

Casing Ticket

API Well Number:

34-167-6-4061-00-00

Record of Casing, Cementing and Mudding

Well Owner: **9998 HISTORIC OWNER**

Lease Name: **THOMAS DANIEL 1** Well No. **1** Date Spudded: **04/27/2015**

County: **WASHINGTON** Township: **LUDLOW** Date Completed:

Driller: **CO TOOLS** Tool Service Ri Inspector **CYNTHIA VAN DYKE**

AD Meets Requirements

Refer Top Ground Level Lat: **39.523130** Long: **81.154550** AD on Permit

Comments: **This is an orphan well that we cemented drive pipe and surface casing in as it had none. Contractor of the rig is M-H Well Service, cementer was Huffman-Bowers, Inc. Surface casing did not have cement to surface but it will be topped off when w plug the well later this month. 5-19-15 - Rip was placed in surface casing at 50' to insure we had cement on both sides of the surface casing up to ground level.**

FLD *Hole 1 Field Entry CONDITION

Bot 33 Diam 11.5 Top 0 LENGTH Set Dt

String Comments Casing Condition, Weight and Cement Basket

BOC 0 TOC 0 DT_CM DURATION WITNESSED

CMT_CON INSPECTOR **CYNTHIA VAN DYKE**

CLASS_CMT: SACKS YIELD WEIGHT

Cement 1

CLASS_CMT2: SACKS2 YIELD WEIGHT

Cement 2

Strings

FLD

Drive Pipe

CONDITION

Used

Bot 33 Diam 10 Top 0 LENGTH Set Dt 4/29/2015

String Comments Casing Condition, Weight and Cement Basket

[Empty text box for comments]

Cement

BOC 33 TOC 0 DT_CM DURATION WITNESSED

CMT_CON CO TOOLS INSPECTOR CYNTHIA VAN DYKE

CLASS_CMT: Class A Cement SACKS 40 YIELD WEIGHT

Cement 1

CLASS_CMT2: SACKS2 YIELD WEIGHT

Cement 2

Strings

FLD

*Hole 2 Field Entry

CONDITION

Bot 180 Diam 9.875 Top 33 LENGTH Set Dt

String Comments Casing Condition, Weight and Cement Basket

[Empty text box for comments]

Cement

BOC 0 TOC 0 DT_CM DURATION WITNESSED

CMT_CON INSPECTOR CYNTHIA VAN DYKE

CLASS_CMT: SACKS YIELD WEIGHT

Cement 1

CLASS_CMT2: SACKS2 YIELD WEIGHT

Cement 2

Strings

FLD

*Surface Casing Field Entry

CONDITION

Used

Bot 166 Diam 8.62 Top 0 LENGTH Set Dt 5/4/2015

String Comments Casing
Condition, Weight and
Cement Basket

Cement

BOC 166 TOC 0 DT_CM DURATION WITNESSED

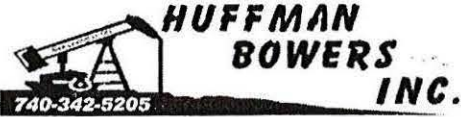
CMT_CON CO TOOLS INSPECTOR CYNTHIA VAN DYKE

CLASS_CMT: Class A Cement SACKS 45 YIELD WEIGHT 14.5

Cement 1 1 sk cottonseed hulls

CLASS_CMT2: SACKS2 YIELD WEIGHT

Cement 2



450 S State St. P.O. Box 538
 New Lexington, OH 43764
 Phone: 740-342-5205
 Fax: 740-342-7376
 huffman-bowers@sbcglobal.net

WORK ORDER

W.O. #: _____
 W.O. Date: 5-4-15

Requested By: _____
 Customer ID: _____
 Department: _____

JOB	BILL TO	SHIP TO (if different)
Lease Name/Well No. <u>USA THOMAS #1</u>	Name: _____ Company Name: <u>M-H WELL SERVICE</u> Street Address: _____ City, ST ZIP: _____ Phone: _____	

QTY	DESCRIPTION	TAXED	UNIT PRICE	LINE TOTAL
<u>45^{S/S}</u>	<u>CLASS A Cement 14.5 LB</u>			
	<u>4^{BBL} BBL mix</u>			
	<u>1 BAG HULLS</u>			
	<u>10.82 BBL DISPLACE</u>			
<u>85/8</u>	<u>O-166'</u>			

Other Comments or Special Instructions

- Total payment due 30 days after completion of work
- Please refer to the W.O. # in all your correspondence
- Please send correspondence regarding this work order to:
 Barry Bowers, 740-605-6011, huffman-bowers@sbcglobal.net

SUBTOTAL	\$	-
TAXABLE		-
TAX RATE		<u>7.250%</u>
TAX	\$	-
S & H	\$	-
OTHER	\$	-
TOTAL	\$	-

Make checks payable to
 Huffman-Bowers, Inc.

I agree that all work has been performed to my satisfaction.

Completed Date: _____

Signature: _____

Date: _____

Thank You For Your Business!