



CONSOLIDATED
Oil Well Services, LLC

272307

TICKET NUMBER 50586
LOCATION Ottawa
FOREMAN Alan Mader

10/6/09

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
10-31-14	4448	Hollinger KR-30	SW 31	16	22	Mi
CUSTOMER Kansas Resources E&D						
MAILING ADDRESS 9393 W 110th						
CITY Overland Park		STATE KS	ZIP CODE 66210			
			TRUCK #	DRIVER	TRUCK #	DRIVER
			730	Alan Mader	Safety	Meet
			368	Art McD		
			369	Mikkg		
			503	Tru Har		

JOB TYPE plug HOLE SIZE 3 7/8 HOLE DEPTH 701 CASING SIZE & WEIGHT _____
 CASING DEPTH _____ DRILL PIPE _____ TUBING 1" 700' OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI 1000 RATE 1 bpm

REMARKS: Held meeting. Washed 1" to hole T.D. Mixed & pumped 15 sk 50/50 cement plus 290 gal 1/2# Pheno-seal per sack to fill 70' of hole. Pulled 1" to 350'. Filled well to surface. Pulled 1" out & topped off well.

15 TD
41 350'

Waylon Utah

Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405W	1	PUMP CHARGE	368	1085.00
5406	5	MILEAGE from Travis	368	21.00
5407	1/2 min	ten miles	503	184.00
5502C	1 1/2	80 vac	369	150.00
1124	56	50/50 cement	644.00	
1118B	94#	gel	21.00	
1107A	28#	Phenoseal	37.80	
		material sub	702.80	
		less 30%	210.84	
		material total		491.96
			2196.22	
		SALES TAX		37.64
		ESTIMATED TOTAL		1969.60

RAVIN 3737
No company opp
Jim OK'd

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.