

**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

1320763

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. 1	15	
				scription:	
Address 1:				Sec	Twp S. R East West
Address 2:				Feet from	North / South Line of Section
City:	State: _	Zip:+		Feet from	East / West Line of Section
Contact Person:			Footages	Calculated from Nea	rest Outside Section Corner:
Phone: ( )				NE NW	SE SW
Type of Well: (Check one)	Oil Well Gas Well	OG D&A Cathod	ic County:		
Water Supply Well	Other:	SWD Permit #:			Well #:
ENHR Permit #:	Gas	Storage Permit #:			· · · · · · · · · · · · · · · · · · ·
Is ACO-1 filed? Yes	No If not, is	well log attached? Yes		•	proved on: (Date)
Producing Formation(s): Lis	t All (If needed attach and	other sheet)	by:		(KCC <b>District</b> Agent's Name)
Depth	to Top:	ottom: T.D	Plugging	Commenced:	
Depth	to Top:	ottom: T.D			
Depth	to Top: B	ottom: T.D			
Show depth and thickness of	of all water, oil and gas for	ormations.			
Oil, Gas or Wat	er Records		Casing Record (Sur	face, Conductor & Prod	luction)
Formation	Content	Casing	Size	Setting Depth	Pulled Out
		ugged, indicating where the muc er of same depth placed from (bot			ods used in introducing it into the hole. If
Plugging Contractor License	e #:		Name:		
Address 1:			Address 2:		
City:			State:		Zip:+
Phone: ( )					
Name of Party Responsible	for Plugging Fees:				
State of	Cour	ty,	, ss.		
	(Print Nam	2)	Er	mployee of Operator o	Operator on above-described well,

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.

## Invoice



RECEIVED OF 1/2 JUNE

Date	Invoice #
9/29/2016	1252

Terms

\$1,050.00

785-628-6395

ABERCROMBINE ENERGY 5510 OIL CENTER ROAD SOUTH GREAT BEND, KS 67530

Job Info	
Neely #1	
ane County, KS	
Sec 34-18S-30W	
Field Ticket #77900	

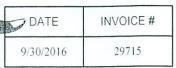
P.O. No.

Total

Net 30 Quantity Description Amount Service Charge Perforchers 2230' 75175 1500' 2575 500.00 Min Charge 3-1/8 HSC 10 Jets - per job 1,250.00 Total Charges for Service 1,750.00 Cased Hole - Discount -700.00 MENDOR NUMBER 三、一、二、河口"相连日 ode de edicient AMOUNT 1354050 NEELE PERF TO PLUG & 1 APPROVAL VERIFIED ACCURACY Please remit to above address.







	AL	
SER	LLEGES.	Brace.

BILL TO

Abercrombie Energy, LLC 5510 Oil Center Road South Great Bend, KS 67530



- Acidizing
- Cement
- Tool Rental

TERMS   Well	No.	Lease	County	Contractor	Wel	І Туре	We	ell Category	Job Purpose	Operator
Net 30 #1-	(a)	Cristy farms	Scott	Wild West	(	Oil	De	evelopment	Acidize	
PRICE REF.	1	Jeeley	DESCRIP'	TION		QTY	/	UM	UNIT PRICE	AMOUNT
576D-P 575D 328-4 275 290 581D 582D Customer Disc	Pump Milea 60/40 Cotto D-Ai Servi Minin Subto Subto Sales	p Charge - PTA age - 1 Way 0 Pozmix (4% G on Seed Hulls ir ice Charge Ceme mum Drayage C otal omer Discount F otal s Tax Lane Cour  ENDOR NUN OUCHER NU  CUCHER NU  CALL OF PE  A S 2 C  QHCC	ent charge Per Ted charge BER MBER CEIPT R O S	AMOUNT PAIL	75		40 235 3 2 250	Miles Sacks	800.00 5.00 10.25 30.00 42.00 1.50 250.00 -10.00% 7.50%	800.00 200.00 2.408.75' 90.00' 84.00' 375.00 250.00 4,207.75 -420.78 3.786.97 174.34

OB LO	1	11	WELL NO.		TIFASE :0	1	LIOR TYPE	DATE 30 SEP 16 PAGE N
Tomery.	Decom	wie	WELL NO.		LEASE Nece	ley	JOB TYPE Dandon	TICKET NO. 29715
CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS T C	PRESSURE	(PSI) CASING	DESCRIPTION OF OPERATION A	ND MATERIALS
							250 sk 60/40 psz.m)x1	(4% gel)
							250 sk 60/40 pozmixe 23×52 pens 5 - 4400	- 2300
							25 56 77	
	0930						on loc TRV 114.	
	0956	~~~	13			400	Pup down BS - 105k	holden 410 mi
	0/90		17.			1.40	the come is	Therefore for
	1005	3/2	-7		Ø		Parodo - 18 - tikes -	L. 441X 13.1909
	1405	00	+-/-		14		Pup dram 28 - tiling	355 25h hull
			102				Clark / Ablat H D	Jy JSZ NON.
. 7.							1 1 1 1 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1	) <sup>1</sup>
-			-				P. = 61 11 1 154	<u></u>
	1055	3/2	14		Ø		149 1 051 H20 2 1 21/1	mitacil) ast
	1033	22	1		4		Flush of bobbl H2D  Pull to 2217  Purp 5 bbl H2D - light  mix 60/40poz (hollsin f  - no ciec top:t-	1151 CS SK / 509
	11/0		<del> </del>					158 40
	1110		-					31/
	1139						mix 60/40 poz (4%) @ 1	1305/
	11.6-		-					130
	1155		-		-		Cement to surface	1 / 1/
			-				pull telling on	to hole -
	(202						- chop Semi-cifical	Tock - approx 100 Ft -
	1233		-	-			4000x6 \$ 2	/
			-		-		400076 BE	
			-				- Cement standing	it surface -
					-		wish teach	(0755k)
								235 street
		***************************************					0.1	
							RACKUP	
							Λ ί	
	1320						job coplete	
				-			1	
			-				1 m/25	3
							Part, B	GINE & 15AAC

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	ces, I
3	Till
	Se

1823

TICKET PAGE WELL LOCATION WELL PERMIT NO SHIPPED DELIVERED TO STATE CAME COUNTY/PARISH RIG NAME/NO. JOB PURPOSE Tree Crowner 1:30 west T WELL CATEGORY CITY, STATE, ZIP CODE CHARGE TO: DDRESS ICKET TYPE CONTRACTOR

SERVICE
SALES 中 INVOICE INSTRUCTIONS WELL/PROJECT NO. WELL TYPE SERVICE LOCATIONS SEFERRAL LOCATION

PRICE	SECONDARY REFERENCE	ACCO	ACCOUNTING						2000	
REFERENCE	PART NUMBER	LOC AC	ACCT DF	DESCRIPTION		OTY. UM	OTY.	NM	PRICE	AMOUNT
		<u>.</u>		MILEAGE TEK 114		40 his			2000	200 98
576P		-		Read Change		1 00			8/10 a	8/38
326-4				0		2357sk			6 ES	240812
375		_		coffen seed holls		3 sk			3000	20 06
390		_		D-AR		2 941			4200	8400
58i		_		service charge.		250/34			1/33	375700
583		1		Drayage (men)	0	209251/6	1828 JW	JUL .	25010	3750
						-			-	_
						-			-	
										_
LEGAL TERMS: C	LEGAL TERMS: Customer hereby acknowledges and agrees to	es and agre	es to		SURVEY		AGREE DECIDED AGREE	DIS. AGREF		<u> </u>
		7		DENAIT DAVANTAL TO	To history of the	-			PAGE TOTAL	/

SWIFT SERVICES, INC. NESS CITY, KS 67560 KEMII PAYMENI 10: P.O. BOX 466 785-798-2300 he terms and conditions on the reverse side hereof which include, out are not limited to, PAYMENT, RELEASE, INDEMNITY, and D A.M.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK PREPELIVERY OF GOODS

IMITED WARRANTY provisions.

TIME SIGNED

DATE SIGNED

102 dix PAGE TOTAL TOTAL ARE YOU SATISFIED WITH OUR SERVICE? OUR EQUIPMENT PERFORMED PERFORMED WITHOUT DELAY? WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS WITHOUT BREAKDOWN? WE UNDERSTOOD AND MET YOUR NEEDS? OUR SERVICE WAS SATISFACTORILY?

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

☐ CUSTOMER DID NOT WISH TO RESPOND

APPROVAL

SWIFT OPERATOR

Thank You!