



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 46555

LOCATION Oakley, KS

FOREMAN Kelly Gabel

Walt Dinkel

FIELD TICKET & TREATMENT REPORT
CEMENT

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

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-17-14	7732	Hayes #1	6	8	18	ROCK
CUSTOMER STAAB Oil			Stackman			
MAILING ADDRESS			5 to rd			
CITY			W to rd			
STATE			3 1/2 N			
ZIP CODE			W into			
TRUCK #		DRIVER		TRUCK #		DRIVER
231		Jeremy				
397		Shane				
5307127		Lance				
		LARRY				

JOB TYPE Prod-DV HOLE SIZE 7 7/8 HOLE DEPTH 3480 CASING SIZE & WEIGHT 5 1/2 15.5#
 CASING DEPTH 3469 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 41.10'
 DISPLACEMENT 8 1/2, 33 1/2 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting, rigged up on shields drilling
ran pipe to bottom, circulated for 2 hrs, pumped mud
flush 5 bbl water, mixed 150 sks class A cement + 2 gge
washed up displaced plug with 50 bbl water, 31 bbl mud
600# lift + plug landed @ 1300#, dropped DV bomb, opened
tool @ 900# mixed 300 sks R H, mixed 320 sks down center
closed out pumps, displaced plug with 3 3/2 bbl water
lift + 500# plug landed @ 1500# released pressure of br + held
Cement did circulate

Thank You Walt, Kelly + crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401P	1	PUMP CHARGE	3175.00	3175.00
5406	50	MILEAGE	5.35	262.50
5407A	22.1 ton	Ton Mileage delivery	1.25	1939.00
11045	150 sks	Class A cement	18.55	2782.50
1107	88#	Floesol	2.97	261.36
1111	717	Salt	.50	358.50
1118B	2408#	gel	.27	650.16
1131	350 sks	60/40 Paz	15.86	5551.00
1144G	500 gal	mud flush	1.00	500.00
4104	2	5 1/2 baskets	290.00	580.00
4130	12	5 1/2 Centralizers	61.00	732.00
4159	1	5 1/2 AF4 Flat shoe	433.75	433.75
4283	1	5 1/2 DV tool/watchdown	4042.50	4042.50
4310	1	Rotating Head charge	200.00	200.00
			Subtotal	21,463.21
			loss 10.90	2146.33
			Subtotal	19,316.94
			SALES TAX	
			ESTIMATED	
			TOTAL	

Ravin 3737

AUTHORIZATION Staab Oil Co. 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.