



CONSOLIDATED
Oil Well Services, LLC

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

TICKET NUMBER 50624

LOCATION Ottawa

FOREMAN Alan Meder

INVOICE # 802401

1052
102

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11-10-14	448	Travis #KR37	SW 10	17	22	MI

CUSTOMER
Kansas Resources EDD

MAILING ADDRESS
9393 W 110th

CITY
Overland Park STATE KS ZIP CODE 66210

TRUCK #	DRIVER	TRUCK #	DRIVER
730	Ala Med	Safety	Meat
308	Ala Med		
369	Mik Heat		
503	Trotter		

JOB TYPE long string HOLE SIZE 5 7/8 HOLE DEPTH 682 CASING SIZE & WEIGHT 2 7/8

CASING DEPTH 666.65 DRILL PIPE _____ TUBING _____ OTHER 634.95

SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING yes

DISPLACEMENT 3.7 DISPLACEMENT PSI 800 MIX PSI 200 RATE 4 bpm

REMARKS: Held meeting. Established rate. Mixed & pumped 100# gel followed by 94 sk 50/50 cement plus 2 pgs of 1/2 pheno seal per bank. Circulated cement, flushed pump. Pumped plug to baffle well held 800 PSI. Set float, closed valve.

had, Mc Gowan

Alan Meder

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	368	1085.00
5406	25	MILEAGE	368	105.00
5402	666.65	casing footage	368	-
5407	1/2 mi	ten miles	503	184.00
5502L	1 1/2	80 gal	369	150.00

1127	94	50/50 cement	1081.00	-
118B	258 #	gel	56.76	-
1107A	47	pheno seal	63.45	-
		material sub	1201.21	-
		less 30%	-360.36	-
		material total		840.85

4402	1	2 1/2 pgs		29.00
			2848.86	

completed

Ravin 3737 No company rep J.M. Okd

AUTHORIZATION _____ TITLE _____ DATE _____

SALES TAX 66.58
ESTIMATED TOTAL 2460.93

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.