



**Bison Oil Well Cementing
Single Cement Surface Pipe**

Date: 6/20/2014

Invoice # 12247

API# 05-125-12082-00

Foreman: Aaron Carrasco

Customer: excell

Well Name: bledsoe 6-28-5-44

County: yuma

State: Colorado

Sec: 28

Twp: 5n

Range: 44w

Consultant: mark zion

Rig Name & Number: excell #2

Distance To Location: 60 miles

Units On Location: 3101-4029-119

Time Requested: 3:00 AM

Time Arrived On Location: 2:30 AM

Time Left Location: _____

WELL DATA	Cement Data
Casing Size OD (in) : <u>7</u>	Cement Name: <u>BFN III 3% cca</u>
Casing Weight (lb) : <u>20.00</u>	Cement Density (lb/gal) : <u>15.2</u>
Casing Depth (ft) : <u>467</u>	Cement Yield (cuft) : <u>1.07</u>
Total Depth (ft) : <u>473</u>	Gallons Per Sack: <u>4.20</u>
Open Hole Diameter (in.) : <u>9.88</u>	% Excess: <u>0%</u>
Conductor Length (ft) : <u>0</u>	Displacement Fluid lb/gal: <u>8.3</u>
Conductor ID : _____	BBL to Pit: <u>0.0</u>
Shoe Joint Length (ft) : <u>40</u>	Fluid Ahead (bbbls): <u>3.0</u>
Landing Joint (ft) : <u>9</u>	H2O Wash Up (bbbls): <u>20.0</u>
Max Rate: _____	Spacer Ahead Makeup
Max Pressure: _____	

Calculated Results	Pressure of cement in annulus
Casing ID: <u>6.456</u> Casing Grade: <u>J-55 only used</u> cuft of Shoe: <u>9.09</u> cuft (Casing ID Squared) X (.005454) X (Shoe Joint ft)	Displacement: <u>17.65</u> bbbls (Casing ID Squared) X (.0009714) X (Casing Depth + Landing Joint - Shoe Joint)
cuft of Conductor: <u>0.00</u> cuft (Conductor Width Squared) - (Casing Size OD Squared) X (.005454) X (Conductor Length ft)	Pressure of cement in annulus Hydrostatic Pressure: <u>368.74</u> PSI
cuft of Casing: <u>123.57</u> cuft (Open Hole Squared) - (Casing Size Squared) X (.005454) X (Casing Depth - Conductor Length)	Pressure of the fluids inside casing Displacement: <u>184.11</u> psi Shoe Joint: <u>31.58</u> psi Total: <u>215.70</u> psi
Total Slurry Volume: <u>132.66</u> cuft (cuft of Shoe) + (cuft of Conductor) + (cuft of Casing)	Differential Pressure: <u>153.04</u> psi
bbbls of Slurry: <u>23.63</u> bbbls (Total Slurry Volume) X (.1781) X (% Excess Cement)	Collapse PSI: <u>#N/A</u> psi Burst PSI: <u>#N/A</u> psi
Sacks Needed: <u>124</u> sk (Total Slurry Volume) ÷ (Cement Yield) X (% Excess Cement)	Total Water Needed: <u>53.05</u> bbbls
Mix Water: <u>12.40</u> bbbls (Sacks Needed) X (Gallons Per Sack) ÷ 42	

X [Signature]
 Authorization To Proceed

Customers hereby acknowledges and specifically agrees to the terms and condition on this work order, including, without limitation, the provisions on this work order.



Bison Oil Well Cementing Single Cement Surface Pipe

Cementing Customer Satisfaction Survey

Service Date	6/20/2014
Well Name	bledsoe 6-28-5-44
County	yuma
State	Colorado
SEC	28
TWP	5n
RNG	44w

Invoice Number	12247
API #	05-125-12082-00
Job Type	Single Cement Surface Pipe
Company Name	excell

Customer Representative:

Supervisor Name:

Employee Name (Including Supervisor)	
Aaron	
tivo	
oscar	

Exposure Hours (Per Employee)	
2	
2	
2	
6	Total Exposure Hours

Did we encounter any problems on this job? Yes No

To Be Completed By Customer

Rating/Description

- 5 - Superior Performance (Established new quality/performance standards)
 - 4 - Exceeded Expectation (Provided more than what was required/expected)
 - 3 - Met Expectations (Did what was expected)
 - 2 - Below Expectations (Job problems/failures occurred - *Recovery made)
 - 1 - Poor Performance (Job problems/failures occurred - *Some recovery made)
- *Recovery: resolved issue(s) on jobsite in a timely and professional manner

RATING	CATEGORY	CUSTOMER SATISFACTION RATING
_____	Personnel -	Did our personnel perform to your satisfaction?
_____	Equipment -	Did our equipment perform to your satisfaction?
_____	Job Design -	Did we perform the job to the agreed upon design?
_____	Product/Material -	Did our products and materials perform as you expected?
_____	Health & Safety -	Did we perform in a safe and careful manner (Pre/post mtgs, PPE, TSMR, etc.)?
_____	Environmental -	Did we perform in an environmentally sound manner (spills, leaks, cleanup, etc.)?
_____	Timeliness -	Was job performed as scheduled (On time to site, accessible to customers, completed when expected)?
_____	Condition/Appearance -	Did the equipment condition and appearance meet your expectations?
_____	Communication -	How well did our personnel communicate during mobilization, rig up and job execution?

Please Circle:

- Yes No Did an accident or injury occur?
- Yes No Did an injury requiring medical treatment occur?
- Yes No Did a first-aid injury occur?
- Yes No Did a vehicle accident occur?
- Yes No Was a post-job safety meeting held?

Please Circle:

- Yes No Was a pre-job safety meeting held?
- Yes No Was a job safety analysis completed?
- Yes No Were emergency services discussed?
- Yes No Did environmental incident occur?
- Yes No Did any near misses occur?

Additional Comments:

THE INFORMATION HEREIN IS CORRECT -


Customer Representative's Signature

DATE: _____

Any additional Customer Comments or HSE concerns should be described on the back of this form