



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

KANSAS CORPORATION COMMISSION 1271684
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

3613A Y Road
Madison, KS 66860
Ph: 620-437-2661
Fax: 620-437-2881



HURRICANE SERVICES INC

104 Prairie Plaza Parkway
Garnett, KS 66032
Ph: 785-448-3100
Fax: 785-448-3102

FED ID# 48-1214033
MC ID# 165290

Remit to: Hurricane Services, Inc.
250 N. Water, Suite 200
Wichita, KS 67202

RECEIVED

NOV 04 2015

Customer:

LOTUS OPERATING COMPANY, LLC
100 S. MAIN, STE 420
WICHITA, KS 67202

Invoice Date: 10/28/2015
Invoice #: 0020606
Lease Name: RUCKER
Well #: 1
County: BARBER

Date/Description	HRS/QTY	Rate	Total
See ticket 50489 of TG	0.000	0.000	0.00
Cement Pozmix 60/40	175.000	12.000	2,100.00 T
Bentonite Gel	1,500.000	0.300	450.00
Cement pump-Longstring/Plug	1.000	790.000	790.00
Heavy Eq mileage one way	10.000	3.250	32.50
Light Eq mileage one way	10.000	1.500	15.00
Bulk trailer #250	1.000	300.000	300.00
Bid price	1.000	420.000-	420.00-T
Bid price	1.000	317.500-	317.50-

Net Invoice 2,950.00
Sales Tax: (7.50%) 126.00
Total 3,076.00

All invoices are due upon receipt. Interest at the rate of 1 1/2% per month may be charged on all invoices not paid within 30 days from date of invoice.

WE APPRECIATE YOUR BUSINESS!



250 N. Water, Ste 200 - Wichita, Ks 67202

HURRICANE SERVICES INC

104 Prairie Plaza Parkway - Garnett, Ks 66032

Customer: Lotus Operating Company, LLC
Address: 100 South Main, Suite 420
City, State, Zip: Wichita, KS 67202
Job type: Plug Job
Well Details: 7 7/8 Hole...2 3/8 tubing @ 600'...271'...60'
Well name & No.: Rucker #1
County: Barber
State: KS
Equipment #, Driver, Hours, TRUCK CALLED, ARRIVED AT JOB 8:30, START OPERATION 9:15, FINISH OPERATION 10:28, RELEASED 10:45, MILES FROM STATION TO WELL

Treatment Summary

Table with columns: Product/Service Code, Description, Unit of Measure, Quantity, List Price/Unit, Gross Amount, Net Amount. Includes items like 60/40 Pozmix Cement, Bentonite Gel, Cement Pump, Heavy Equip. One Way, Light Equip. One Way, Minimum Ton Mile Charge.

TERMS: Cash in advance unless Hurricane Services Inc has approved credit prior to sale. Credit terms of sale for approved accounts are total invoice due on or before the 30th day from the date of invoice.

Summary table: Gross: \$ 3,687.50, Net: \$ 2,950.00, Total Taxable \$ -, Tax Rate: 7.150%, Sale Tax: \$ -, Total: \$ 2,950.00

Date of Service: 10/28/2015
HSI Representative: Tom Goodner
Customer Representative:

X

CUSTOMER AUTHORIZED AGENT

Customer Comments or Concerns:



250 N. Water, Ste 200 - Wichita, Ks 67202

HURRICANE SERVICES INC

104 Prairie Plaza Parkway - Garnett, Ks 66032

Customer	Lotus Operating Company, LLC			Customer Name:		Ticket No.:	50489			
Address:	100 South Main, Suite 420			AFE No.:		Date:	10/28/2015			
City, State, Zip:	Wichita, KS 67202			Job type	Plug Job					
Service District:				Well Details:	7 7/8 Hole...2 3/8 tubing @ 600'...271'...60'					
Well name & No.	Rucker #1			Well Location:		County:	Barber	State:	KS	
Equipment #	Driver	Equipment #	Driver	Equipment #	Hours	TRUCK CALLED			AM PM	TIME
231	Tom					ARRIVED AT JOB			AM PM	8:30
163/250	Troy					START OPERATION			AM PM	9:15
31	Keith					FINISH OPERATION			AM PM	10:28
						RELEASED			AM PM	10:45
						MILES FROM STATION TO WELL				

Treatment Summary										

Product/Service Code	Description	Unit of Measure	Quantity	List Price/Unit	Gross Amount	Item Discount	Net Amount
p01603	60/40 Pozmix Cement	sack	175.00	\$12.00	\$2,100.00	20.00%	\$1,680.00
p01607	Bentonite Gel	lb	1,500.00	\$0.30	\$450.00	20.00%	\$360.00
C23101	Cement Pump	ea	1.00	\$790.00	\$790.00	20.00%	\$632.00
C00101	Heavy Equip. One Way	mi	10.00	\$3.25	\$32.50	20.00%	\$26.00
C00102	Light Equip. One Way	mi	10.00	\$1.50	\$15.00	20.00%	\$12.00
C00104	Minimum Ton Mile Charge	ea	1.00	\$300.00	\$300.00	20.00%	\$240.00

TERMS: Cash in advance unless Hurricane Services Inc has approved credit prior to sale. Credit terms of sale for approved accounts are total invoice due on or before the 30th day from the date of invoice. Past due accounts may pay interest on the balance past due at the rate of 1 1/2% per month or the maximum allowable by applicable state or federal laws if such laws limit interest to a lesser amount. In the event it is necessary to employ an agency and/or attorney to affect the collection of said account, Customer hereby agrees to pay all fees directly or indirectly incurred for such collection. In the event that Customer's account with HSI becomes delinquent, HSI has the right to revoke any and all discounts previously applied in arriving at net invoice price. Upon revocation, the full invoice price without discount will become immediately due and owing and subject to collection.

X _____
CUSTOMER AUTHORIZED AGENT

Gross:	\$ 3,687.50	Net:	\$ 2,950.00
Total Taxable	\$ -	Tax Rate:	7.150%
Frac and Acid service treatments designed with intent to increase production on newly drilled or existing wells are not taxable.		Sale Tax:	\$ -
		Total:	\$ 2,950.00

Date of Service:	10/28/2015
HSI Representative:	Tom Goodner
Customer Representative:	

Customer Comments or Concerns:

Hurricane Services appreciates any Comments, Concerns or Criticism's from our valuable customers as Safety and Customer Satisfaction are our Number 1 goal. All Comments are confidential and will be used in a constructive manner to improve our Safety and Job Performance.

TREATMENT REPORT



HURRICANE SERVICES INC

Customer:	Lotus Operating	Date:	10/28/2015	SO#:		1286
Representative:						
Address:						
City, State:						
County, Zip:						

Field Order No.:	50489	Open Hole:	7 7/8	Perf Depths (ft)	Perfs
Well Name:	Rucker #1	Casing Depth:			
Location:	Medicine Lodge	Casing Size:			
Formation:		Tubing Depth:	600		
Type of Service:	Plug Job	Tubing Size:	2 3/8		
Well Type:		Liner Depth:			
Age of Well:	NEW	Liner Size:			
Packer Type:		Liner Top:			
Packer Depth:		Liner Bottom:			
Treatment Via:	Tubing	Total Depth:	600	Total Perfs	0

TIME	INJECTION RATE		PRESSURE		REMARKS	PROP (lbs)	HCL (gls)	FLUID (bbls)
	FLUID	N2/CO2	STP	ANNULUS				
3:30am					Called Out			
4:00am					Leave Shop			
8:30am					On location with tubing down in well and ready			
8:45am					Safety Meeting			
8:50am					Rig up to 2 3/8 tubing 4.6#			
9:15am	2.0		50.0		Injection Rate tubing TD @ 600'			5.00
9:17am	2.0		50.0		Start mixing Gel 1500# @ 9.0 ppg			45.00
9:30am	2.8		100.0		Start mixing 50sx of 60/40 4% @ 13.8 ppg			13.00
9:35am	2.8		100.0		Displace water			1.50
9:36am					Shut down 1st stage finished			
9:37am					Unhook from tubing			
					Rig crew brings tubing TD to 271'			
9:52am					Rig crew finished / Hook up to tubing for 2nd Stage			
9:53am	2.8		50.0		Started mixing 75sx 60/40 4% @ 13.8 ppg			20.00
10:03am	2.8		50.0		Displace water			0.50
10:04am					Shut down 2nd stage finished			
10:05am					Unhook for tubing			
					Rig crew brings tubing TD to 60'			
TOTAL:						-	-	99.00

SUMMARY

Max Fl. Rate	Avg Fl. Rate	Max PSI	Avg PSI
2.8	1.5 bpm	100.0	750.0

PRODUCTS USED

175 sx 60/40 4% 1500# Bentonite Gel

Treater: Tom Goodner

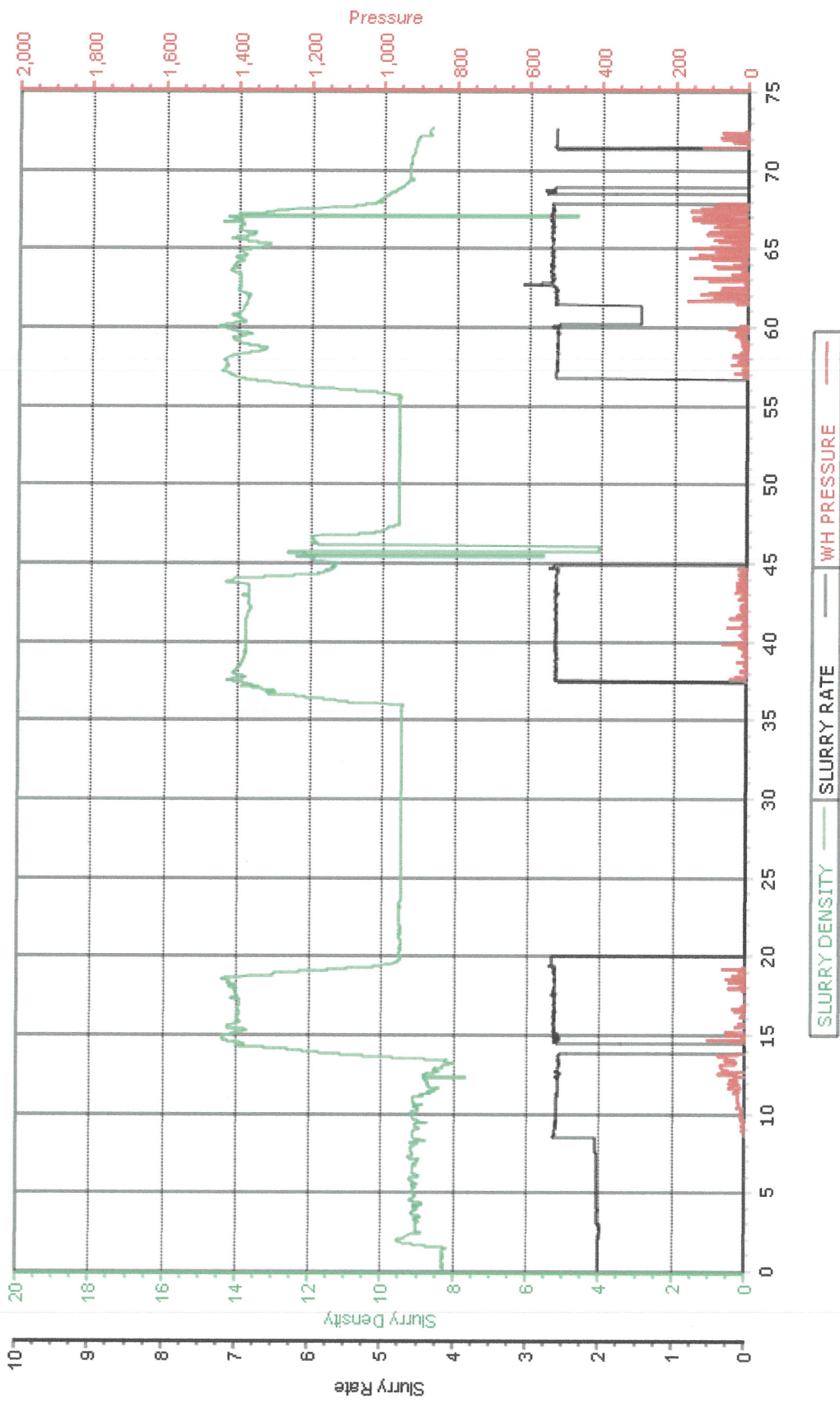
Customer: Lotus Operating



Hurricane Services Inc.
250 North Water 200 Ste.
Wichita, Kansas

HURRICANE SERVICES INC

Customer Name: Lotus Operation
Well Name:



Treater: Tom Goodner
Start Date: 10-28-15

Print
SetUp
Save
Exit