



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

KANSAS CORPORATION COMMISSION 1257880
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



TICKET 28617

CHARGE TO: Pintail Petroleum
 ADDRESS:
 CITY, STATE, ZIP CODE:

PAGE 1 OF 21

WELL/PROJECT NO. #1
 TICKET TYPE: SERVICE SALES
 CONTRACTOR: Fritzyler
 WELL TYPE: Cross
 LEASE: Kussleman Gas Unit
 COUNTY/PARISH: Rawnee
 STATE: KS
 CITY: Larned
 DATE: 7-2-15
 OWNER: Same
 ORDER NO.
 SHIPPED VIA: CT
 DELIVERED TO: Location
 WELL PERMIT NO.
 WELL LOCATION: Larned ks-7s, 2 1/2 E, Sink
 JOB PURPOSE: PTA
 WELL CATEGORIES: PTA
 INVOICE INSTRUCTIONS:

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING		DESCRIPTION	QTY.	U/M	QTY.	U/M	UNIT PRICE	AMOUNT
		LOC	ACCT							
575		1					70	m	5.00	350.00
576 P		1		MILEAGE Trk # 112					8.00	800.00
328-4		1		Pump Change - PTA	1	job			10.25	1846.25
275		1		60/40 Pozmix (4% Gel)			2	sk	30.00	60.00
290		1		Cotton Seed Hauls			2	gal	42.00	84.00
581		1		Service Charge Cement			140	sk	1.50	285.00
583		1		Drayage	16933	lbs	5266	TM	0.75	444.50

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY**, and **LIMITED WARRANTY** provisions.

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

DATE SIGNED: 7-2-15 TIME SIGNED: 1000 ~~8:00~~ AM

SWIFT OPERATOR: David Kuehn APPROVAL:

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

SURVEY: AGREED UN-DECIDED DIS-AGREE

OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?
 WE UNDERSTOOD AND MET YOUR NEEDS?
 OUR SERVICE WAS PERFORMED WITHOUT DELAY?
 WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?
 ARE YOU SATISFIED WITH OUR SERVICE?
 YES NO

PAGE TOTAL: 3919.75
 TAX: 8.5%
 TOTAL: 4252.93

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

SWIFT OPERATOR: David Kuehn APPROVAL: David Kuehn

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE 8-7-15 PAGE NO.

CUSTOMER
Pintail Petroleum

WELL NO. #1

LEASE
Kasslemun Cms Unit

JOB TYPE
PTA

TICKET NO.
28617

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0845							on location - 2 3/8 x 5 1/2
								Tbg - 3937 Perfs - 1040', 250'
	0920	4	5 1/2	✓		∅		mix 20 sks 60/40 poz 4% gel w/ 100# huls @ 3937'
		4	14	✓		400		Displace cement
	0935							pull tubing out of Hole
	1230							run bond log
	1300							Perforate @ 1040' & 250'
	1313							trip in hole w/ tubing
	1335	4	13	✓				mix 50 sks 60/40 w/ 4% gel w/ 100# huls @ 1040'
		4	2	✓				Displace cement
	1348							pull tubing to 250'
	1407	4	25	✓		300		mix 95 sks 60/40 4% gel circulate cement to surface
								Pull out of hole
	1420	1/2	5	✓		∅		Top off 5 1/2" 20 sks
								* 185 sks total *
								wash up trucks
	1545							Job Complete

Thank You
Dawe John Tyler