

Haas Petroleum, LLC
10551 Barkley Street, Suite # 307
Overland Park, Kansas 66212
Office (913) 499-8373
Fax (913) 766-1310

January 7, 2016

Company: Haas Petroleum, LLC

Lease: Ferrell – Well # 20 I HP
County: Franklin
Spot: SW SW SW NE of Sec 18, Twp 18, R 21 E
API: 15-059-27094-00-00
Spud: December 18, 2015
TD: 700'

12/18/15: Set 20' of 7" – Cemented with 5 sacks
12/22/15: Drilled from 20' to 700' TD. Ran 690' of 2 7/8 casing
12/22/15: Cemented with 92 sacks



CONSOLIDATED
Oil Well Services, LLC

PO Box 894, Chanute, KS 66720
620-431-9210 or 800-467-8678

FIELD TICKET & TREATMENT REPORT
CEMENT

5048
4953

TICKET NUMBER 49934

LOCATION 92 Town KS

FOREMAN Fred Maden

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-22-15	3457	Ferrell #20 IHP	NE 18	18	21	FR
CUSTOMER			TRUCK #			
Hoac Petroleum			712	Fred Mad		
MAILING ADDRESS			495	Har Bor		
11551 Ash St Ste 205			675	Ken Det		
CITY			DRIVER			
Leawood		STATE	Ken Cor			
		ZIP CODE				
		66211				

JOB TYPE Long Shy HOLE SIZE 5 7/8 HOLE DEPTH 700' CASING SIZE & WEIGHT 2 7/8 EUE
 CASING DEPTH 670' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT IN CASING 2 1/2' Plug
 DISPLACEMENT 4 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 BPM

REMARKS: Hold safety valves. Establish circulation. Mix & Pump 100* Gel Flush. Mix & Pump 92 SKS Por Blood I/A Cement. 2 1/2' Gel Cement to surface. Flush pump & lines clean. Displace 2 1/2" rubber plug to casing ID. Pressure to 800* PSI. Monitor pressure for 30 min MIT. Release pressure to set float valve.

Fred Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CE0450	1	PUMP CHARGE	495	1500 ⁰⁰
CE0002	15 mi	MILEAGE	495	10725 ⁰⁰
CE07H	Minimum	Ten Miles Delivery	548	660 ⁰⁰
WE0833	1/2	80 BBL Vac Truck	670	150 ⁰⁰
		Sub Total		24175 ⁰⁰
		Less 4620		- 11124
				13051 ⁰⁰
7572 CC5640	92 SKS	Por Blood I/A Cement	1242 ⁰⁰	
CC5965	255 ⁰⁰	Beneficial Gel	76 ⁰⁰	
CP8176	1	2 1/2" Rubber Plug	45 ⁰⁰	
		Sub Total		1363 ⁰⁰
		Less		- 627 ⁰⁰
				726 ⁰⁰
			8%	56 ⁰⁰
			SALES TAX	56 ⁰⁰
			ESTIMATED	
			TOTAL	2100 ⁰⁰

Rev'n 3737

AUTHORIZATION [Signature] TITLE _____ DATE 12/23/15

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.