



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

KANSAS CORPORATION COMMISSION 1264221
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

6206242280

1 of 1	1003591	1/1/	09/09/2015
INVOICE NUMBER			
91908741			



Liberal

(620) 624-2277

B SANDLIN OIL COMPANY
 I 621 17TH ST STE 2055
 L DENVER
 L CO US 80293
 T
 O ATTN: ACCOUNTS PAYABLE

J LEASE NAME Bozarth # 2
 D LOCATION
 B COUNTY Stevens
 S STATE KS
 I JOB DESCRIPTION Cement-Casing Seat-Prod W
 T
 E JOB CONTACT

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40872565	19842		Net - 30 days	10/09/2015
For Service Dates: 09/08/2015 to 09/08/2015				
0040872565				
171706461A Cement-Casing Seat-Prod W 09/08/2015				
PTA				
60/40 POZ			480.00 EA	6.60 3,167.99 T
Cement Gel			826.00 EA	0.14 113.58 T
Heavy Equipment Mileage			75.00 MI	4.12 309.37 T
Blending & Mixing Service Charge			480.00 BAG	0.77 369.60 T
"Proppant & Bulk Del. Chgs., per ton mil			516.25 EA	1.38 709.85 T
Depth Charge; 1001'-2000'			1.00 EA	825.00 825.00 T
"Unit Mileage Chg (PU, cars one way)"			25.00 MI	2.48 61.88 T
"Service Supervisor, first 8 hrs on loc.			1.00 EA	96.25 96.25 T
PLEASE REMIT TO: BASIC ENERGY SERVICES, LP PO BOX 841903 DALLAS, TX 75284-1903			SEND OTHER CORRESPONDENCE TO: BASIC ENERGY SERVICES, LP 801 CHERRY ST, STE 2100 FORT WORTH, TX 76102	
			SUB TOTAL	5,653.52
			TAX	367.48
			INVOICE TOTAL	6,021.00

TD

6206242260



BASIC
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE
1700 S. Country Estates Rd.
Liberal, Kansas 67905
Phone 620-624-2277

FIELD SERVICE TICKET
1717 06461 A

DATE 9-8-15 DISTRICT 1717

CUSTOMER Sandlin

ADDRESS

CITY STATE

AUTHORIZED BY T Davis

NEW WELL OLD WELL PROD INJ WDW CUSTOMER ORDER NO.:

LEASE Bozarth #1 WELL NO.

COUNTY Stevens STATE KS

SERVICE CREW U Esqueda, S Hart, M Luvie

JOB TYPE: 741 PTA

EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	TIME
28940	4	19566	4				9-8-15	AM 7:00
38119	4							AM 1:00
19842	4							AM 2:00
19827	4							PM 4:00
19808	4							AM 5:00
33021	4							PM 5:00
						MILES FROM STATION TO WELL		25 mi

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).
The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP.

SIGNED: *[Signature]*
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
11103	60/40 Poz	SK	480		5760.00
11200	Cement Gel	lb	826		206.50
E101	Heavy Equipment Mileage	mi	75		562.50
E240	Blending & Mixing Service	SK	480		672.00
E113	Proppant - Bulk Delivery	cu/yd	516		1290.63
E202	Pump Depth: 1001-2000	4hr	1		1500.00
E100	Unit Mileage	mi	25		112.50
S003	Service Supervisor	ea	1		175.01
SUB TOTAL					\$5653.52

CHEMICAL / ACID DATA:			

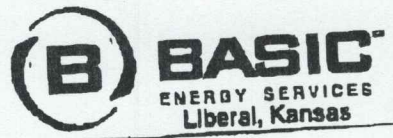
SERVICE & EQUIPMENT	% TAX ON \$	
MATERIALS	% TAX ON \$	
TOTAL		

SERVICE REPRESENTATIVE: *[Signature]*

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: *[Signature]* 9/8/15
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.

6206242280



Cement Report

Customer: <u>Sandlin</u>	Lease No:	Date: <u>9.8.15</u>
Lease: <u>Bozard</u>	Well #: <u>2</u>	Service Receipt: <u>06461</u>
Casing Depth:	County: <u>Stevens</u>	State: <u>KS</u>
Job Type: <u>241-ATA</u>	Formation:	Legal Description:

Pipe Data		Perforating Data		Cement Data
Casing size: <u>8 5/8"</u>	Tubing Size: <u>5 1/2" 15.5#</u>	Shots/FI		Lead
Depth:	Depth:	From: <u>1830</u>	To: <u>1830</u>	
Volume:	Volume:	From:	To:	
Max Press:	Max Press:	From:	To:	Tail in
Wall Connection:	Annulus Vol.:	From:	To:	
Plug Depth: <u>1830</u>	Packer Depth:	From:	To:	

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
1:00					on loc-site assessment
2:00					spot trucks rig up
2:30					Safety meeting - DA
3:00					pressure test @ 1000#
3:00		100	40	3	CNC @ 1830'
4:00	100	100	125	3	make & pump 470 sk. w/40 Poz @ 13.5# - 150 #35k
					CNC out to surface
					psi to 800#, tie on annulus
					psi to 1500#
					job complete

Service Units	<u>17940</u>	<u>1819-19842</u>	<u>14314-19078</u>	<u>14305-14284</u>
Driver Names	<u>A Diver</u>	<u>M Espino</u>	<u>S Lewis</u>	<u>M Lewis</u>

S Helms
Customer Representative

T Davis
Station Manager

A Diver
Cementer

