



CONSOLIDATED
Oil Well Services, LLC

270328

TICKET NUMBER 47527
LOCATION Oxtawa KS
FOREMAN Fred Mader

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 |
|--------|------------|--------------------|---------|----------|-------|--------|
| 8-4-14 | 7752 | Baker # SCZ 40 | NW 26 | 18 | 22 | MI |

CUSTOMER
SCZ Resources LLC

MAILING ADDRESS
8614 Cedarspr Dr.

CITY Houston STATE TX ZIP CODE 77055

| TRUCK # | DRIVER | TRUCK # | DRIVER |
|---------|------------|---------|--------|
| 712 | Fred Mader | | |
| 495 | Harv Bec | | |
| 675 | Neil Det | | |
| 548 | Dan WKA | | |

JOB TYPE Long string HOLE SIZE 6 HOLE DEPTH 428 CASING SIZE & WEIGHT 2 3/8 EUE

CASING DEPTH 400' DRILL PIPE _____ TUBING _____ OTHER _____

SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/2" Plug

DISPLACEMENT 2,348 BBL REPLACEMENT PSI _____ MIX PSI _____ RATE 4 BPM

REMARKS: Hold crew safety meeting. Establish pump rate. Mix Pump 100# Gel Flush. Mix & Pump 66 SKS 50/50 Por Mix Cement 2 3/8" Casing to surface. Flush pump & lines clean. Displace 2 3/8" Rubber plug to casing TD. Pressure to 800# PSIG. Release pressure to set flood valve. Shut in casing.

JTC Drilling

Fred Mader

| ACCOUNT CODE | QUANTITY or UNITS | DESCRIPTION of SERVICES or PRODUCT | UNIT PRICE | TOTAL |
|--------------|-------------------|------------------------------------|------------|-------------------------|
| 5401 | 1 | PUMP CHARGE | 495 | 1065.00 |
| 5406 | - | MILEAGE | | N/C |
| 5402 | 400' | Casing footage | | N/C |
| 5407 | 1/3 minimum | Tax 9 miles | | 122.69 |
| 55024 | 1 Hr | 80 BBL Vac Truck | | 100.00 |
| 1124 | 66 SKS | 50/50 Por Mix Cement | 759.00 | |
| 1118B | 211 # | Premium Gel | 46.42 | |
| | | Material | 805.43 | |
| | | less 30% | -241.63 | |
| | | Total | | 563.79 |
| 4402 | 1 | 2 3/8" Rubber Plug | | 29.50 |
| | | | 2206.46 | |
| | | | 7.65% | SALES TAX 45.39 |
| | | | | ESTIMATED TOTAL 1946.35 |

completed

Rev 3/27

AUTHORIZATION *[Signature]* 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