

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

1318095

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

mation Content Casing Size	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: Date Well Completed: The plugging proposal was approved on: (KCC District Agent's Name) Plugging Commenced:
State:Zip:	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: (KCC District Agent's Name) Plugging Commenced:
State:Zip:	Feet from East / West Line of Section Footages Calculated from Nearest Outside Section Corner: NE NW SE SW County: Lease Name: Date Well Completed: The plugging proposal was approved on: (KCC District Agent's Name)
act Person: e: (Footages Calculated from Nearest Outside Section Corner: NE NW SE SW County: Lease Name: Date Well Completed: The plugging proposal was approved on: (KCC District Agent's Name) Plugging Commenced:
of Well: (Check one) Oil Well Gas Well OG D&A Cathodic Vater Supply Well Other: SWD Permit #: SNHR Permit #: Gas Storage Permit #: O-1 filed? Yes No If not, is well log attached? Yes No ucing 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. Odepth and thickness of all water, oil and gas formations. Oil, Gas or Water Records Material Action Content Casing Size	NE NW SE SW County: Lease Name: Date Well Completed: The plugging proposal was approved on: (KCC District Agent's Name) Plugging Commenced:
of Well: (Check one) Oil Well Gas Well OG D&A Cathodic Vater Supply Well Other: SWD Permit #: ENHR Permit #: Gas Storage Permit #: EO-1 filed? Yes No If not, is well log attached? Yes No ucing 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. O'depth and thickness of all water, oil and gas formations. Oil, Gas or Water Records Casing Material SWD Permit #: Gas Storage Permit #: Fig. 1. SWD Permit #: SWD	County: Well #: Well #: Date Well Completed: The plugging proposal was approved on: (KCC District Agent's Name Plugging Commenced:
Vater Supply Well Other: SWD Permit #: SWD P	Lease Name: Well #:
Co-1 filed? Yes No If not, is well log attached? Yes No ucing 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. Odepth and thickness of all water, oil and gas formations. Oil, Gas or Water Records Casing Casing	Lease Name: Well #:
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Depth to Top: Bottom: T.D depth and thickness of all water, oil and gas formations. Oil, Gas or Water Records Casing Size mation Content Casing Size	
depth and thickness of all water, oil and gas formations. Oil, Gas or Water Records Taking Size Casing Size	Plugging Completed:
Oil, Gas or Water Records That in the content of t	
Oil, Gas or Water Records That in the content of t	
mation Content Casing Size	
	g Record (Surface, Conductor & Production)
ribe in detail the manner in which the well is plugged, indicating where the mud fluid w	Setting Depth Pulled Out
ribe in detail the manner in which the well is plugged, indicating where the mud fluid w	
ribe in detail the manner in which the well is plugged, indicating where the mud fluid w	
ribe in detail the manner in which the well is plugged, indicating where the mud fluid w	
ribe in detail the manner in which the well is plugged, indicating where the mud fluid w	
ribe in detail the manner in which the well is plugged, indicating where the mud fluid w	
ent or other plugs were used, state the character of same depth placed from (bottom), to	vas placed and the method or methods used in introducing it into the hole. o (top) for each plug set.
ging Contractor License #: Name	
ess 1: Addre	ss 2:
	State: + +
e: ()	_
e of Party Responsible for Plugging Fees:	
of County,	, SS.
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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.

(Print Name)



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

HURRICANE SERVICES INC

104 Prairie Plaza Parkway - Garnett, Ks 66032

Custamar	Berentz D	rilling Compar	y Inc.		stomer Namo:	Darrel Walter	rs	Ticket No.:		10066	2
Address	P.O.Box 78228				AFE No.:			Date:	9/1/2016		
City, State, Zip:	Wichita,Ks. 67278				Job type	PTA					
Service District:	Garnett.Ks.				Wall Dotalis:						
Well name & No.	Hawthorn	e SWD #1			Well Location:		County	Greenwood	State	Ks.	
Egulpment#	Driver Equipment# Driver Equipment#				Driver	TRUCK CALL		GIEENWOOD		AM PM	TildE
230	Ron	Edabuseura	Dilver	Equipment	Ditter	ARRIVED AT				AM PM	9:45
240	Jerry					START OPER				AM AM	1:30
144-150	Rick					FINISH OPER				AVA Pla	3:20
28						RELEASED				AU PU	3:45
						MILES FROM	STATION T	O WELL			
				Tre	atment Su	mmary					
									25		
Product/Service	Description	.04			Unit of Measure	Quantity	List Price/Unit	Gross Amount			Net Amou
C00101		uip. One Way			mi	15.00			and the state of t	- week medical	
200107		p. One Way	······································		mi	15.00	1				
C23001	Cement P	·			ea	1.00	4				
24001		ulk Truck - Min	imum		ea	1.00	1				
201603		mix Cement			sack	130.00]				
P01607	Bentonite	Gel			ľb	447.00]				
201607	Bentonite	Gel			ď	500.00]				
C15000	Transport	s 150 bbi			ea	6.00					
P02002	H20 - Sur	face			gal	3,360.00					
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TERMS: Cash in advi	ance unless Hu	micane Services Inc I	as approved c	radit prior to sale.							
	ast due account	ts may pay interest or	the balance pa	ast due al lhe rale of 1	i	al Taxable					
the date of invoice. Pa	maximum allow	ent it is necessary to	enploy an ager	ncy and/or allomey to		service treatments	i de				
the date of invoice. Pa 1/2% per month or the interest to a lessor are	HORITON AND ON	Customer hereby ago	ees to pay all fe	es directly or	to Increase	production on newly wells are not taxa	r di				
the date of invoice. Pa 1/1/19 per month or the interest to a lessor are affect the collection of indirectiv incurred for	f said account, such collection	, in the event that Cu:	tomers accou			Stand with the faxe					
the date of invoice. Pa 15% per month or the interest to a lesser an affect the collection of indirectly incurred for deligouent. HSI has the	f sold account, such collection he right to revol	, in the event that Cu: ke any and all discour	ts previously a	pplied in amving at ne	4						
the date of invoice. Prime when the interest to a lesser are affect the collection of indirectly incurred for definquent, HSI has the invoice price. Upon reduce and owing and state and owing and state invoice and owing and state invoice and owing and state invoice price.	if said account, such collection he right to revol evocation, the fo ubject to collect	, in the event that Cu: se any and all discour all invoice price withous ion. Authorization be:	ts previously a It discount will ow acknowledg	pplied in arriving at ne become immediately jes receipt and		Date of Servic	e:	,			
the date of invoice. Pa 195% per month or the interest to a lesser are affect the collection or indirectly incurred for delinquent, HSI has the invoice orice. Upon re-	if said account, such collection he right to revol evocation, the fo ubject to collect	, in the event that Cu: se any and all discour all invoice price withous ion. Authorization be:	ts previously a It discount will ow acknowledg	pplied in arriving at ne become immediately jes receipt and		Date of Servic		•			
the date of invoice. Prime when the interest to a lesser are affect the collection of indirectly incurred for definquent, HSI has the invoice price. Upon reduce and owing and state and owing and state invoice and owing and state invoice and owing and state invoice price.	if said account, such collection he right to revol evocation, the fo ubject to collect	, in the event that Cu: se any and all discour all invoice price withous ion. Authorization be:	ts previously a It discount will ow acknowledg	pplied in arriving at ne become immediately jes receipt and			e:_	·			

Todd Seba

Treater:



HURRICANE SERVICES INC

Customen	Berentz Drillir	ig Company I	nc.	Date:	9/1/2016	30#:	1286	
Representative:	Darrel Walters	3						
Address								
City, State:								
County, 2lp:								
						n.	a_E Danéha (fé)	Perfs
	d Order No.: Well Name:	1006 Hawthorne		Open Hole:	2260'	P	erf Depths (ft)	Feits
	Location:	Hawthorne		Casing Depth: Casing Size:	······································			
	Formation:			Tubing Depth:	2245			
Tyne	Type of Service: PTA Well Type: SWD		Tubing Size:	2 3/8				
-37-			Lîner Depth:					
	Age of Well:	•		Liner Size:				
	acker Type:			Liner Top:				
Pa	cker Depth:			Liner Bottom:				
Tre	atment Via:	Yubi	ing	Total Depth:	2245			
	_						Total Perfs	0
	INJECTIO		PRESS	URE ANNULUS	REMARKS	PRI (Ib		FLUID (bbls)
© TIME⊗ S	C C FLUID CAR	™N2/CO2 · · · ·	STATE STATE STATES	Called Out	REMARKS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	O 7. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Mary (DOID) Talkie.
8:00 AM 9:45 AM	!			On Location Wi	th Trucks			
9;45 Alvi				Hold Safety Med				
			Spot & Set Up 1					
				Rig RTIO Tag @				
				1 St Plug 2245'				
1;30; PM	3.0		250.0	Start Mix 3 Sac	ks Gel			9.00
	3.0		400.0	Start Mix 10 Sac	cks 60/40 4 % Gel @ 13.8 #/Gal			2.53
	3.0		400.0	Start Displacem	ent H20			7.00
1:42 PM				Shut Cown				
				2 Nd Plug @ 12	30'			
2:16 PM	3.0		240.0	Start Mix 2 Sac	ks Gel			6.00
	3.0		300.0	Start Mix 15 Sa	cks 60/40 4% Gel @13.8 #/Gal			3,80
	3.0		350.0	Start Displacen	nent H20			3,00
2;22 PM				Shut Down				
				3 Rd Plug @ 25				
2:45 PM	2.6		50.0		g H20 Break Circulation			
	<u> </u>			6 BBL'S Hole C	irculating	TOTAL:		54.09
						10172.		34.03
		SUMM	MARY		PRODUCTS USED			•
	Max Fl. Rate	Avg Fl, Rate	Max PSI	Avg PSI				
	3.0	2.7	400.0	232.2				
					130 Sacks 60/40 4%Gel 50	00 Lb's Gel		j
							<u> </u>	

Customer: Darrel Walters



HURRICANE SERVICES INC

2-0 5-0	TIME	INJECTIO FLUID	ON RATE N2/CO2	PRES	SURE ANNULUS	REMARKS	PROP (lbs)	HCL (gis)	FLUID (bbls)
3:05 PM 1.8 50.0 90 Sacks out Circulate to pit 22.76 22.76									
Shut Down Rig PTOOH	3:06 PM								22.76
Rig PTOOH Top off W/15 Sacks 60/40 4%Gei Cement Fell Back Top Off Next Week C	ļ								
Top off W/15 Sacks 60/40 4%Gei									
Coment Fell Back Top Off Next Week Wash Up Truck & Rack Up Truck S:45 PM Off Location Thank You Please Call Again Todd Ron Jerry Rick									
Wash Up Truck & Rack Up Truck S:45 PM Off Location Thank You Please Call Again Todd Ron Jerry Rick									
3:45 PM CIF Location Thank You Please Call Again Todd Ron Jerry Rick									
3:45 PM CIF Location Thank You Please Call Again Todd Ron Jerry Rick						Wash Up Truck & Rack Up Truck			
Thank You Please Call Again Todd Ron Jerry Rick									
Thank You Please Call Again Todd Ron Jerry Rick	3:45 PM					Off Location			
Please Call Again Todd Ron Jerry Rick									
Todd Ron Jerry Rick						· · · · · · · · · · · · · · · · · · ·			
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Activity provided on this page is calculated in the summary and totals on page 1



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

HIIRRICANE SERVICES IN

104 Prairie Plaza Parkway - Garnett, Ks 66032

Customer	Berentz D	rilling Compar	y Inc.		stomer Name;	Darrel Walter	5	Ticket No.:		10066	55		
Addross	P.O.Box 78228				AFE No.;	Dairei France	3	Date:	Dato: 9/7/2016				
City, State, Zin:	Wichita,Ks. 67278					RTA							
Service District:	<u>_</u>				Wall Cetalla:	Job type PTA							
	, , , , , , , , , , , , , , , , , , ,							1		T.			
Well name & No.		,			Well Location:			Greenwood	Stato	Ks.	TIME		
Equipment#	Driver	Equipment#	Driver	Equipment#	Drlver	TRUCK CALL				AM PM			
230	Ron Jr					ARRIVED AT				PM AM	7:15		
104	Jeery			-		START OPER				PŅ.			
28	Todd			<u> </u>		RELEASED	ATTON			PU AN	8:15		
	1044					MILES FROM	STATION T	O WELL		PM	0.15		
				Tre	eatment Su	·		*					
								No. 1884 eta erre erre erre erre erre erre erre	anogo, jy		. 52		
Product/Service Code	Description				Unit of Measure	Quantity	List Price/Unit	Gross Amount			Net Amoun		
000101		uip, One Way			mi	15.00							
00102		ip. One Way			mi	15.00							
23003	Cement P	'ump			ea	1.00							
24001	Cement B	lulk Truck - Mini	mum -		ea	1.00							
201603	60/40 Poz	zmix Cement			sack	20.00							
01607	Bentonite	Gel			lb	69.00							
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		rricane Services inc h				J	1						
he date of invoice. Pa	st due account	ounts are total invoice ts may pay interest on	the balance pa	ast due at the rate of 1	T-4-	I ~ t. I .	Ţ						
4% per month or the maximum allowable by applicable state or federal laws if such faws limit herest to a lesser amount, in the event it is necessary to employ an agency and/or etitioney to street the collection of said account, Customer hereby agrees to pay all fees directly or ndirectly incurred for such collection, in the event that Customer's account with triSt becomes		Frac and Acid to increase	I Taxable service treatments d production on newly o wells are not taxab	ır									
delinquent, HSI has the right to revoke any and all discounts previously applied in arriving at net invoice price. Upon revocation, the full inveice price without discount will become immediately				recome immediately		Date of Service	- :						
nvoice price. Upon re	due and owing and subject to collection. Authorization below acknowledges receipt and acceptance of all terms and conditions including the Standard Terms of Sala.						-						
invoice price. Upon re due and owing and su		ns including the Standa	.,	4144	; H	SI Representative							
nvoice price. Upon re due and owing and su acceptance of all term		ns including the Stand:	.,,			SI Representative	-						
nvoice price. Upon re lue and owing and su	s and condition	ns including the Stands				or Representative	-						