



PRESSURE PUMPING

620-431-9210 or 800-467-8676

0101
8059

TICKET NUMBER 51786
LOCATION Cokley Ks
FOREMAN Jerry Y

WELL TICKET & TREATMENT REPORT

CEMENT

Invoice # 810718 Ks

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
5-16-17	7158	Hrack-Sowers Unit #1	20	45	37w	Cheyanne
CUSTOMER Raymond Oil			MCDONALD W to 31 S South W to 24			
MAILING ADDRESS P.O. Box 48788			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY Wichita			STATE KS	ZIP CODE		
			731	Cory D		
			566	Walt D		
			529 T127	Walt D		
			assist	Seth O		

JOB TYPE 2-Stage HOLE SIZE 7 7/8 HOLE DEPTH 5114 CASING SIZE & WEIGHT 5 1/2 15.50
 CASING DEPTH 5895 DRILL PIPE _____ TUBING _____ OTHER DV tool @ 3243
 SLURRY WEIGHT 14.2/12.5 SLURRY VOL 1.42/1.89 WATER gal/sk _____ CEMENT LEFT in CASING 42'
 DISPLACEMENT 120/77 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Softy meeting orig up on LP run float equip. Central 12 15 75, turbolizers on 69, 79, 82, 85, 88, 91 baskets on 3, 10' on 76 DV tool on 76 set @ 3243 run casing to bottom pump ball thru ocirc u/s 40 pump 5bb/H₂O mud flush, 5bb/H₂O mix 123 sks thixobland III 5# Kolsed per sk shut down release plug clean pump & lines display 121 bb/(40 H₂O 81 mud) plug landed @ 1200 # final lift 600 # released back & float held open tool 900 # ocirc 3 hrs pump 5bb/H₂O mix 460 sks liteblend III 1/4# flow seal shut down release plug clean pump & lines display 45 1/2 bb/ ← 600 # lift plug landed and tool closed @ 1000 # released back & float held
 → DV @ 1911 ← circulated cement from there

30 SKS Rethok

Thank you
Jerry & crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CE 0458	1	PUMP CHARGE	3900.00	3900.00
CE 0002	50	MILEAGE	7.15	357.50
CE 0710	26.97	ten mileage delivery	1.75	2359.88
CC 5862	125 sks	thixobland III	26.00	3250.00
CC 6077	625 #	Kolsed	.50	312.50
CC 5831	490 sks	Liteblend III (60/4080)	17.50	8575.00
CC 6075	123 #	flow seal	3.00	369.00
CC 6125	500 gal	mud flush	.65	325.00
CP 8485	1	5 1/2 AFU Float sub	585.00	585.00
CP 8254	1	5 1/2 latch down assy	400.00	400.00
CP 8554	3	centralizers 5 1/2	81.00	243.00
CP 8576	7	turbolizers 5 1/2	110.00	770.00
CP 8629	2	5 1/2 baskets	385.00	770.00
CP 8801	1	5 1/2 DV Tool	5970.00	5970.00
			subtotal	28,186.88
			-35% disc	9,865.81
			subtotal	18,321.07
			SALES TAX	1191.72
			ESTIMATED TOTAL	19,512.79

Ravin 3737

Callahan

AUTHORIZATION _____ 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



0000
7965

TICKET NUMBER 51777
LOCATION Oakley Ks
FOREMAN Jerry Y

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

FIELD TICKET & TREATMENT REPORT
CEMENT

Invoice # **810158**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
4-25-17	7158	Hoack-Sawers Unit #1	20	45	37W	Cheyenne
CUSTOMER Raymond Oil						
MAILING ADDRESS P.O. Box 48788						
CITY Wichita						
STATE Ks						
ZIP CODE 67201						
		McDonald W to 31 S to bias 15 to S. 2nd	TRUCK # 731 566	DRIVER Cory D Walt D	TRUCK #	DRIVER

JOB TYPE Surface HOLE SIZE 12 1/4 HOLE DEPTH 384 CASING SIZE & WEIGHT 8 7/8 24 #
 CASING DEPTH 380 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 14.8 SLURRY VOL 1.24 WATER gal/sk _____ CEMENT LEFT in CASING 20'
 DISPLACEMENT 23 bbl DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Softly meeting a rig up on LD break circulating with rig tree mix
270 sks surface blend II shut down release plug washup & displace with 23 bbl
fresh water & shut in. Circulated cement to surface

Cement did
circulate

Thank you
Jerry Y

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CE0491	1	PUMP CHARGE	1150 ⁰⁰	1150 ⁰⁰
CE0002	50	MILEAGE	7 ⁹⁹	357 ⁵⁰
CE0710	12.69	ton mileage delivery	12 ⁵⁰	110 ³⁸
CC5871	270 sks	surface blend II	23 ⁰⁰	6210 ⁰⁰
CP8228	1	8 7/8 wooden plug	165 ⁰⁰	165 ⁰⁰
			Subtotal	8992 ⁸⁸
			-356	3147 ⁵⁰
			Subtotal	5845 ³⁸
			SALES TAX	352.22
			ESTIMATED TOTAL	6197.60

AVIN 3737 AUTHORIZATION Ruhl W 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.