



FOREMAN *M. J. Shea*

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DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11-11-17		Scout Nicbur #1	35	2S	5/W	Washington
CUSTOMER Excel Services			Cape Co Wash Lake			
MAILING ADDRESS			TRUCK #	DRIVER	TRUCK #	DRIVER
			731	Corey D		
			366	Mrs S		
CITY						
STATE		ZIP CODE				

JOB TYPE <u>PTA</u>	HOLE SIZE <u>7 7/8"</u>	HOLE DEPTH <u>4138'</u>	CASING SIZE & WEIGHT _____
CASING DEPTH _____	DRILL PIPE <u>4"</u>	TUBING _____	OTHER _____
SLURRY WEIGHT <u>15.5</u>	SLURRY VOL <u>118</u>	WATER gal/sk _____	CEMENT LEFT in CASING _____
DISPLACEMENT _____	DISPLACEMENT PSI _____	MIX PSI _____	RATE _____

REMARKS: Salty medium and has been Excellent Rist 10 Plus considered

1st lot 50 sk @ 40/10"

2nd place 40 S10 3016'

3rd due SW SW@ 478 + 0370'

4th Nov 155x0 60'

RH 55 MH 55

165 4x Class A cement

Thanks

[illegible]

Bayin 3737

AUTHORIZTION

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.