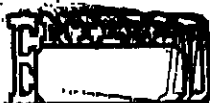


PO Box 884, Chanute, KS 66720
920-431-9210 or 800-467-8876



TICKET NUMBER 33898
LOCATION Oakley Ks
FOREMAN Walt Dunkel

FIELD TICKET & TREATMENT REPORT

CEMENT

C/d

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
3-15-12	5659	TSA-UNIT 1-14				Kiowa
CUSTOMER			<div> <div>Truck #</div> <div>DRIVER</div> <div>TRUCK #</div> <div>DRIVER</div> </div>			
Mull Dtg Co						
MAILING ADDRESS			399			
			528-T122			
CITY			Damin Miller			
STATE			Jim Meade			
ZIP CODE						

JOB TYPE <u>Port Collar</u>	HOLE SIZE _____	HOLE DEPTH _____	CASING SIZE & WEIGHT <u>5 1/2</u>
CASING DEPTH _____	DRILL PIPE _____	TUBING <u>2 7/8</u>	OTHER _____
SLURRY WEIGHT <u>11.2</u>	SLURRY VOL _____	WATER gal/sk _____	CEMENT LEFT in CASING _____
DISPLACEMENT _____	DISPLACEMENT PSI _____	MIX PSI _____	RATE <u>5 BPM 2.50" #</u>

REMARKS: Safety meeting, rig up equipment, Test casing @ 1500[#] Held
open Tool, pump into @ 4 BBL @ 5m³ Mixed 325 gals C.M.D. 1/4" Flt Seal
Displace 14 BBL H₂O, Shut Port collar, Test to 1500[#] Held, ran 5 BBLs
Circ casing Clean

Constant Dose Curve
Approx - 20 SKs to Pit

Thank You
Walter

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401 B	1	PUMP CHARGE	1695 ⁰⁰	1695 ⁰⁰
5406	75	MILEAGE	5 ⁰⁰	375 ⁰⁰
1104 S	325 SKS	Class H Concrete	17 65	5,736 25
1101	612 #	Cat seal	.49	299 ⁸⁸
1102	612 #	Calcium Chloride	.89	544 68
111A	612 #	Sodium Metasilicate	2 ⁴⁰	1,468 ⁰⁰
1118 B	1224 #	Kel	125	306 ⁰⁰
1107	81 #	Floor Seal	2 ⁸²	228 ⁴²
5407A	15.28		1 62	1914 ⁰⁰
				12,568 ⁰⁰
		Loss 10% Disc.		1,256 ⁸⁰
				11,311 ²⁰
		248 432		602 ⁴¹
			SALES TAX ESTIMATED TOTAL	11913 ⁸¹

Bayto 3737

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.