



CONSOLIDATED
Oil Well Services, LLC

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

1471
1422
INVOICE #802623
FIELD TICKET & TREATMENT REPORT
CEMENT

TICKET NUMBER 50745
LOCATION Office
FOREMAN Alan Mader

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-9-14	4448	Harra KR-23	NW 13	17	22	M.
CUSTOMER Kansas Resources E&D			TRUCK #		DRIVER	
MAILING ADDRESS 9353 W 110th			TRUCK #		DRIVER	
CITY Overland Park KS			TRUCK #		DRIVER	
STATE KS			TRUCK #		DRIVER	
ZIP CODE 66210			TRUCK #		DRIVER	

JOB TYPE long string HOLE SIZE 5 7/8 HOLE DEPTH 510 CASING SIZE & WEIGHT 2 7/8
CASING DEPTH 492.80 DRILL PIPE _____ TUBING _____ OTHER 466.10
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING yes
DISPLACEMENT 2.7 DISPLACEMENT PSI 800 MIX PSI 200 RATE 4 bpm

REMARKS: held meeting. Established rate Mixed & pumped 100# gel followed by 73 sk 50/50 cement plus 2% gel + 1/2# phenoseal per sack. Circulated cement. Flashed pump, pumped plug to baffle, well held 800 PSI. Set float.

Ron Utah

Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5701	1	PUMP CHARGE	368	1085.00
5706	25	MILEAGE	368	1050.00
5702	492.80	casing footage	368	
5707	1/2 mi	ton miles	358	187.00
5702C	1 1/2	80 vac	369	153.00
1124	2157 73	50/50 cement	839.50	
118B	223#	gel	49.06	
1107A	37#	Pheno seal	49.95	
		Material sub	938.51	
		less 30% -	281.55	
		Material total		656.96
4402	1	2 1/2 plug		29.50
			2510.00	
			SALES TAX	52.52
			ESTIMATED TOTAL	2262.98

Ravin 3737

No company ref
Jim DKD

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.