



CONSOLIDATED
Oil Well Services, LLC

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

271514

TICKET NUMBER 48237
LOCATION Chawna KS
FOREMAN Cathy Kennedy

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9/30/14	8520	Campbell #105-125	SE 29	20	26	AL

CUSTOMER Verde Oil
MAILING ADDRESS 3345 Arizona Rd
CITY Savonburg STATE KS ZIP CODE 66772

TRUCK #	DRIVER	TRUCK #	DRIVER
729	CasKen	✓	Safety Meeting
1460	Keiler	✓	
548	Dan Wha	✓	
370	Mik Fox	✓	

JOB TYPE Logging HOLE SIZE 5 7/8" HOLE DEPTH 908' CASING SIZE & WEIGHT 2 7/8" EUE
CASING DEPTH 901' DRILL PIPE _____ TUBING baffle - 871' OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 10'
DISPLACEMENT 5.16 bbs DISPLACEMENT PSI _____ MIX PSI _____ RATE 4.5 bpm

REMARKS: held safety meeting, established circulation, mixed & pumped 200 # Premium Gel followed by 5 bbs fresh water, mixed & pumped 120 sks 5/50 Pozmix cement w/ 2% gel, 5% salt, + 5 # Kalsreal per sk, cement to surface, flushed pump clean, pumped 2 1/2" rubber plug to baffle w/ 5.16 bbs fresh water, pressured to 800 PSI, released pressure, shut in casing.

Customer supplied latch-down plug

[Handwritten signature]

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		1085.00 ✓
5406	70 mi	MILEAGE		294.00 ✓
5402	901'	Casing footage		— ✓
5407A	390.6	ton mileage		550.75 ✓
5502C	2 hrs	80 Vac		200.00 ✓
1124	120 sks	5/50 Pozmix cement	1380.00 ✓	
1118B	402 #	Premium Gel	88.44 ✓	
1111	252 #	Salt	98.28 ✓	
1110A	600 #	Kalsreal	276.00 ✓	
		materials	1842.72 ✓	
		-30%	552.82	
		subtotal		1289.90
				4108.83
			7.4%	SALES TAX 95.45 ✓
				ESTIMATED TOTAL 3515.09 ✓

completed

Revin 3737 *[Handwritten signature]*

AUTHORIZATION _____ 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.