



CONSOLIDATED
Oil Well Services, LLC

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

6274
Field Hkt doc
6179

API 15-035-20307-00-01

TICKET NUMBER 51312
LOCATION EL Dorado
FOREMAN Fuzzy

FIELD TICKET & TREATMENT REPORT
CEMENT

Invoice # 809177

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7-22-16	1128	Jim #1	15	315	4E	Cowley
CUSTOMER Alton O-1 Co.			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS P.O. Box 117			603	Tracey		
CITY Winfield			611	Jeremy		
STATE KS			692	Mark		
ZIP CODE 67156			725	Fuzzy		

JOB TYPE Production HOLE SIZE 7 7/8 HOLE DEPTH 3350' CASING SIZE & WEIGHT 5 1/2" 15.5
 CASING DEPTH 3352' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 14.3 SLURRY VOL 31.6 WATER gal/sk _____ CEMENT LEFT in CASING 10'
 DISPLACEMENT 79.8 DISPLACEMENT PSI _____ MIX PSI _____ RATE 3.5 BBL/min

REMARKS: Safety meeting on Dixon Dalg #2. Float equip Basket shoe
 5-Band Turbolizers #3-#5 Basket #9 Rig up and circulate 20min
 Set Basket shoe @ 800# Pump 2 BBL water 500gal mud flush
 2 BBL water. Mix 120sps Class A 39oz 29oz 5# Kolsol
 1# phenosol. Wash pump and lines. Drop plug and displace
 80 BBL. 500# lift land plug @ 1100# float held.

Good circulation throughout Job 1

Thanks Fuzzy & Crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CE0452	1	PUMP CHARGE	2300 ⁰⁰	2300 ⁰⁰
CE0002	35	MILEAGE	715	25025
CE0711	5.6 Ton	Ton mileage Delivery (min)	660 ⁰⁰	660 ⁰⁰
WE0853	7 hrs	80 BBL Vac Truck	100 ⁰⁰	700 ⁰⁰
WC6159	3000gal	City water	.02	60 ⁰⁰
CL5800A	120sps	Class A	20 ⁰⁰	2400 ⁰⁰
CC6077	600#	Kolsol	.50	300 ⁰⁰
CC9968	350#	Gel	.30	105 ⁰⁰
CC5325	250#	Calcium chloride	1 ⁰⁰	250 ⁰⁰
CC6079	120#	Phenosol	1.35	162 ⁰⁰
CC6125	500gal	Mud flush	.65	325 ⁰⁰
CP8254	1	5 1/2" Latchdown Assy + Plug	400 ⁰⁰	400 ⁰⁰
CP8751	1	5 1/2" Basket shoe	2200 ⁰⁰	2200 ⁰⁰
CP8554	NA	5 1/2" Centralizers	81 ⁰⁰	NA
CE1130	2	5 1/2" 5-Band Turbolizers	240 ⁰⁰	480 ⁰⁰
CP8651	1	5 1/2" Cement Baskets (recip)	385 ⁰⁰	385 ⁰⁰
			subtotal	10977.25
			discount 4%	4939.76
			subtotal	6037.49
			SALES TAX	262.37
			ESTIMATED TOTAL	6299.86

SCANNED

Ravin 3737

AUTHORIZATION

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.