



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

KANSAS CORPORATION COMMISSION 1319153
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



CHARGE TO: Ness Oil Company

ADDRESS

CITY, STATE, ZIP CODE

TICKET 29661

PAGE 1 OF 1

RVIC LOCATIONS <u>Ness City KS</u>	WELL/PROJECT NO. #301	LEASE <u>Birdley Well Field</u>	COUNTY/PARISH <u>Hickman</u>	STATE <u>KS</u>	CITY <u>Ness City</u>	DATE <u>9-30-16</u>	OWNER <u>Same</u>
TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <u>North Fork Well Services</u>	RIG NAME/NO. <u>PTA</u>	SHIPPED <input checked="" type="checkbox"/>	DELIVERED TO <u>Location</u>	ORDER NO.		
WELL TYPE <u>Oil</u>	WELL CATEGORY <u>PTA</u>	JOB PURPOSE <u>PTA</u>	WELL PERMIT NO.	WELL LOCATION <u>Ness City - 15s Lpks 2sg 2sg Well</u>			
INVOICE INSTRUCTIONS							

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING		DESCRIPTION	QTY.	U/M	QTY.	U/M	QTY.	U/M	UNIT PRICE	AMOUNT
		LOC	ACCT									
575		1					20	wt			5.00	1000.00
576 P		1		Pump Charge - PTA			1	job			800.00	800.00
328-4		1		60/40 Pozmix (4% Gal)			300	sls			10.25	3075.00
275		1		Cotton Seed Hulls			2	sls			30.00	60.00
290		1		D-Air			3	gal			42.00	126.00
582		1		Minimum Drayage Charge			1	ea			250.00	250.00
583		1		Service Charge			300	sls			1.50	450.00
SURVEY <input type="checkbox"/> OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN? <input type="checkbox"/> WE UNDERSTOOD AND MET YOUR NEEDS? <input type="checkbox"/> OUR SERVICE WAS PERFORMED WITHOUT DELAY? <input type="checkbox"/> WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY? <input type="checkbox"/> ARE YOU SATISFIED WITH OUR SERVICE?											PAGE TOTAL	4861.00
REMIT PAYMENT TO: SWIFT SERVICES, INC. P.O. BOX 466 NESS CITY, KS 67560 785-798-2300											TOTAL	5232.87

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

JUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO PART OF WORK OR DELIVERY OF GOODS

SIGNED: David Kueby TIME SIGNED: 1:00 P.M.

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES: David Kueby APPROVAL

CUSTOMER ACKNOWLEDGES RECEIPT OF THE MATERIALS AND SERVICES LISTED ON THIS TICKET.

Thank You!

SWIFT Services, Inc.

DATE 9-30-16 PAGE NO.

TICKET NO. 29661

35 Oil

WELL NO. R 301

LEASE Bindley Waterford

JOB TYPE PTA

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1200							on location
								Tb. 1750 2 7/8 x 9 1/2
	1210	∅	3		✓		500	mix 10 sks down 8 5/8
	1220	4	58		✓		500	mix 220 sks @ 1750' w/ 2 sks Hall
		4	50		✓		500	circulate to surface
		4	55				600	cement to surface
	1235	∅	58		✓		∅	Shut Down casing on vacuum
								Pull out of hole
								fluid @ 600 ^{RT}
								wash up truck
								mix 70 additional sks to top off 85 on 10/3/16
								* 300 sks total *
								315 total
	1430							Job Complete
								Thank You Dave John Proston

