

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

1324764

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.

(Print Name) ☐ Employee of Operator or ☐ 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.

Submitted Electronically



DEC 01 2016

PAGE	CUST NO	YARD #	INVOICE DATE
1 of 1	1004542	1718	11/29/2016
INVOICE NUMBER			
92288204			

Pratt (620) 672-1201
 B VESS OIL CORPORATION
 I 1700 WATERFRONT PKWY BLDG 500
 L WICHITA
 L KS US 67206
 T
 O ATTN: ACCOUNTS PAYABLE

J LEASE NAME Regier 1-8
 O LOCATION
 B COUNTY Thomas
 S STATE KS
 I JOB DESCRIPTION Cement-Casing Seat-Prod W
 T JOB CONTACT
 E

JOB #	EQUIPMENT #	PURCHASE ORDER NO.		TERMS	DUE DATE
40983142	86779			Net - 30 days	12/29/2016
		QTY	U of M	UNIT PRICE	INVOICE AMOUNT
For Service Dates: 11/17/2016 to 11/17/2016					
0040983142					
171814149A Cement-Casing Seat-Prod W 11/17/2016 Cement PTA					
60/40 POZ		340.00	EA	6.24	2,121.60 T
Cement Gel		586.00	EA	0.13	76.18 T
Cotton Seed Hulls		600.00	EA	0.39	234.00 T
"Unit Mileage Chg (PU, cars one way)"		100.00	MI	2.34	234.00 T
Heavy Equipment Mileage		200.00	MI	3.90	780.00 T
"Proppant & Bulk Del. Chgs., per ton mil		1,465.00	EA	1.30	1,904.50 T
Blending & Mixing Service Charge		340.00	BAG	0.73	247.52 T
Depth Charge; 0-500'		1.00	EA	520.00	520.00 T
"Service Supervisor, first 8 hrs on loc.		1.00	EA	91.00	91.00 T

BASICSM

ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

**10244 NE Hwy. 61
P.O. Box 8613
Pratt, Kansas 67124
Phone 620-672-1201**

FIELD SERVICE TICKET

1718 14149 A

DATE TICKET NO.

DATE OF JOB 11/17/16				DISTRICT				NEW WELL <input type="checkbox"/> OLD WELL <input checked="" type="checkbox"/> PROD <input type="checkbox"/> INJ <input type="checkbox"/> WDW <input type="checkbox"/> CUSTOMER ORDER NO.:			
CUSTOMER VCS Oil Corporation				LEASE Reggie				WELL NO. 1-8			
ADDRESS				COUNTY Thomas				STATE KS			
CITY				STATE				SERVICE CREW Scott, Devin, Rocky			
AUTHORIZED BY Dylan Klaus				JOB TYPE: Plug to Abandon 241							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED		DATE	AM PM	TIME	
86779	1					ARRIVED AT JOB		11/17/16	AM PM	10:30	
21010	.75					START OPERATION		11/17/16	AM PM	11:20	
						FINISH OPERATION		11/17/16	AM PM	2:30	
						RELEASED		11/17/16	AM PM	3:00	
						MILES FROM STATION TO WELL					

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP.

SIGNED: X Joe Kopy
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

[illegible]

SUB TOTAL

11,940.00

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$		
MATERIALS	%TAX ON \$		
TOTAL		6,208	80

SERVICE REPRESENTATIVE	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY:
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FIELD SERVICE ORDER NO.

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

Customer <i>Wess Oil Corporation</i>		Lease No.		Date <i>11/17/10</i>	
Lease <i>Pratt</i>		Well # <i>1-8</i>			
Field Order # <i>11149A</i>	Station <i>Pratt KS</i>	Casing <i>4 1/2</i>	Depth <i>11320</i>	County <i>Thomas</i>	State <i>KS</i>
Type Job <i>Plug for Abandon</i>			Formation	Legal Description	

PIPE DATA		PERFORATING DATA		FLUID USED	TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP
<i>4 1/2</i>	<i>2 3/8</i>						
Depth	Depth	From	To	Pre Pad	Max		5 Min.
<i>11320</i>	<i>11320</i>						
Volume	Volume	From	To	Pad	Min		10 Min.
Max Press	Max Press	From	To	Frac	Avg		15 Min.
Well Connection	Annulus Vol.	From	To		HHP Used		Annulus Pressure
Plug Depth	Packer Depth	From	To	Flush	Gas Volume		Total Load

Customer Representative				Station Manager <i>Kenny Coulter</i>				Treater			
Service Units	<i>3580</i>	<i>75857</i>	<i>50779</i>	<i>19559</i>	<i>21000</i>						
Driver Names	<i>Scott Davis</i>	<i>-</i>	<i>Bocher</i>	<i>-</i>							

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>10:30</i>					<i>On Location Safety Meeting Reg 4</i>
					<i>4320'</i>
<i>11:20</i>		<i>250</i>		<i>4</i>	<i>Pump 1120</i>
<i>11:21</i>		<i>150</i>	<i>10</i>	<i>4</i>	<i>Max 100SKS 60/40 30 lbs balls</i>
<i>11:26</i>		<i>50</i>	<i>23.5</i>	<i>4</i>	<i>Shut Displacement</i>
<i>11:30</i>		<i>0</i>	<i>15</i>		<i>Shut down</i>
					<i>3050'</i>
<i>11:56</i>		<i>30</i>		<i>4</i>	<i>Pump 1120</i>
<i>11:58</i>		<i>150</i>	<i>5</i>	<i>4</i>	<i>Max 100SKS 60/40 150 lbs balls</i>
<i>1:05</i>		<i>50</i>	<i>23.5</i>	<i>2.5</i>	<i>Shut Displacement</i>
<i>12:10</i>		<i>0</i>	<i>15</i>		<i>Shut down</i>
					<i>1513'</i>
<i>1:10</i>		<i>30</i>		<i>2.5</i>	<i>Max 100SKS 60/40 150 lbs balls</i>
<i>1:22</i>		<i>0</i>	<i>23.5</i>		<i>Circulated to surface Shut down</i>
<i>1:50</i>		<i>300</i>	<i>5</i>		<i>2 3/8 surface Annulus</i>
<i>1:55</i>					<i>Max 20SKS 20/40</i>
					<i>Pressure up Shut down</i>
					<i>Top off to surface</i>
<i>2:20</i>			<i>5</i>	<i>1</i>	<i>Max 20 SKS 60/40 150 lbs balls</i>
<i>5:15</i>		<i>0</i>			<i>Shut down Tel Complete</i>