CONSOLIDATED
Oil Well Services, LLC

905

Invoice #902046

TICKET NUMBER 47740 909/918
LOCATION Oakley, KS
FOREMAN Kelly Gabel

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
11-15-14	2776	Bernhart + trust 2-17	17	17	34 W	Scott

CUSTOMER: Eagle Creek

MAILING ADDRESS:

CITY: STATE: ZIP CODE:

Pense
W to 00 Ave
S to Rd 220
1½ E
½ S
W into

TRUCK #	DRIVER	TRUCK #	DRIVER
731	Jeremy		
663	Cody		

JOB TYPE Surface HOLE SIZE 12 1/4 HOLE DEPTH _____ CASING SIZE & WEIGHT 8 5/8 24#
CASING DEPTH _____ DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT 14.8 SLURRY VOL 1.26 WATER gal/sk 6.5 CEMENT LEFT in CASING 20'
DISPLACEMENT 15 3/4 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting, rigged up on Val #4, broke circulation mixed 180 SKS com 390 CC 390 gel, displaced with 15 3/4 bbl water shut in.

Cement Did circulate

Thank You
Kelly & crew

ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
540153	1	PUMP CHARGE	1150.00	1150.00
5406	35 mi	MILEAGE	5.25	183.75
5407A	8.5	Ton mileage delivery	1.75	520.80
11045	180 SKS	class A cement	18.55	3339.00
1102	508#	calcium chloride	.94	477.52
1118B	338#	Bentonite	.27	91.26
			Sub	5762.53
			Less 10%	576.23
			Total	5186.30
			SALES TAX	286.64
			ESTIMATED TOTAL	5472.73

Ravin 3737

AUTHORIZTION Abe Perez TITLE _____ DATE 11-15-14

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.