

Employee of Operator or Operator on above-described well,

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

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1247282

Form CP-4

March 2009

Type or Print on this Form

Form must be Signed

All blanks must be Filled

WELL PLUGGING RECORD

API No. 15 - _____ OPERATOR: License #: Spot Description: _-__- Sec. ___ Twp. ___ S. R. ___ East West Address 1: ___ Feet from North / South Line of Section Address 2: ___ _____ Feet from East / West Line of Section Contact Person: ____ Footages Calculated from Nearest Outside Section Corner: Phone: (_____) _____ NE NW SE SW Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic County: ____ Water Supply Well Other: SWD Permit #:_ Lease Name: ______ Well #:_____ ENHR Permit #: _____ Gas Storage Permit #: ____ Date Well Completed: ___ Is ACO-1 filed? Yes No If not, is well log attached? Yes No The plugging proposal was approved on: ____ Producing Formation(s): List All (If needed attach another sheet) _____(KCC **District** Agent's Name) _____ Depth to Top: _____ Bottom: _____ T.D. ___ Plugging Commenced:_____ ___ T.D. ___ _ Depth to Top: ___ Bottom: Plugging Completed:_____ ______ Depth to Top: ______ Bottom: _____ T.D. _____ Show depth and thickness of all water, oil and gas formations. Oil, Gas or Water Records Casing Record (Surface, Conductor & Production) Size Formation Content Casing 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. _____ Name: ___ Plugging Contractor License #: ___ Name of Party Responsible for Plugging Fees: ____ _____ County, ______ , ss.

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.

(Print Name)



Pro 1 8 2015

Pract

(620) 672-1201

- B VESS OIL CORPORATION
- 1 1700 WATERFRONT PKWY BLDG 500
- L WICHITA

KS US T

67206

o ATTN:

ACCOUNTS PAYABLE

PAGE	CUST NO	YARD #	INVOICE DATE							
1 of 1	1004542	1718	03/17/2015							
INVOICE NUMBER										

91756466

1

LEASE NAME Albrecht

LOCATION

COUNTY Ellis

s STATE KS

JOB DESCRIPTION Cement-Casing Seat-Prod W T

JOB CONTACT

JOB #	EQUIPMENT #	PURCHASE	PURCHASE ORDER NO. TERMS					DUE DATE			
40824144	19843			Net -	30 days	04/16/	/2015				
_	· · · · · · · · · · · · · · · · · · ·		QTY	U of M	TIMU	PRICE	INVOICE	AMOUNT			
For Service Dates	:: 03/16/2015 to 0	3/16/2015		**							
0040824144											
	•										
171812085A Ceme	ent-Casing Seat-Prod W	03/16/2015			,						
Cement PTA								- , .			
60/40 POZ			310.00		i.	6.00		1,860.00			
Cement Gel			534.00			0.13		66.75			
Cotton Seed Hulls	nii		600.00			0.38		225.00			
"Unit Mileage Chg (I Heavy Equipment M			100.00 300.00			2,25 3.75	•	225.00 1,125.00			
	el. Chgs., per ton mil		1,335,00			1.25		1,668.76			
Depth Charge; 3001			1,00			1,080.00		1,080.00			
Blending & Mixing S			310.00			0.70		217.00			
"Service Supervisor	, first 8 hrs on loc.		1.00	EA]	87.50		87.50			
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BASIC ENERGY SERVICES, LP
PO BOX 841903
DALLAS, TX 75284-1903
BASIC ENERGY SERVICES, LP
801 CHERRY ST, STE 2100
FORT WORTH, TX 76102

SUB TOTAL TAX

6,555.00

INVOICE TOTAL

435.91 6,990.91

BASIC ** ENERGY SERVICES PRESSURE PUMPING & WIRELINE

10244 NE Hwy. 61 P.O. Box 8613 Pratt, Kansas 67124 Phone 620-672-1201

FIELD SERVICE TICKET

1718 12065 A

	PRESSUR	E PUMP	PING & WIRELINE	Z- 11	n -1	64		DATE	TICKET NO:						
DATE OF 3-1	ISTRICT Prode,	NEW □ OLD ☑ PROD □ INJ □ WDW □ CUSTOMER ORDER NO.:													
			Corporsion		LEASE A /hech + WELL'NO. /										
ADDRESS				*	COUNTY E11.5 STATE KS										
CITY		Mis	STATE		SERVICE CREW Darin, Ed, Gibson, BISS.										
AUTHORIZED B	sγ				JOB TYPE: CCSPW/ PTA										
	EQUIPMENT# HRS EQUIPMENT# HRS EQU							TRUCK CALL	ED 3	DATE	AM ZIN	4E			
19843	14							ARRIVED AT	Tana Para	16		***************************************			
21010							START OPERATION 3.16 PM /1.20								
19860	**	1													
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FIELD SERVICE ORDER NO.

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)



TREATMENT REPORT

Customer	i care	ois i	A CONTRACTOR		ease No.	73. V				Date	3	- 12	2015				
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Max Press	Max Pres	ś		To		Fi	rac	Avg				15 Min.					
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Plug Depth	Packer Do	Pror		To		FI	ush					Total Load					
Customer Re	presentative	Fron	<u>n</u>	То	Station) Ma	nager Kev	<u>a, Prodika</u> Bus M aleus	(197 <u>1)</u> (1974)	Trea	ater 🏠		Mingaliferanggaliji				
Service Units	92511	84581	158	543	7093	5	2/010	19903	19860			54; Inco.	FISHEL				
Driver Names	Dron	Eò		. 9			Gibson	B185;	*******								
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