



API # 15.035.20835.00.02

TICKET NUMBER 51982
 LOCATION El Dorado
 FOREMAN Fuzzy

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

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
5-25-17	1098	Sheneman #3	8	33	6	Cowboy
CUSTOMER Anigline & Musgrove			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS P.O. Box 391			602	Tracey		
CITY Pawnee City			692	Mark		
STATE OKLA			681	Jud		
ZIP CODE 74602			725	Fuzzy		

JOB TYPE _____ HOLE SIZE _____ HOLE DEPTH _____ CASING SIZE & WEIGHT 4 1/2
 CASING DEPTH _____ DRILL PIPE _____ TUBING 2 3/8 OTHER CTIP @ 3000'
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting on Sams well service. Plug up and plug as ordered. Ld casing and B-side and establish circulation. Mix 180 sks 60/40 pos 2% cc w/ cottonseed hulls from 350' to surface in 4 1/2 casing and 4 1/2 / 2 3/8. Shut in with 300*

Thanks Fuzzy
 tclw

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
660450	1	PUMP CHARGE	1500 ⁰⁰	1500 ⁰⁰
660002	50	MILEAGE	7 ¹⁵	357 ⁵⁰
660711	718 ton	Tow mileage Delivery	1 ²⁵	677 ²⁵
660853	4 hrs	80 BBL Vac Truck	100 ⁰⁰	400 ⁰⁰
666159	3000	City Water	.02	60 ⁰⁰
665829	180 sks	60/40 pos 4% gel	16 ⁰⁰	2880 ⁰⁰
665325	200 #	Calcium Chloride	1 ²⁵	250 ⁰⁰
666080	40 #	Cottonseed hulls	.50	20 ⁰⁰
		Subtotal		6144 ²⁵
		discount	4590	2765 ¹³
		Subtotal		3379 ⁶²
		SALES TAX		
		ESTIMATED		
		TOTAL		

RAVIN 3737
 AUTHORIZATION [Signature] TITLE Prod Supt. 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.