



CONSOLIDATED
Oil Well Services, LLC

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

TICKET NUMBER **46923**

LOCATION Oakley #4

FOREMAN Miles Shaw

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6-5-14	6378	Daisy Duke #1	7	15S	44W	Cherokee
CUSTOMER <u>Pronghorn</u>			Cherokee			
MAILING ADDRESS			TRUCK #	DRIVER	TRUCK #	DRIVER
			528THP	Tuckal		
			460	Cody R		
CITY	STATE	ZIP CODE				

JOB TYPE long string HOLE SIZE 7 7/8 HOLE DEPTH 534 CASING SIZE & WEIGHT 5 1/2" 80.4
CASING DEPTH 534 DRILL PIPE TUBING OTHER
SLURRY WEIGHT 12.4/14.2 SLURRY VOL 1.9/1.42 WATER gal/sk CEMENT LEFT in CASING 0
DISPLACEMENT 119 1/2 DISPLACEMENT PSI 450 MIX PSI 1150 RATE

REMARKS: Safety meeting and rig upon Martin Drilling Rig #20. Flare equipment +
Turbulizers on Sals # 2, 3, 4, 28, 72 Centralizers Sals # 1, 5, 7, 26, 28, 70, 73 Baskets on Sals
27 + 71 @ 4108' + 2308' Run casing to bottom. Circulate casing with mix mud flush
mix 55 SWS 60/40 P8 seal 1/4" #11 seal to bottom with 450 SWS OWC with 5" #11 seal. Shut down
Clear pump lines release plug displace 119 1/2 bbls water with 150 psi 1/1
Plug landed and held @ 1150 psi. Pressured back to seeps. Shut in

Mix 10shs RH + 10shs MH

Thanks Miles Shaw

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401C	1	PUMP CHARGE	3175. ⁰⁰	3175. ⁰⁰
5406	85	MILEAGE	5.25	446.25
5407	557 Tons	Ton mileage delivered	1.75	828.33
1107	18 #	Flo seal	2.97	53.46
1110A	250 #	Kol seal	.56	140. ⁰⁰
1118B	516 #	Bentonite gel	.27	139.32
1126	50 SWS	OWC cement	23.70	1185. ⁰⁰
1131	75 SWS	60/40 po2	15.86	1189.50
1144G	300 gal	Mud Flush	1. ⁰⁰	500. ⁰⁰
4104	2	5 1/2" Baskets	290. ⁰⁰	580. ⁰⁰
4130	7	5 1/2" Centralizers	61. ⁰⁰	427. ⁰⁰
4136	5	5 1/4" Turbulizers	75.75	378.75
4158	1	AFU float shoe	433.75	433.75
428 S	2	5 1/2" Port collars	2178.75	4357.50
4454	1	5 1/2" Latch down	567. ⁰⁰	567. ⁰⁰
		Subtotal		14401.06
		loss 100 dollars		1440.10
		Subtotal		12960.96
		SALES TAX		
		ESTIMATED TOTAL		

Ravin 3737

AUTHORIZATION John M

TITLE CM

DATE 6-5-14

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