



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

KANSAS CORPORATION COMMISSION 1238273
OIL & 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 #: _____
 Name: _____
 Address 1: _____
 Address 2: _____
 City: _____ State: _____ Zip: _____ + _____
 Contact Person: _____
 Phone: (_____) _____
 Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic
 Water Supply Well Other: _____ SWD Permit #: _____
 ENHR Permit #: _____ Gas Storage Permit #: _____
 Is ACO-1 filed? Yes No If not, is well log attached? Yes No
 Producing Formation(s): List All (If needed attach another sheet)
 _____ Depth to Top: _____ Bottom: _____ T.D. _____
 _____ Depth to Top: _____ Bottom: _____ T.D. _____
 _____ Depth to Top: _____ Bottom: _____ T.D. _____

API No. 15 - _____
 Spot Description: _____
 _____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West
 _____ Feet from North / South Line of Section
 _____ Feet from East / West Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: _____
 Lease Name: _____ Well #: _____
 Date Well Completed: _____
 The plugging proposal was approved on: _____ (Date)
 by: _____ (KCC District Agent's Name)
 Plugging Commenced: _____
 Plugging Completed: _____

Show depth and thickness of all water, oil and gas formations.

Oil, Gas or Water Records		Casing Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size	Setting Depth	Pulled Out

Describe in detail the manner in which the well is plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same depth placed from (bottom), to (top) for each plug set.

Plugging Contractor License #: _____ Name: _____
 Address 1: _____ Address 2: _____
 City: _____ State: _____ Zip: _____ + _____
 Phone: (_____) _____
 Name of Party Responsible for Plugging Fees: _____
 State of _____ County, _____, ss.
 _____ Employee of Operator or Operator on above-described well,
 (Print Name)

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

Submitted Electronically

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

Professional Pulling Service, LLC Invoice

PO Box 486
Hays, KS 67601

(785) 628-7443
Cell: (785) 623-3876

Invoice No. 8497
Invoice Date: January 6, 2015

Bill To: *Trek Soc, LLC*

Address:

Lease: *Walker*
Well No: 1
County: Rush

Description	Hours/Quantity	Rate	Amount
Rig time	10	\$ 195.00	\$ 1,950.00
Wash gas per gallon	3	\$ 2.27	\$ 6.81

Invoice Subtotal	\$	1,956.81
Tax Rate		6.15%
Sales Tax		120.34
Other		
TOTAL	\$	2,077.15

Make all checks payable to Professional Pulling Service, LLC
Total due in 30 days, overdue accounts subject to a service charge of 1 1/2% per month

Thank you for your business!

P.O. Box 486
 Hays, Kansas 67601
 (785) 628-7443 • Cell: (785) 623-7745

Order No. _____

W.S. No. _____ Invoice No. _____

Company TREK SOC LLC

Called By _____

Lease walker Well No. H 1

County Rush State KS

Remarks:

12/22/2014 move in Rig
up x tubing hole brace
clamps pull liner. asst pump
pull 153 Rods on singles &
pump. Rig up x tubing pull
123 Joints. 2 7/8 & 12' 2 7/8 MVD
Anchor brace well head clean
up Rig down move OFF.

12/29/14 Move in Rig up, run tubing
to 975', Cir. cement Pull tubing Finish
plug well, Rig down, move OFF

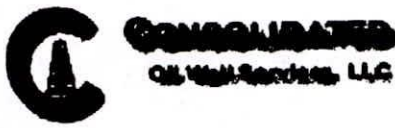
Company Supervisor [Signature]

PUMP 2x3/4 on pump.
 Make R.W.T.
 Size 2 3/4 length 10
 SUBS _____
 Length _____
 Size _____
 RODS 153
 No. 50-101-2
 Size 7/8 3/4 5 subs.
 TUBING _____
 Joints 123
 Size 2 7/8 Thread 5 Rd.
 PUPS 1
 Length 4'
 BARREL _____
 Length _____
 SEATING NIPPLE 2 7/8 x 1 1/2
 PERFORATION _____
 MUD ANCHOR 2 7/8 x 12'

PUMP _____
 Make _____
 Size _____ Length _____
 SUBS _____
 Length _____
 Size _____
 RODS _____
 No. _____
 Size _____
 TUBING _____
 Joints _____
 Size _____ Thread _____
 PUPS _____
 Length _____
 BARREL _____
 Length _____
 SEATING NIPPLE _____
 PERFORATION _____
 MUD ANCHOR _____

Unit No.	Hrs	Rate
5	12/22	9
	12/29	1
3 Callans was Gas.		
	Hrs.	Rate
	Hrs.	Rate
	Hrs.	Rate

Foreman _____



REMIT TO

Consolidated Oil Well Services, LLC
Dept:970
P.O.Box 4346
Houston, TX 77210-4346

P.O.Box884
Chanute, KS 66720
620/431-9210, 1-800/467-8676
Fax 620/431-0012

Invoice

Invoice# 802813

Invoice Date: 12/31/14

Terms: Net 30

Page 1

TREK AEC, LLC

4925 Greenville Ave., St. 915
Dallas TX 75206
USA
2143730318

WALKER #1

Part No	Description	Quantity	Unit Price	Discount(%)	Total
5401	Cement Pumper	1.000	1,395.0000	10.000	1,255.50
5406	Mileage Charge	35.000	5.2500	10.000	165.38
5407	Min. Bulk Delivery Charge	1.000	430.0000	10.000	387.00
1131	60/40 Poz Mix	155.000	15.8600	10.000	2,212.47
1118B	Premium Gel / Bentonite	533.000	0.2700	10.000	129.52
1107	Flo-Seal	39.000	2.9700	10.000	104.25
1105	Cottonseed Hulls	200.000	0.5800	10.000	104.40

Subtotal 4,842.79

Discounted Amount 484.28

SubTotal After Discount 4,358.51

Amount Due 5,017.08 If paid after 01/30/15

Tax: 156.86

Total: 4,515.38



1648
1592

TICKET NUMBER 47885
LOCATION Oakley, KS
FOREMAN Jerry Y

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

KT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-29-14	7994	Walker #1	25	165	20W	Rush
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Mailing Address			731	Jeremy R		
CITY			528-7129	Collin S		
STATE			ass:st	Rob S		
ZIP CODE			ass:st	Keith C		

JOB TYPE ORP HOLE SIZE _____ HOLE DEPTH _____ CASING SIZE & WEIGHT 5/8
 CASING DEPTH _____ DRILL PIPE _____ TUBING 2 7/8 OTHER CBP 3800
 SLURRY WEIGHT 13.8 SLURRY VOL 1.42 WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting on ice upon pulling out plug as ordered with 155SKs
60/40 poz mix 4% gel 1/4" flo seal pack
perf @ 730

80 SKs @ 775
top of with 75 SKs @ 200# hulls
hookup to backside & couldn't pump it in it
Thank you
Jerry + crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1395 ⁰⁰	1395 ⁰⁰
5406	35	MILEAGE	525	18375
5407	6.67	ton mileage delivery (min)	430 ⁰⁰	430 ⁰⁰
1131	155 SKs	60/40 poz mix	1586	245830
1186	533 #	gel	27	14391
1107	39 #	1/4" flo seal	297	11583
1105	200 #	cotton seed hulls	58	11600
			subtotal	484279
			less 10% disc	435851
			Subtotal	435851
			SALES TAX	156.86
			ESTIMATED TOTAL	4515.38

Revin 3737 AUTHORIZATION [Signature] TITLE Rig Roper 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.