



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

KANSAS CORPORATION COMMISSION 1313202
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



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

HURRICANE SERVICES INC

104 Prairie Plaza Parkway - Garnett, Ks 66032

Customer: Cross Bar Energy, LLC		Job Name:		Ticket No.: 100758		
Address:		AFE No.:		Date: 7/27/2016		
City, State, Zip:		Job type: Plug To Abandon				
Service District: Madison		Well Details: 4 1/2" casing				
Well name & No.: Hillman # 9		Well Location: 35-23-11e		County: Greenwood	State: Kansas	
Equipment #	Driver	Equipment #	Driver	Equipment #	Driver	TIME
201	Jerry					ARRIVED AT JOB
203	Kevin					START OPERATION
30	Brad					FINISH OPERATION
						RELEASED
						MILES FROM STATION TO WELL
Treatment Summary						
<p>Holes shot in casing @ 800' and 150'. Rig up to tubing set @ 1827', pumped 15 Bbls gel ahead, spot 20 sks cement. Pull tubing up to 827', pumped 5 Bbls gel ahead, spot 20 sks cement. Pull tubing up to 158', break circulation with fresh water, mixed cement till we got good returns. Pull tubing out of well, filled casing back up with cement. Rig up to casing, mixed cement till we had good cement returns on backside. Mixed with 6 Bbls = 36 sacks. Job Complete wash up & tear down "Thank You"</p>						
Product/Service Code	Description	Unit of Measure	Quantity	List Price/Unit	Gross Amount	Net Amount
c20102	Cement Pump	ea	1.00	\$675.00	\$675.00	\$472.80
c20301	Cement Bulk Truck - Minimum	ea	1.00	\$300.00	\$300.00	\$210.00
p01603	60/40 Pozmix Cement	sack	76.00	\$12.00	\$912.00	\$638.40
p01607	Bentonite Gel	lb	261.00	\$0.30	\$78.30	\$54.81
p01607	Bentonite Gel	lb	400.00	\$0.30	\$120.00	\$84.00
<p>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 3/4% 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. Authorization below acknowledges receipt and acceptance of all terms and conditions including the Standard Terms of Sale.</p>				<p>Gross: \$ 2,085.30 Net: \$ 1,459.71</p>		
<p>Total Taxable \$ 777.21 Tax Rate: 7.150%</p>				<p>Sales Tax: \$ 55.57</p>		
				<p>Total: \$ 1,515.28</p>		
<p>Date of Service: 7/27/2016</p>				<p>Customer Representative: Brad Butler</p>		
<p><input checked="" type="checkbox"/> CUSTOMER AUTHORIZED AGENT</p>						
<p>Customer Comments or Concerns:</p>						

Hurricane Services appreciates any Comments, Concerns or Criticisms from our valuable customers as Safety and Customer Satisfaction are our Top Priority and all Comments are confidential and will be used in a constructive manner to improve our Safety and Job Performance.

cc: Robbie

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

Customer:

CROSS BAR ENERGY, LLC
1700 N WATERFRONT PKWY
BLDG 300 SUITE A
WICHITA, KS 67206

Invoice Date: 7/27/2016
Invoice #: 0023138
Lease Name: HILLMAN
Well #: 9
County: GREENWOOD

Date/Description	HRS/QTY	Rate	Total
Ticket 100758 Plug to Abandon	0.000	0.000	0.00
Pump truck #201	1.000	675.000	675.00
Bulk truck 203	1.000	300.000	300.00
Bentonite Gel	661.000	0.300	198.30
Cement Pozmix 60/40	76.000	12.000	912.00 T
Bid price	1.000	273.600-	273.60-T
Bid price	1.000	351.990-	351.99-

Lease GAINES
Well # Hillman 9
Desc. Hillman 9: cmt to
plug

Acct # 4050-92

Net Invoice	1,459.71
Sales Tax: (7.50%)	47.88
Total	<u>1,507.59</u>

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!