

**Notice:** Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

the same are true and correct, so help me God.

#### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

### GAS CONSERVATION DIVISION

Form CP-4
March 2009
Type or Print on this Form
Form must be Signed
All blanks must be Filled

#### WELL PLUGGING RECORD K.A.R. 82-3-117

OPERATOR: License #:				API No. 15	5			
Name:				Spot Description:				
Address 1:					Sec 7	wp S.	R East West	
Address 2:					Feet from	North /	South Line of Section	
City:	State:	Zip:+			Feet from	East /	West Line of Section	
Contact Person:				Footages	Calculated from Near	est Outside Se	ection Corner:	
Phone: ( )					NE NW	SE	SW	
Type of Well: (Check one)	Oil Well Gas Well	OG D&A Cathodi	ic	County:				
Water Supply Well	Other:	SWD Permit #:		-			Well #:	
ENHR Permit #:	Gas Sto	rage Permit #:					vveii #	
Is ACO-1 filed? Yes	No If not, is well	l log attached? Yes	No				(Date)	
Producing Formation(s): List A	All (If needed attach another	sheet)					(KCC <b>District</b> Agent's Name)	
Depth to	o Top: Botto	m: T.D		•				
Depth to	o Top: Botto	m: T.D						
Depth to	o Top: Botto	m:T.D		Plugging C	completea:			
Show depth and thickness of	all water, oil and gas forma	ations.						
Oil, Gas or Water	r Records		Casing I	Record (Surfa	ace, Conductor & Prod	uction)		
Formation	Content	Casing	Size		Setting Depth	Pulled Out	t	
cement or other plugs were u	sed, state the character of	same depth placed from (bot	ttom), to (	top) for each	n plug set.			
Plugging Contractor License #	#:		Name: _					
Address 1:			Address	ddress 2:				
City:				State:		Zip:	+	
Phone: ( )				-				
Name of Party Responsible for	or Plugging Fees:							
State of	County, _			, ss.				
	,				ployee of Operator or	05	or on above-described well,	
	(Print Name)			_ <u></u> Em	pioyee of Operator of	Operato	n on above-described Well,	

Submitted Electronically

being first duly sworn on oath, says: That I have knowledge of the facts statements, and matters herein contained, and the log of the above-described well is as filed, and



P. O. Box 466

Ness City, KS 67560

Off: 785-798-2300



## Invoice

DATE	INVOICE#
1/30/2012	21631

BILL TO

Richlan Drilling 598 2nd Ave. Beaver, KS 67525

- Acidizing
- Cement
- Tool Rental

TERMS	Well No	Lease	County	Contractor	Wel	II Туре	W	ell Category	Job Purpose	e Operator
Net 30	SWD	Ummel	Ness		Dis	sposal		Workover	PTA	Jason
PRICE	REF.		DESCRIPT	ION		QTY		UM	UNIT PRICE	AMOUNT
575W 576W-P 275 290 328-4 581W 582W	P C D 6	Mileage - 1 Way Pump Charge - PTA Cotton Seed Hulls O-Air 0/40 Pozmix (4% G ervice Charge Ceme Minimum Drayage C	ent				1 2		6.00 1,000.00 25.00 35.00 11.50 2.00 250.00	30.00T 1,000.00T 50.00T 52.50T 1,840.00T 320.00T 250.00T
		ubtotal ales Tax Ness Coun	ty						6.30%	3,542.50 223.18
									1031	DATE 2-12

Thank You For Your Business In 2011! We Look Forward To Serving You In 2012!

**Total** 





CITY, STATE, ZIP CODE

KICHAN DRILLING

TICKET

21631

SERVICE LOCATIONS	WELL/PROJECT NO	LEASE	COUNTY/PARISH	STATE	CITY .	DATE OWNER
		11:000 へいつ	223	77	1月200年、 マーツではこ	
		WINICE DWD / CO		-	というが	C CHAIN O
2.	TICKET TYPE   CONTRACTOR		RIG NAME/NO	SHIPPED	SHIPPED DELIVERED TO	ORDER NO.
	SALES SALES			ΑİV		
	WELL TYPE	WELL CATEGORY JOB	JOB PURPOSE		WELL PERMIT NO	WELLOCATION
	けららい	1	المارين			1
4.	SHOUSE STORY	Norkovef	7/1			られていたがに
REFERRAL LOCATION	INVOICE INSTRUCTIONS	Spridense				
					The second secon	

LEGAL TERMS: (	500	80	328-4		290	275		5767	575	PRICE REFERENCE	
LEGAL TERMS: Customer hereby acknowledges and agrees to										SECONDARY REFERENCE/ PART NUMBER	
es and agrees to										LOC ACCT DF	
	MINIMUM () RAYAGE	SERVICE CHARGE CEMENT	138/40 fBZMIX 4/8/25		D-AIR	COTTON SEED HULLS		Fump CHARGE	MILEAGE 110	DESCRIPTION	88
SURVEY AGREE DECIDED AGREE	13412/16533.531/10	160 Sx	1603		/2 pm	28	 -	/ (M)	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	מדי.   עואו מדי.   עוא	
SEE BOTTO	350	2	11/50		35/28	25		1777 S	180°)	PRICE	
3 .   50	250/9	\$20 B	184Dio	_  -	18 82	509		1	30 8	AMOUNT	

LIMITED WARRANTY provisions. but are not limited to, PAYMENT, RELEASE, INDEMNITY, and the terms and conditions on the reverse side hereof which include,

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

DATE SIGNED 30 JANA TIME SIGNED AM.

REMIT PAYMENT TO:

SWIFT SERVICES, INC. NESS CITY, KS 67560 P.O. BOX 466 785-798-2300

						l
3765	IOIAL		ESPOND	VISH TO R	CUSTOMER DID NOT WISH TO RESPOND	
			No	O NO	O YES	
				RVICE?	ARE YOU SATISFIED WITH OUR SERVICE?	
(XVXV)	16.3/0				SATISFACTORILY?	_
ルバル	IAX O				CALCULATIONS	
	1/200				WE OPERATED THE EQUIPMENT AND PERFORMED JOB	
	7				PERFORMED WITHOUT DELAY?	_
					OUR SERVICE WAS	
					MET YOUR NEEDS?	_
					WE UNDERSTOOD AND	
2/8					WITHOUT BREAKDOWN?	_
	PAGE IOTAL				OUR EQUIPMENT PERFORMED	_
		AGREE	DECIDED AGREE	AGREE	SURVEY	_

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES. The customer hereby acknowledges receipt of the materials and services listed on this ticket

C'NIFT OPERATOR

APPROVAL

Thank You!

JOB LOG

# SWIFT Services, Inc.

DATE 375 CAN 12 PAGE NO

1) ACT CHA	TING	WELL NO.			LEASE	nel Si	UD JOB TYPE PTA TICKET NO. 2/631
TIME	RATE (BPM)	VOLUME (8BL) (GAL)	PUN	IPS C			DESCRIPTION OF OPERATION AND MATERIALS
1600							ON LOCATION
1620			1	1		250	MIX 255X-POT DOWN ANNUL PSI 1250
1636	4	**		/		150	TAKE INS. RATE.
1638	2	3Ce		V		VAC	MIX 1355x 60/40-490.
							WELL DID NOT FILL UP.
1715							WASH TRUCK
							USED 160 SX 60/40 POZONIX 496GEL
1730							JOB Complete
							THANKS \$ 110
							SASON JEFF DAVE
				3			
	11ME 1600 1620 1636 1638	1620 1620 1636 4 1638 2	TIME RATE (BPM) (BBL) (GAL)  1600  1620  1636 4 \$\frac{3}{2}\$  1638 2 36	TIME RATE (BPM) VOLUME (BBL) (GAL) T  1600  1620  1636 4 \$\frac{3}{2}\$  1638 2 36	TIME RATE (BPM) VOLUME (BBL) (GAL) T C  1600  1620  1636  4 \$\frac{3}{2}\$  1638  2 \$\frac{3}{2}\$	TIME RATE (BPM) VOLUME (BBL) (GAL) T C TUBING  1/000  1/020  1/038 2 3/0	TIME RATE (BPM) (BBL) (GAL) T C TUBING CASING  1/0000  1/0000  1/0