CONSOLIDATED
Oil Well Services, LLC

263990

TICKET NUMBER 44777
LOCATION Ottawa, KS
FOREMAN Casey Kennedy

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
11/14/13	7069	Meining #13	SW 15	17	22	MI

CUSTOMER: Reusch Oil Well
MAILING ADDRESS: PO Box 520
CITY: Ottawa | STATE: KS | ZIP CODE: 66067

TRUCK #	DRIVER	TRUCK #	DRIVER
729	Casken	✓	Safety Meeting
606	GarMoo	✓	
548	Mikthra	✓	
369	DerMas	✓	

JOB TYPE longstring HOLE SIZE 5 5/8" HOLE DEPTH 570' CASING SIZE & WEIGHT 2 7/8" EUE
CASING DEPTH 560' DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
DISPLACEMENT 3.24 bbls DISPLACEMENT PSI _____ MIX PSI _____ RATE 4.5 bpm

REMARKS: held safety meeting, established circulation, mixed + pumped 200 # Premium Gel followed by 10 bbls fresh water, mixed + pumped 96 sks 50/50 Pozmix cement w/ 2% gel per sk, cement to surface, flushed pump clean, pumped 2 1/2" rubber plug to casing TD w/ 3.24 bbls fresh water, pressured to 800 PSI, released pressure, shut in casing.

ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		1085.00
5406	25	MILEAGE		105.00
5402	560'	casing footage		—
5407	minimum	ton mileage		368.00
5502C	2 hrs	80 Vac		180.00
1124	96 sks	50/50 Pozmix cement		1104.00
1118B	361 #	Premium Gel		79.42
4402	1	2 1/2" rubber plug		29.50
		7.65%	SALES TAX	92.80
			ESTIMATED TOTAL	3043.72

completed

Ravin 3737

AUTHORIZTION _____ 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