



CONSOLIDATED
Oil Well Services, LLC

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

JM 4262
FT 4176

Invoice # 805174

TICKET NUMBER 46212

LOCATION EL Dorado

FOREMAN Fuzzy

FIELD TICKET & TREATMENT REPORT

CEMENT

125

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-22-15	1128	Kenya #2 SWD	8	33	4	Cowley
CUSTOMER Alton O. I			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS PO BOX 117			760 / Chris			
CITY Winfield			275 / Jeremy			
STATE KS			611 / Terry			
ZIP CODE 67156			1594-1108 / Jod			

JOB TYPE Production HOLE SIZE 7 7/8 HOLE DEPTH 2774' CASING SIZE & WEIGHT 5 1/2 15.5
 CASING DEPTH 2751' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 10.5-14.7 SLURRY VOL 92-26 WATER gal/sk _____ CEMENT LEFT in CASING 42.20
 DISPLACEMENT 64.4 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting on Gulick #1. float equip cont 1-3-6-9-15
 19-21-30-37-53. Baskets 4-20-37-54. circulate 30 min
 set Basket shoe @ 750#. Pump SBL water. mix 225SKS
 50/50 pos 8% gel 5# Kolsal w 1/2# polyflake. Tail with 100SKS
 Base mix (3% gel, 2% cc) w 5# Kolsal and 1# phenosol peaks
 wash pump and lines. Drop plug and displace 65 BBL. lift
 600# land plug @ 1150#. float held.
 cement did not circulate

Thanks Fuzzy & Crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CE0451	1	PUMP CHARGE	1900.00	1900.00
CE0002	50	MILEAGE	7.15	357.50
CE0710	14.340N	Tow mileage Delivery	125	1251.25
CC5800A/6354	100 SKS	Class 'A'	20.00	2000.00
CC5840/6355	225 SKS	50/50 pos	13.50	3037.50
CC5965	1850 #	Gel	.30	555.00
CC5325	200 #	Calcium Chloride	1.00	200.00
CC6017	1650 #	Kol-seal	.50	825.00
CC6079	100 #	Phenosol	1.35	135.00
CC6075	125 #	Polyflake	2.00	250.00
CP8751	1	5 1/2 - Basket shoe	2200.00	2200.00
CP8254	1	5 1/2 - hatchdown Assy	400.00	400.00
CP8554	10	5 1/2 - Cent	81.00	810.00
CP8629	4	5 1/2 - Baskets	385.00	1540.00
		subtotal		15461.25
		less 34% discount		5256.83
		subtotal		10204.43
		6.75% SALES TAX		532.48
		ESTIMATED TOTAL		10,736.91

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