



CONSOLIDATED
Oil Well Services, LLC

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

TICKET NUMBER 49627
LOCATION Oakley, KS
FOREMAN Kelly Gabe

FIELD TICKET & TREATMENT REPORT

CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
<u>12-22-15</u>	<u>2199</u>	<u>Wood 5-29</u>	<u>29</u>	<u>24S</u>	<u>40W</u>	<u>KS Hamilton</u>
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS			<u>731</u>	<u>Cody</u>		
CITY				<u>Keith</u>		
STATE						
ZIP CODE						

JOB TYPE OHP HOLE SIZE _____ HOLE DEPTH _____ CASING SIZE & WEIGHT 4 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, mixed 100 SKS 60/10 Por
49 gel 1/4 #10-seal with 200# Hulls & displaced to 850'
run tubing to 850' mixed 5.5 SKS to circulate to surface
pulled tubing, topped off casing with 5 SKS, topped off backside
with 10 SKS.

*Thank You
Kelly & crew*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CE0470	<u>1</u>	PUMP CHARGE	<u>950⁰⁰</u>	<u>950⁰⁰</u>
CE0002	<u>100 mi</u>	MILEAGE	<u>7¹⁵</u>	<u>715⁰⁰</u>
C20710	<u>2.31</u>	Ton mileage delivery	<u>1⁷⁵</u>	<u>1279²⁵</u>
CC5829	<u>170 SKS</u>	Lite Weight Blend II	<u>16⁰⁰</u>	<u>2720⁰⁰</u>
CC6075	<u>4 1/2</u>	celloflake	<u>2⁰⁰</u>	<u>85⁰⁰</u>
CC6080	<u>200#</u>	cottonseed Hulls	<u>.50</u>	<u>100⁰⁰</u>
AFE #		<u>803580</u>		
			Sub	<u>5849²⁵</u>
			less	<u>3590</u>
			Total	<u>3802⁰¹</u>
			SALES TAX	
			ESTIMATED TOTAL	

Ravin 3737

AUTHORIZATION Dennis Paul TITLE _____ DATE 12-22-15

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.



PIONEER

Every Project Is Personal

Pioneer Wireline Services, LLC

Service Order No.

1 - 49922

Phone: 785.625.3858

Fax: 785.625.8635

Date: 12-22-15

Client Info	Company: <u>Chosa Packer</u>					Client Order #			
	Billing Address: <u># AF 2 # 803580</u>				City	ST	Zip		
Well Info	Lease & Well #: <u>number 5-27</u>			Field Name		Legal Description (coordinates)			
	Nearest Town: <u>SIBBOL</u>	County / Parish: <u>Nowata</u>	ST: <u>OK</u>	Rig	Permit #	Price Zone	Casing Size: <u>4.5"</u>	Casing Weight	
	Fluid: <u>water</u>	Level (surf.): <u>16</u>	Reading from	Customer T.D.	Pioneer T.D.	Elevation	KB Elevation		
Crew	Engineer: <u>Keith Adams</u>		Truck Driver: <u>Mike</u>		Crew Members: <u>Marvin Henderson</u>			Unit #	Miles

Product Code	Description	Q-ty	Unit Price	Depth		\$ Amount
				From	To	
11000	SERVICE CHARGE	150	2.200	-	-	3.300
11000	PUMP OIL	150	5.50	-	-	8.250
12101	CONCRETE PUMPING DEPTH	1200	4.79	0	220	4740
12102	CONCRETE PUMP OPEN	200	7.75	220	220	1550

THE UNDERSIGNED HEREBY CERTIFIES THAT HE HAS FULL AUTHORITY TO ENTER INTO THIS CONTRACT ON BEHALF OF THE CLIENT AND AGREES TO THE TERMS AND CONDITIONS SET FORTH ON THE REVERSE SIDE HEREOF.

Client Approval
Keith Adams 12-22-15
 Name Printed Signature / Date

SUBTOTAL	9,320.06
DISCOUNT	
SUBTOTAL	9,320.06
TAX	
NET TOTAL	

Pioneer Field Representative
Keith Adams
 Name Printed Signature / Date

PIONEER OFFICE USE ONLY - Manager Approval
 Name Printed Signature / Date