

STATEMENT

12573

ELMORE'S INC.

Box 87 - 776 HWY 99
 Sedan, KS 67361
 Cell: (620) 249-2519
 Eve: (620) 725-5538

Date 11-29-16

Customer Kansas Energy
 Address _____
 City _____ State _____ Zip _____

Qty.	Description	Price	Amount
3	hr Pulling Unit	120.00	360.00
2	hr Cement Pump	110.00	220.00
2	hr Water Truck	85.00	170.00
360'	1" Tubin	.10	36.00
1	Bauk Tank	85.00	85.00
37	sks Cement	12.00	444.00
			1315.00
	Plug Job Newcomb #1	Tax	111.78
	Ran 1" To 360' Hit	\$	142.678
	Cement Cemented To Surface With 37 sks Cement.		

Thank You - We appreciate your business!

Rec'd. by _____

TERMS: Account due upon receipt of services. A 1 1/2% Service Charge, which is an annual percentage rate of 18% will be charged to accounts after 30 days.



CONSOLIDATED INDUSTRIAL SERVICES

AN INFINITY COMPANY

211 W. 14th, P.O. Box 884 Chanute, KS 66720 • 316/431-9210 • 1-800/467-8676

PAGE 1

INVOICE DATE	INVOICE NO.
08/31/95	00148052

S
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4291
J. B. D. & P. J. BUCK
304 E. MAIN
SEDAN KS 67361

TERMS: Net 30 Days
A Finance Charge computed at 1% per month (annual percentage rate of 12%) will be added to balances over 30 days.

PLEASE REFER TO THIS ACCOUNT NUMBER WHEN MAKING INQUIRIES

ACCOUNT NO.	P.O. NO.	LOCATION	LEASE AND WELL NO.	DATE OF JOB	JOB TICKET NO.		
				08/25/1995	5409		
ITEM NUMBER			DESCRIPTION	UNITS	UNIT PRICE	UNIT MEAS	EXTENDED PRICE
5405A			P&A OLD WELLS	1.0000	375.0000	EA	375.00
1118			PREMIUM GEL	4.0000	8.0000	SG	32.00
5407			BULK CEMENT DELIVERY/MIN BULK DEL	1.0000	75.0000	EA	75.00
5502			80 BBL VACUUM TRUCK	2.0000	48.0000	HR	96.00
1124			50/50 POZ CEMENT MIX	30.0000	6.3500	SG	190.50
GROSS INVOICE		TAX		REMITTANCE COPY			PLEASE PAY
768.50		12.24					780.74

Thank You!

CONSOLIDATED INDUSTRIAL SERVICES, INC.
 211 W. 14TH STREET, CHANUTE, KS 66720
 316-431-9210 or 800-467-8676

TICKET NUMBER **3853**

LOCATION Earlsboro

FOREMAN Steve Finny

TREATMENT REPORT

DATE	CUSTOMER ACCT #	WELL NAME	QTR/QTR	SECTION	TWP	RGE	COUNTY	FORMATION
	<u>4891</u>	<u>North Hancock #1</u>					<u>CO</u>	
CHARGE TO <u>JBD</u>				OWNER				
MAILING ADDRESS <u>304 E. Main</u>				OPERATOR				
CITY <u>Sedan</u>				CONTRACTOR				
STATE <u>KS</u>		ZIP CODE <u>67361</u>		DISTANCE TO LOCATION				
TIME ARRIVED ON LOCATION				TIME LEFT LOCATION				

WELL DATA	
HOLE SIZE	
TOTAL DEPTH	
CASING SIZE	<u>4 1/2</u>
CASING DEPTH	<u>1120</u>
CASING WEIGHT	
CASING CONDITION	
TUBING SIZE	
TUBING DEPTH	
TUBING WEIGHT	
TUBING CONDITION	
PACKER DEPTH	
PERFORATIONS	<u>1120</u>
SHOTS/FT	
OPEN HOLE	
TREATMENT VIA	

TYPE OF TREATMENT	
<input type="checkbox"/> SURFACE PIPE	<input type="checkbox"/> ACID BREAKDOWN
<input type="checkbox"/> PRODUCTION CASING	<input type="checkbox"/> ACID STIMULATION
<input type="checkbox"/> SQUEEZE CEMENT	<input type="checkbox"/> ACID SPOTTING
<input checked="" type="checkbox"/> PLUG & ABANDON	<input type="checkbox"/> FRAC
<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> FRAC + NITROGEN
<input type="checkbox"/> MISC PUMP	<input type="checkbox"/> FOAM FRAC
<input type="checkbox"/> OTHER	<input type="checkbox"/> NITROGEN

PRESSURE LIMITATIONS		
	THEORETICAL	INSTRUCTED
SURFACE PIPE		
ANNULUS LONG STRING		
TUBING		

INSTRUCTIONS PRIOR TO JOB Set a 50' Plug @ 1120, Gel to 350, Cement 350 to Surface

DESCRIPTION OF JOB EVENTS Pump well to collapse rate pump 950' Cement, 12.5 gal, 450' Cement
(Pumped Cement when cement hit formation pressure came eye shut well in)

PRESSURE SUMMARY	
BREAKDOWN or CIRCULATING	psi
FINAL DISPLACEMENT	psi
ANNULUS	psi
MAXIMUM	<u>910</u> psi
MINIMUM	<u>30</u> psi
AVERAGE	<u>100</u> psi
ISIP	<u>300</u> psi
5 MIN SIP	psi
15 MIN SIP	psi

TREATMENT RATE	
BREAKDOWN BPM	
INITIAL BPM	<u>4</u>
FINAL BPM	<u>4</u>
MINIMUM BPM	<u>4</u>
MAXIMUM BPM	<u>4</u>
AVERAGE BPM	<u>4</u>
HYD HHP = RATE x PRESSURE x 40.8	

AUTHORIZATION TO PROCEED _____ TITLE _____ DATE _____