



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 50846
LOCATION Ottawa KS
FOREMAN Fred Maden

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 |
|--------------------------|------------|--------------------|--------------|----------|-------|--------|
| 2-24-15 | 2890 | S Miller # A.5 | SE 26 | 27 | 14 | WL |
| CUSTOMER | | | TRUCK # | | | |
| MAILING ADDRESS | | | DRIVER | | | |
| CITY | | | TRUCK # | | | |
| STATE | | | DRIVER | | | |
| ZIP CODE | | | TRUCK # | | | |
| Fredonia | | | KS | | | |
| 1346 | | | 66736 | | | |
| Domestic Energy Partners | | | 712 Fred Mad | | | |
| P.O. Box 296 | | | 495 Har Boc | | | |
| | | | 503 Bru Bir | | | |

JOB TYPE Plug HOLE SIZE _____ HOLE DEPTH 1346 CASING SIZE & WEIGHT 4 1/2 OPan
 CASING DEPTH 1346 DRILL PIPE 2 3/8" TUBING to TD OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING Full
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 BPM

REMARKS: Hold Safety meeting. Rig run 2 3/8" Tubing to TD. Mix Pump
45 sks Cement. Pull tubing to 650' Fill to surface w/
Cement. Pull remaining Tubing. Top off well w/ Cement.
Wash out Tubing.

Total - 88 sks 50/50 Poz Mix Cement 6% Gel.
KCC Rep: Alan Doherty
Customer Supplied Water Fred Maden

| ACCOUNT CODE | QUANTITY or UNITS | DESCRIPTION of SERVICES or PRODUCT | UNIT PRICE | TOTAL |
|--------------|-------------------|------------------------------------|---------------------|------------------------------|
| 5405N | 1 | PUMP CHARGE <u>Plug to Abandon</u> | 495 | 1085 ⁰⁰ |
| 5406 | 40 mi | MILEAGE | | N/C |
| 5407A | 156.64 | Ton Miles | 503 | 220 ⁵⁶ |
| 1124 | 88 sks | 50/50 Poz Mix Cement | 1012 ⁰⁰ | 2000⁵⁶ |
| 1118B | 444# | Premium Gel | 97 ⁶⁸ | |
| | | Material | 1109 ⁶⁸ | |
| | | Less 30% | - 332 ⁹⁰ | |
| | | Total | | 776 ⁷⁸ |
| | | | 6.5% | SALES TAX |
| | | | | 477 ⁷¹ |
| | | | | ESTIMATED TOTAL |
| | | | | 2193 ⁴¹ |

RAVIN 3737 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