



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

TICKET NUMBER 53893

LOCATION Ottawa, KS

FOREMAN Casey Kennedy

FIELD TICKET & TREATMENT REPORT CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11/13/17	1828	Lester Scott # 19	NW 3	16	20	FR
CUSTOMER <u>Colt Energy Inc.</u>			TRUCK #			
MAILING ADDRESS <u>1112 Rhode Island Rd</u>			DRIVER			
CITY <u>Iola</u>		STATE <u>KS</u>	TRUCK #		DRIVER	
ZIP CODE <u>66749</u>						
			<u>729</u>	<u>CasKen</u>	<input checked="" type="checkbox"/> <u>Safety Meeting</u>	
			<u>467</u>	<u>Kei Car</u>	<input checked="" type="checkbox"/>	
			<u>548</u>	<u>Mik Haa</u>	<input checked="" type="checkbox"/>	
			<u>675</u>	<u>KeiDot</u>	<input checked="" type="checkbox"/>	

JOB TYPE plug HOLE SIZE _____ HOLE DEPTH _____ CASING SIZE & WEIGHT 2 1/2"
 CASING DEPTH 757' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING full
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE 2 bpm

REMARKS: held safety meeting, established circulation through 1" tubing at casing TD, mixed + pumped 17 sks Pozblend cement w/ 6% gel per sk, cement to surface, pulled tubing from well, topped well off w/ 5 sks cement, shut in well w/ 100 PSI, washed up tubing + equipment.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CE0450	1	PUMP CHARGE	1500.00	
CE0602	on lease	MILEAGE		
CE0711	1/6	hour mileage	110.00	
WE0853	1 hr	80 vac	100.00	
		trucks	1710.00	
		- 50%	855.00	
		Subtotal		855.00
CC5840	22 sks	Pozblend IA cement	297.00	
CC5965	111 #	Gel	33.30	
		materials	330.30	
		- 50%	165.15	
		Subtotal		165.15
		8%		
		SALES TAX		13.21
		ESTIMATED TOTAL		1033.36

Revin 3737

AUTHORIZATION R.R. [Signature]

TITLE _____

DATE (2016.72)

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.