



**CONSOLIDATED**  
Oil Well Services, LLC

TICKET NUMBER 50559  
LOCATION Chanute, KS  
FOREMAN Cory 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
11/5/14	3372	Vescky # 2-8	UW 23	14	20	DG
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Grand Mesa			729	Casey	✓	Safety Meeting
MAILING ADDRESS			6666	Kai Car	✓	
1700 N Waterfront Pkwy			510	DustWeb	✓	
CITY	STATE	ZIP CODE	370	Mik Fox	✓	
Wichita	KS	67206	775'	CASING SIZE & WEIGHT <u>2 7/8" EUE</u>		

JOB TYPE Logging HOLE SIZE 6 1/8" HOLE DEPTH \_\_\_\_\_ CASING SIZE & WEIGHT 2 7/8" EUE  
 CASING DEPTH 762' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING \_\_\_\_\_  
 DISPLACEMENT 4.41 bbls DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 4.5 bpm

REMARKS: held safety meeting, established circulation, mixed & pumped 200# Premix Gel followed by 10 bbls fresh water, mixed & pumped 144 sks 5% Premix cement w/ 2% gel, 5% salt, + 5 # Kalseal per sk, cement to surface, flushed pump clean, pumped 2 1/2" rubber plug to casing TD w/ 4.41 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	25 mi	MILEAGE		
5402	762'	casing footage		
5407	minimum	ton mileage		
5502C	1.5 hrs	80 Vac		
1124	144 sks	5% Premix cement		
1118B	442 #	Premix Gel		
1111	302 #	Salt		
1110A	720 #	Kalseal		
		materials		
		-30%		
		subtotal		
4402	1	2 1/2" rubber plug		
			SALES TAX	
			ESTIMATED	
			TOTAL	

Ravin 3737

AUTHORIZATION No Co. Rep. on location 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