4127

4043 Invoice #805622

CONSOLIDATED
Oil Well Services, LLC

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

TICKET NUMBER 49487
LOCATION Oakley, KS
FOREMAN Kelly Gabel

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-3-15	1617	Wilhelm #18	20	1	32W	Rawlins KS

CUSTOMER: Blueridge
MAILING ADDRESS:
CITY / STATE / ZIP CODE:

9 to wood
N to curve
E to Yield
S on
2 W
1/4 E
N into O

TRUCK #	DRIVER	TRUCK #	DRIVER
731	Jeremy		
528-T129	Lance		

JOB TYPE OHP | HOLE SIZE | HOLE DEPTH | CASING SIZE & WEIGHT 5 1/2
CASING DEPTH | DRILL PIPE | TUBING 2 3/8 | OTHER
SLURRY WEIGHT | SLURRY VOL | WATER gal/sk | CEMENT LEFT in CASING
DISPLACEMENT | DISPLACEMENT PSI | MIX PSI | RATE

REMARKS: safety meeting, rigged up on well, ran tubing to 3800, mixed 100 SKS with 100# Hulls, pulled tubing to 2816, mixed 100 SKS with 200# Hulls, pulled tubing to 1807 mixed 100 SKS with 200# Hulls, pulled tubing to 800' mixed 75 SKS to circulate, tied onto backside & mixed 15 SKS to fill, mixed 20 SKS to top off casing.

Thank You
Kelly & Crew

ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CE0451	1	PUMP CHARGE	1900.00	1900.00
CE0002	55 mi	MILEAGE	7.15	393.25
CE7040	17.2	Ton mileage delivery	1.75	1655.50
CC5829	400	Lightweight Blend II (60/40 4%)	16.00	6400.00
CC6080	500#	Cottonseed Hulls	.50	250.00
			Subt	10,598.75
			Less 3000	3179.62
			Total	7419.12
			SALES TAX	384.05
			ESTIMATED TOTAL	7803.17

Ravin 3737

AUTHORIZTION _____ 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.