERV ISTOMER AND RE) BY: .						

REPRESENTATIVE



TREATMENT REPORT

Customer P	Le	Lease No.							Date									
Lease Do	W	ell#) }					1-160 2014										
Field Order #	Station	Pica	+ , 15	5	Casing Depi													
Type Job	NW/P	OVA CO					Fori	mation		<u> </u>		Legal D	escription	1-32	2-10			
PIPE	DATA		FORAT		DATA		FLUID (JSED		TREATMENT RESUME								
Casing Size	Tubing Size	Shots/l	Ft			Acid	·	~ //			RATE	PRES	SS	ISIP:		•		
Depth	Depth 79			То		Pre	[⊃] ad	`	:	Max				5 Min.				
Volume	Volume / 7	From	•	То		Pad				Min			10 Min.					
Max Press	Max Press	From		То		Frac				Avg								
Well Connection	Annulus Vol			То						HHP Used			Annulus Pressure					
Plug Depth	Packer Dept			То	Flush					Gas Volur	ne		Total Load					
Customer Repre	esentative	eff (Cars		Station	Mana	ger /C	Puin	60	12100	Treate	r I)S11,	n Frai	100			
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