

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

1270088

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 #:			1	API No. 15	5 -						
Name:				Spot Description:							
Address 1:				•	·	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 Nearest Outside Section 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 #:		Lease Name: Well #: Date Well Completed: The plugging proposal was approved on: (Date							
ENHR Permit #:	Gas Sto	orage Permit #:									
Is ACO-1 filed? Yes	No If not, is well	I log attached? Yes	No								
Producing Formation(s): List A	All (If needed attach another	r sheet)		by:		(KCC District Agent's Name)					
Depth to	Top: Botto	om: T.D		Plugging (Commenced:						
Depth to	Top: Botto	om: T.D		Plugging Completed:							
Depth to	Top: Botto	om:T.D									
Show depth and thickness of a	all water, oil and gas forma	ations.									
Oil, Gas or Water	r Records		Casing R	g Record (Surface, Conductor & Production)							
Formation	Content	Casing	Size		Setting Depth	Pulled Out					
Describe in detail the manner cement or other plugs were us						ods used in introducing it into the hole. If					
Plugging Contractor License #	# :		Name: _	ame:							
Address 1:			Address	2:							
City:				State:		Zip:+					
Phone: ()											
Name of Party Responsible fo	or Plugging Fees:										
State of	Countv			_ , SS.							
	3 , -				ployee of Operator or	Operator on above-described well,					
	(Print Name)		=[]]	ployee of Operator or	Operator on above-described well,						

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.



10244 NE Hury: 61 P.G. Box 5613 Prest, Kanene 67124 Phone 626-672-1281

FIELD SERVICE TICKET

1718 FEEE A

FREN	SUPE PUMPING & WIFELINE	6:15:17	Company of the Compan	DATE TICKET NO.							
DATE OF 8-13	AND DISTRICT POST	AC and a new	WELL BY BEND DING DAM DREAMS.								
GUSTOMER // c /	IF OIL COMPON	LLC	LEASE // CITICAL / STATE WELL NOW !								
ADDRESS		en e	COUNTY F	ルゥ state 定文							
CITY	STATE	and the second s	Contract the second	NDSIA ID, NYSTRA							
AUTHORIZED BY		il and the second of the secon		NO PIA							
EQUIPMENT#	PRINTER SERVICE OF LEGISLATION	HES E	CHIPMENTA : !	HS_TRUCK CALLED PROPERTY AND A PARTY AND A							
4449	可是是经验的证据的	en graff e falser t	grande de Santo Const	ASSENCED AT 3000 (1) (1) (2) (2)							
1966				START OPERATION & AT ME S. AS							
Marine Strawerskie in				FINISH GRENATION 5./3 MIS 1/2							
				RELEASED							
				MILES FROM BITATION PO NIPLE 1 2 2 2							
		ullet $ullet$	Martin 1994	WINDS LANCOUNTER TO A STATE OF THE PARTY OF							

CONTRACT CONDITIONS: (This contract must be signed before the job le con-The undereigned is authorized to entertie the contract as arragent a products, analyze supplies includes all of analyze these terms and others. become a part of this contract without the written consent of an officer of Basic Energy Services LP. (WELL OWNER, OPERATOR, CONTRACTOR OF AS CUANTITY TENTER UNIT PRICE MATERIAL, EQUIPMENT AND SERVICES USED alua H2 4110 Cemera Gei e hor MODERN SANDLING PRIVATE SHEA Dryin Charce 1001 - 7001 4 GE JUO Mensions arrens 003 - SIE TOTAL JA . J. 35 CHEMICAL / ACID DATA: STAX ON \$ SERVICE L'EQUIPMENT %TAX ON \$ MATERIALS JACOURIA TOTALIA 650

THE ABOVE MATERIAL AND SERVICE 2000 (1)

ORGENED BY CUSTOMER AND RECEIVED BY: 14-14 AND 14-14 AND

REPRESENTATIVE



TREATMENT REPORT

Cystomer 11C12 r1 Q 1 Company LLC					Le	Lease No.						Date	<i></i>	. 1 ">						
Lease / Free Free					W	Well # /						1	8 13 2015							
Field Order	Field Order # Station Prs 1775										1160	County	y /	State 163						
	C/11.	/)) J.A					•	For	mation				Legal De	escription	3 6 -	13	17		
PIPE DATA PERFORATING					ΓING	IG DATA FLUID USED					TREATMENT RESUME									
Casing Size P Tubing Size Shots/Ft				Acid					RATE PRESS ISI					P						
Depth // La			From		То		Pre Pad				Max				5 Min.					
Volume /6			From	То			Pad				Min				10 Min.					
Max Press	Max Pres	s	From	То			Frac				Avg				15 Min.					
Well Connecti	on Annulus \	/ol.	From		То						HHP Used				Annulus Pressure					
Plug Depth	oth Packer Depth		To	Flush .			4 L 19.	Gas Volume				Total Load								
Customer Re	presentative		<u> </u>			Station	Man	ager				Trea	ater							
Service Units	92511	17	687	1930	15	1990	3	19860												
Driver Names	Dera	T	Ċ.	10		Nys	ozí za	1 / wa												
Time	Casing Pressure		ubing essure	Bbls. Pumped				Rate			Service Log									
2 1100								on loss on sern, mercins												
							25554 60/40 POZ, 4 40 6-1, 11 Con Com													
							16.5 p. 1 1012 5 2 5 25 5 5													
							1160 500													
	200			10				_5	'X	Ty where										
	200					3		\$ \$												
	200				3					5 26 20										
	200				10	0		,		10 mus 200 10001c										
	100	7				2/			G was											
	200		21				Uj				(16)									
	100			3	1/			270 - 50%												
		_			<u> </u>			1.	 			-								
	100	_		3 10				4	3 24.00											
	100	_	<u> </u>					4	Surcemen											
	100	<u> </u>						<u>4</u>	1 2 4 1 2											
	50	-						3	40 10 30											
	0	\vdash		6				<u> </u>	Marche - 12 18											
	δ_	 		<u> </u>	3		<u> </u>	<u> 3</u>	196	101	6 1 1									
		_		-					T	1 0	Co. on N.		10							
	<u> </u>	 				-+			1 00	בזע (<i>((را۳) ب</i> 	P:0	11)	<u>-1.0</u>	d Cre	<u>'</u>				
											Thenk You!									