

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

the same are true and correct, so help me God.

Kansas Corporation Commission Oil & Gas Conservation Division

1313528

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 #:			API No.	_ API No. 15					
Name:				Spot Description:					
Address 1:									
Address 2:				Feet from North / South Line of Section					
City:	State:			Feet from East / West Line of Section					
Contact Person:			Footage:	Footages Calculated from Nearest Outside Section Corner:					
Phone: ()				NE NW SE SW					
Type of Well: (Check one)	Oil Well Gas Well	OG D&A Cathod	ic County:	County:					
Water Supply Well	Other:	SWD Permit #:							
ENHR Permit #:	Gas S	Storage Permit #:		Lease Name: Well #: Date Well Completed:					
Is ACO-1 filed? Yes	No If not, is w	ell log attached? Yes	T		proved on:(Date)				
Producing Formation(s): List	— All (If needed attach anoth	ner sheet)			(KCC District Agent's Name)				
Depth	to Top: Bot	tom: T.D							
Depth	to Top: Bot	tom: T.D	""						
		tom:T.D	Plugging	Completed:					
Show depth and thickness of		mations.	Ossina Desertio		()				
Oil, Gas or Wate			 	rface, Conductor & Prod					
Formation	Content	Casing	Size	Setting Depth	Pulled Out				
cement or other plugs were u	used, state the character	of same depth placed from (bot	ttom), to (top) for ea	ch plug set.					
Plugging Contractor License	#:		Name:						
Address 1:			Address 2:						
City:			State:						
Phone: ()									
Name of Party Responsible f	or Plugging Fees:								
State of	County	,	, SS.						
	(Drint Mana)		E	mployee of Operator o	Operator on above-described well,				

Submitted Electronically

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

SUNFLOWER WELL SERVICE, INC. P.O. BOX 341 CANTON, KS 67428-0341 PH. (620) 628-4723 FAX (620) 628-7911

INVOICE

TO: LOEWEN OPERATOR

POBOX 335

CANTON, KS 67428

INVOICE	INVOICE NUMBER		LEASE NAME	
06-29-16	3259		Lively #4	
DATE	DESCRIPTION	UNIT PRICE	TOT INV	

06/23/16

MOVED TO LOCATION:

Rigged up, Ran dump bailer in, Found T.D. at 2969', Dumped 60 gal. of sand, Had surface dug out, Tried to pull casing slip, Had to cut slip bowl, Found cement in surface pipe, Dumped 5 sacks of cement on bottom, Shut down.

Rig & Crew 8 hrs

\$195 per hr

\$1,560.00

06/24/16

Ripped 2" hole in casing at 450', Ran tubing to 450', Had to wait on cement truck, Broke circulation, Spotted 35 sacks of cement, Pulled tubing up to 250', Broke circulation with cement, Lost circulation, Pumped 80 sacks of cement, Shut down, Pulled tubing, Waited for 1 hr for cement to set up, Pumped cement down casing, Went on vacuum, Shut down.

Rig & Crew 8 hrs

\$195 per hr

\$1,560.00

THANK YOU FOR YOUR BUSINESS!!!!

Sub Total

\$3,120.00

Sales Tax 8.00%

249.60

TOTAL

\$3,369.60

TERMS: NET 30 1.5% WILL BE ADDED AFTER 30 DAYS FROM DATE OF INVOICE. PLEASE PAY FROM THIS INVOICE.

SUNFLOWER WELL SERVICE, INC.

COMPLETION – WORKOVER – ROD & TUBING SERVICE 408 N. 4TH STREET, PO. BOX 341, CANTON, KS 67428

	Company		operator				
	Lease	ively	100	Well	14		
	Unit 4	Oper	Prod.	well New well Inj	. well		
					M.C	·	
DATE 6	-23-16		WORK DONE			HRS.	AMOUNT
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2969	St. D	Jump Gos	al's of scind.	Had surt	1		
dua	Out	Tried to	5 11	slip had	to cut		
SID	bowl.		nent in surface		Dump	1	
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<u> </u>	<u> </u>	711011	CONTORNA CONTO	BIC TCI	(84.)	8	15/00
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tubir	19 UP	+0'850 17	Kroke Cin	sulation u),+1 C/m.	<u> </u>	
lost	Circal	ation Pur	12 80 S/15 OH	Jm. Spi	of down.		
Pulled	tubir	15. Wait	for ym to s	set up. to	1 40		
Panp	c/m d	lown casing	went on Ua	cuah shi	nt doals		
			\	RISS	tcrew	8	1,560,00
			EXTRA EQUIPMENT & S	• •		HRS.	AMOUNT
		-					
Power tongs							
Kero. & Paint							
Swab Cups				- 4 14 14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
Other:				, <u>, , , , , , , , , , , , , , , , , , </u>	CLID TOTAL	2/6	202
Juici.					SUB_TOTAL	/ ^	<u> </u>
					TAX	24	<u> </u>
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					TOTAL	7331	eg. CeO
·			WELL RECORD				
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	5/	8		subs		-	
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	pun	···r		sn perf		_	
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SUNFLOWER WELL SERVICE, INC. P.O. BOX 341 CANTON, KS 67428-0341 PH. (620) 628-4723 FAX (620) 628-7911

INVOICE

TO: LOEWEN OPERATOR P O BOX 335 CANTON, KS 67428

INVOICE	INVOICE NUMBER	LI	EASE NAME		
06-29-16	3260	Lively #4			
DATE	DESCRIPTION	UNIT PRICE TOT IN			
06/27/16					
	Ran bailer, Found cement at 500', No flui Cement down hole, Pumped 6 sacks of ce Rigged down	-	. •		
	Rig & Crew 3 hrs	\$195 per hr	\$585.00		
	Rig & Crew 3 hrs Sand and Cement	\$195 per hr	\$585.00 \$ 62.50		
	•	•			

THANK YOU FOR YOUR BUSINESS!!!!

Sub Total	\$1,487.00
Sales Tax 8.00%	119.00

TOTAL \$1,606.50

TERMS: NET 30 1.5% WILL BE ADDED AFTER 30 DAYS FROM DATE OF INVOICE. PLEASE PAY FROM THIS INVOICE.

SUNFLOWER WELL SERVICE, INC.

COMPLETION – WORKOVER – ROD & TUBING SERVICE 408 N. 4TH STREET, PO. BOX 341, CANTON, KS 67428

Cor	mpany	howen	oper	JOFE						_
Lea	ise	ively				Well	44			
Uni	t_4_	_ Oper. / <u>B</u> //)	11755	_ Prod. well	New well	,			
					"TRE !	·		C		
DATE 5-2	7-16		WORI	K DONE					HRS.	AMOUNT
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hale.	Starz	ted Dan	o c/m	down	note.	. Pum	0 60	St		
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			40.	-						
			EXTRA	EQUIPM	ENT & SUPP	LIES			HRS.	AMOUNT
		<u></u>								
Power tongs				·				-		
Kero. & Paint										
Swab Cups							·			90250
Other: San(1 + C	ement	62,50.				SUB	TOTAL_	1.48	
7.77	- ,	To haul		, 40 (circula	01-001	30D		11,10	~~~
A NOIN			ack hos			-		TAX _	117	06
CA RALD	1	1	1 4/200	2 70	CALC SE	21TACE	Dat		<u> </u>	77
SO ISOL PI	7 1	back til	100-					TOTAL _	1,700,	<u>6.50</u>
,				WELL R	ECORD					
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	7/8	<u> </u>				_ 2½ _ 2	· · · ·		_	
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	suos pump					_ barrel _ sn			_	
	<u> </u>					_ perf.			_ ,	
						_ ma			_	

Acid & Cement

POST OFFICE BOX 438 HAYSVILLE, KS 67060 (316) 524-1225 (316) 524-1027 FAX

Invoice

LEASE: LIVELY #4

Page: 1

BURRTON, KS | GREAT BEND, KS (620) 463-5161 FAX (620) 463-2104

(620) 793-3366 FAX (620)

INVOICE NUMBER: C43768-IN

BILL TO:

LOEWEN OPERATOR, INC. P.O. BOX 335 CANTON, KS 67428-0335

	T		T .	<u> </u>				
06/30/2016	ORDER	SALESMAN	ORDER DATE	PURCHASE	ORDER	SPECIAL	INSTRUCTIONS	
	C43768		06/27/2016		,		NET 30	
QUANTITY	U/M	ITEM NO./DE	SCRIPTION		D/C	PRICE EXTENS		
80.00	МІ	MILEAGE PICKU	IP TRUCK		10.00	2.00	144.00	
40.00	МІ	MILEAGE CEME	MILEAGE CEMENT PUMP TRUCK			4.00	144.00	
1.00	EA	CEMENT PUMP	CHARGE		10.00	650.00	585.00	
235.00	sĸ	60/40 POZ 2% G	EL MIX		10.00	10.75	2,273.63	
4.00	SK	2% ADDITIONAL	GEL		10.00	22.00	79.20	
239.00	EA	BULK CHARGE	BULK CHARGE			1.25	268.88	
420.40	МІ	BULK TRUCK - T	ON MILES		10.00	1.10	416.20	
REMIT TO: P.O. BOX 4 HAYSVILLE	38 E, KS 67060	COP FUEL SURCHARGE IS NOT TAXABLE AND IS ADDED TO MILEAGE, PUMP AND OR DELIVERY CHARGES ONLY.			MCPC	3,910.91 46.80 3,957.71		
ECEIVED BY		N	ET 30 DAYS			Invoice Total:		



ORDER Nº C 43768

BOX 438 • HAYSVILLE, KANSAS 67060 316-524-1225

		316-5	24-1225	DATE_10-2	1	11
		1 a. 1		DATE	<u> </u>	206
IS AUTHOR	IZED BY:	swen Operating	OF CUSTOMER)	·		
Address	1.0. Box 3		Canton		State	K5
To Treat Wel As Follows:	Lease	ively well	No	Customer	Order No	
Sec. Twp. Range		,	v McPhers		-	KS
implied, and no treatment is pay our invoicing de The undersi	rapie for any ga o representation yable. There wi epartment in acc gned represents	consideration hereof it is agreed that Copeland Acmage that may accrue in connection with said ser is have been relied on, as to what may be the result be no discount allowed subsequent to such date ordance with latest published price schedules. In himself to be duly authorized to sign this order for	oid Service is to service vice or treatment. Cop ts or effect of the servi 6% interest will be ch	or treat at owners risk, eland Acid Service has cing or treating said we arged after 60 days. To	the hereinbeformade no repr	pre mentioned well and esentation, expressed of
THIS ORDER MU BEFORE WORK			·	By Jord		Crisin
CODE	QUANTITY	Well Owner or Operator			Agent	
	CANTITY	<u> </u>	RIPTION		COST	AMOUNT
2	80	Vickup mileage			200	16000
2	40	Pump truck mileag.			400	16000
2	135	Pump Charge		· · · · · · · · · · · · · · · · · · ·	650W	65000
2	235	60/40/2%			1075	25263
2	4	gel			2200	8800
	·					
		·				
2	239				125	291.75
2	231	Bulk Charge	(11) #== 4		1	2/00
		Bulk Truck Miles 239 × 10.51 ×			110	462.44
		Process License Fee on	Gallo			4345.44
	j			TAL BILLING	-10% +	434.53
I certify th manner ur	at the above nder the dire	material has been accepted and used; i ction, supervision and control of the own	hat the above server, operator or his	vice was performed agent, whose sign	d in a good nature appea	and workmanlike ars below.
Copeland F	Representative	Jordan Harrison			4	3910.90
Station	Careat P	end	Bi	Well Owner, Operator	or Agent	Total
Remarks_		Thank You	DAYS	vien Owner, Operator	or Agailt	



TREATMENT REPORT

								Acid Stage N	· —	
-4	c /27 /201 c				Type Treatment: An		Type Fluid	Sand Size	Poun	ds of Sand
			t Bend F.O). No. <u>43768</u>	Bkdown	Bbl./Gal.				
	Lowen Ope ne & No. Lively					Bbl./Gal.				
cation	ie a No. Lively		Field		·	Bbl./Gal.				
ounty	McPherson		Field			Bbl./Gal.				
	Wiel Herson		State KS		Flush					
scina	ciro 51	/2	6		Treated from		ft. to		No. ft.	0
ising: irmation				Set atft.			ft. to		No. ft.	0
					from		ft. to	ft.	No. ft	0
rmation): 		Perf.	to	Actual Volume of Oil / Wat	er to Load Hol	e:			Bbl./Gal.
rmation			Perf.	to						
	Type	& Wt.	Top atft	. Bottom atft.	Pump Trucks. No. User	d: Std.	Sp		Twin	
	Cemented: Yes	Perforated	from		Auxiliary Equipment					
bing:			Swung at		Personnel					_
	Perforated	from	ft. to	ft.	Auxiliary Tools					
					Plugging or Sealing Materia	ls: Type _				
en Hole	Size	T.D.	ft. f	P.B. toft.				Gals.		lb.
mpany A	Representative		Bud Da	vis	Treater		Jordan Harr	rison		
TIME	PRE	SSURES	Total Fluid Pumped			DEMARKS				
n./p.m.	Tubing	Casing	rotor rate tamped			REMARKS				
2:15				On Location						
				Pump 35 sks 60/4	40/4% gel @ 450	feet go	od circulation	on		
				Pump 80sks @ 250 ft no circulation						
				Pump 60 sks dow						
				•				· · · · · · · · · · · · · · · · · · ·		
00				Released for day						
				Return Monday a	fter tagging cem	ent				
	· · · · · · · · · · · · · · · · · · ·		<u> </u>	netarii wonaay a	iter tagging cern	CIIC				
:00	· · · · · · · · · · · · · · · · · · ·	 		Monday morning	numn 60 eks de	wa sasir				
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