



CONSOLIDATED
Oil Well Services, LLC

PO Box 894, Chanute, KS 66720
620-431-9210 or 800-467-8576

62583
62886

TICKET NUMBER 50290
LOCATION Ottawa KS
FOREMAN _____

FIELD TICKET & TREATMENT REPORT
CEMENT

Invoice # 808285

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
8-4-16	41807	Sturdivan # L01 4	NW 34	23	16	WO
CUSTOMER Lakeshore Operating LLC			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS 340 So hanna			712 Fve Mad			
CITY STATE ZIP CODE Wichita KS 67211			467 Kei Car			
			675 Kei Dax			
			804 Av1 Mad			

JOB TYPE Long string HOLE SIZE 5 7/8 HOLE DEPTH 1092 CASING SIZE & WEIGHT 2 7/8 EUE
 CASING DEPTH 710 BSC DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/2" Plug
 DISPLACEMENT 6.3 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 BPM

REMARKS: Hold Safety mixing. Establish circulation. Mix Pump 100 #
 Gas Flush. Mix + Pump 138 SKS Por Blend II A Cement 27 Gal
 5" Kol Seal 1" Pheno seal/sk. Cement to surface. Flush pump 1 mes
 clean. Displace 2 1/2" Rubber plug to casing TD. Pressure to
 800# PSI. Monitor pressure for 30 min MIT. Release pressure
 to set flood valve. Shut in casing.

Jackman Oil Well Service

Paul Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or P
CE0450	1	PUMP CHARGE
CE0002	40 mi	MILEAGE
NE0711	Maximum	Tax Miles Delivery
WE0553	4 1/2 hr	50 ABL Vac Truck Trucks less
CE5842	138 SKS	Por Blend II A Cement
CC5965	337 #	Bentonite Gel
CC6077	690 #	Kol Seal
CC6079	135 #	Pheno Seal
CP8176	1	2 1/2" Rubber Plug

Rev 5/97

AUTHORIZATION [Signature] TOTAL 8080-
TITLE

I acknowledge that the payment terms, unless specifically amended in writing on account records, at our office, and conditions of service on the back of this form