



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

TICKET NUMBER 54677
 LOCATION Eldorado KS
 FOREMAN Jeremy Austin

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10-11-17	1091	LEE #3	33	32	2	Sumner
CUSTOMER A.A.S. OIL			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS 2508 Edgemont Dr. Suite 4			866	Jeremy A		
CITY STATE ZIP CODE Arkansas City KS 67005			446	Jeremy M		
			611	Jude		

JOB TYPE Plug B HOLE SIZE _____ HOLE DEPTH _____ CASING SIZE & WEIGHT 5 1/2
 CASING DEPTH _____ DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting Hooked on tube 2 3/8 tubing broke Circulation then pumped 45 SKS of Cement then displaced 4 bbl of water tag Cement @ 3131 ran tubing to 300' Circulated around surface pumped 80 SKS Cement didn't get Cement around surface.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CE0452	1	PUMP CHARGE	2300.00	2300.00
CE0002	70	MILEAGE	7.15	500.50
CE0711	1	min bulk delivery	660.00	660.00
CCS829	225	60140 4%	16.00	3600.00
CCS325	450	Calcium Chloride	1.25	562.50
CC6080	40	Cotton Seed Hulls	1.00	40.00
		Subtotal		7663.00
		Discount	0.15%	3449.35
		Total		4214.65
		SALES TAX		=
		ESTIMATED TOTAL		4214.65

Ravin 3737

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.



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 CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10-12-17	1091	LEE #3	33	32	2	Sumner
CUSTOMER A.A.S. Oil						
MAILING ADDRESS 2508 Edgemont Dr. Suite 4			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY STATE ZIP CODE Arkansas City KS 67005			866	Jeremy A		
			446	Jeremy M		
			611	Jude		

JOB TYPE <u>Plug B</u>	HOLE SIZE _____	HOLE DEPTH _____	CASING SIZE & WEIGHT _____
CASING DEPTH _____	DRILL PIPE _____	TUBING _____	OTHER _____
SLURRY WEIGHT _____	SLURRY VOL _____	WATER gal/sk _____	CEMENT LEFT in CASING _____
DISPLACEMENT _____	DISPLACEMENT PSI _____	MIX PSI _____	RATE _____

REMARKS: Safety meeting ran 2 joint of 1' in surface pumped Cement to Surface then ran 1" 287' in casing pumped Cement to Surface hole stud full

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CE0452	1	PUMP CHARGE	2300.00	2300.00
CE0002	70	MILEAGE	7.15	500.50
CE0711	1	min bulk delivery	110.00	110.00
CC5829	60	60/40 4%	16.00	960.00
CC5325	100	Calcium chloride	1.25	125.00
			Subtotal	4845.50
			-	2272.75
			total	2272.75
			SALES TAX	
			ESTIMATED	
			TOTAL	

Ravin 3737

AUTHORIZATION [Signature] TITLE _____ DATE _____

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