

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

1329304

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

GLOBAL OIL FIELD SERVICES, LLC

24 S. Lincoln
RUSSELL, KS 67665

Invoice

Date	Invoice #
1/16/2017	2814

Bill To
BACH OIL PO BOX 723 ALMA, NE 68920

P.O. No.	Terms	Project
DRYDEN#2SWD	Due on receipt	

Quantity	Description	Rate	Amount
162	COMMON	16.00	2,592.00
108	POZ	9.50	1,026.00
10	GEL	21.50	215.00
10	COTTON SEED HULLS	31.50	315.00
1	TRI-PLEX PUMP CHARGE FOR PLUG	750.00	750.00
10	PUMP TRUCK MILEAGE	6.00	60.00
10	PICKUP	1.80	18.00
	25% DISCOUNT IF PAID WITHIN 15 DAYS FROM INVOICE new sales tax rate as of 7-1-2015	8.50%	0.00
Thank you for your business.		Total	\$4,976.00

GLOBAL OIL FIELD SERVICES, LLC

2814

REMIT TO 24 S. Lincoln
Russell, KS 67665

SERVICE POINT:

Russell

DATE 1-11-17	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
LEASE Dryden	WELL # 2 SWD	LOCATION WESTON LAKE 17 26 3 N			COUNTY Hook	STATE KS	
OLD OR NEW (CIRCLE ONE)							

CONTRACTOR Co Tools

TYPE OF JOB P109

HOLE SIZE _____ T.D. _____

CASING SIZE 4 1/2 DEPTH _____

TUBING SIZE 2 3/8 DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX. _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS _____

DISPLACEMENT _____

OWNER

CEMENT

AMOUNT ORDERED

275 6 3/4 4 3/4 120
500 12 12 12

COMMON	@	
POZMIX	@	
GEL	@	
CHLORIDE	@	
ASC	@	
	@	
	@	
	@	
	@	
	@	
	@	
	@	
	@	
HANDLING	@	
MILEAGE	@	

EQUIPMENT

PUMP TRUCK	CEMENTER	<u>B. H</u>
# <u>417</u>	HELPER	<u>John</u>
BULK TRUCK		
#	DRIVER	<u>John</u>
BULK TRUCK		
#	DRIVER	

REMARKS:

Drilling 23000 SW 1000 300 #H11
Tubing 21 60 SW 100 20 #H11
Like total to surface
pull tubing top of 2nd
BACK SIDE SW 150 #

SERVICE

DEPTH OF JOB	
PUMP TRUCK CHARGE	
EXTRA FOOTAGE	@
MILEAGE	@
MANIFOLD	@
	@
	@

TOTAL

CHARGE TO: Back Oil

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

	@	
	@	
	@	
	@	
	@	

TOTAL

Global Oil Field Services, LLC

You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME _____

SIGNATURE Paul Ireland

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS