

Town Oilfield Service

P.O Box 339 Louisburg, Ks 66053
913-837-8400

Ticket Number _____
Location _____
Foreman _____

Field Ticket & Treatment Report Cement

Date	Customer#	Well Name & Number	Section	Township	Range	County
10-20-14		Patterson 19	32	15	21	
Customer TNT			Mailing Address			
		City	State	Zip Code		

Job Type Longstring Hole Size 5 5/8 Hole Depth 780 Casing Size & Weight 2 7/8
 Casing Depth 761 Drill Pipe _____ Tubing _____ Other _____
 Displacement 4.6 Displacement PSI 500 Mix PSI 200 Rate 4 RPM

Remarks _____

Account Code	Quantity or Units	Description of Services or Product	Unit Price	Total
		Pump Charge		700
		Cement Truck		250
		Water Truck		150
	115 SX	Cement	10	1150
		Gel		
		Plug		25
			Sales Tax	
Estimated Total				2275

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.