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TICKET NUMBER 51752
LOCATION Waldrey, KS
FOREMAN Walt Dunkel

PO Box 884, Chanute, KS 66720
820-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
3-26-17	3613	Knolls 1-21 own	21	17 ^s	34 ^w	Scott
CUSTOMER Hartman Oil			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS 3545 W. James Avenue			753 - miles Shaw			
CITY Golden City			566 - Steven Delal			
STATE KS			697 -			
ZIP CODE 67846			Madax 1/2" N 1/2" E 4 1/2" N W.S.			

JOB TYPE Prod HOLE SIZE 7 7/8 HOLE DEPTH 4825' CASING SIZE & WEIGHT 5 1/2 15 1/2"
 CASING DEPTH 4754 DRILL PIPE _____ TUBING _____ OTHER Shoe 22, 36
 SLURRY WEIGHT 14.2# SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 22'
 DISPLACEMENT 112.62 DISPLACEMENT PSI 800 MIX PSI _____ RATE 5-6 BPM

REMARKS: See Etx meeting, rig up on Southward #, circ casing on bottom
Put 20 sks in RH, 10 sks in WH.
Pump 500 gal Mud Flush, mixed 100 sks Thixobland III, 5# Kalsol
Clear Pump + Lines, release Plug + Displace 12.5 BBL, H₂O @ 800, Tank @ 1500#
released pressure, Float did not hold
Shut in @ 500#

Thank You
Walt Dunkel

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
Co0453	1	PUMP CHARGE	2,800.00	2,800.00
Co0002	40	MILEAGE	7.13	285.20
Co0711	6.11	Ton Mileage Delivery	1.09	666.00
CC5862	130	Thixobland III	26.00	3,380.00
CC6077	650#	Kalsol	.50	325.00
CC6125	500 gal	Mud Flush	.65	325.00
CP8485	1	5 1/2 AEU Float Shoe	585.00	585.00
CP8254	1	5 1/2 - Latchdown Plug	400.00	400.00
CP8554	8	5 1/2 - Centralizer?	81.00	648.00
CP8629	1	5 1/2 - Basket	385.00	385.00
CP8776	1	5 1/2 - Portcollar	2,850.00	2,850.00
				12,644.00
Less 40% Disc				5,057.00
				7,586.40
SALES TAX				453.80
ESTIMATED TOTAL				8040.20

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AUTHORIZATION [Signature] 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.