

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

KANSAS CORPORATION COMMISSION 1354125
 OIL & GAS CONSERVATION DIVISION
WELL PLUGGING RECORD
 K.A.R. 82-3-117

Form CP-4
 March 2009
Type or Print on this Form
Form must be Signed
All blanks must be Filled

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



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

FIELD SERVICE TICKET

1718 14903 A

DATE _____ TICKET NO. _____

DATE OF JOB: 2/24/2017			DISTRICT: Pressure			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: FG H011			LEASE: Far B			WELL NO. 210				
ADDRESS:			COUNTY: Stafford			STATE: KS				
CITY:			STATE:			SERVICE CREW: Devin, Shawn, Josh				
AUTHORIZED BY:			JOB TYPE: 241/PTA							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
279763	1						2/24			3:00
19862	1						2/24			11:00
							2/24			11:45
							2/24			12:45
							2/24			1:00
							MILES FROM STATION TO WELL	48		

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: _____
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

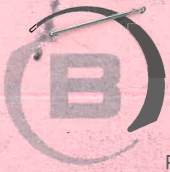
ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CR 1006	Common Cemen.	SK	200		3,200 00
E100	Un. mixed Chese P. Chem. Service	M	45		202 50
F101	Heavy Equipment Lease	M	10		675 00
F113	Propden 500 Bulk Delivery Chese P. Chem.	INJ	387		967 50
CF 201	Drain Chese 250/1000	YL	1		1,200 00
CF 240	Blend as 4 mix as Service Chese	SK	200		250 00
S003	Service Supervisory Fee 8 hrs on loc	FS	1		175 00

SUB TOTAL 6,700 00

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		3,618 00

SERVICE REPRESENTATIVE: <i>[Signature]</i>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <i>[Signature]</i>
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)	



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 14903 A

DATE _____ TICKET NO. _____

DATE OF JOB: 2/24/2017 DISTRICT: Pr 951, 1cs		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: FG Hall		LEASE: Fair B WELL NO.: 2-10								
ADDRESS:		COUNTY: Stafford STATE: KS								
CITY: STATE:		SERVICE CREW: Devin, Shawn, Josh								
AUTHORIZED BY:		JOB TYPE: 241/PTA								
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
27463	1					ARRIVED AT JOB	2/24	AM	PM	11:00
19862	1					START OPERATION	2/24	AM	PM	11:45
						FINISH OPERATION	2/24	AM	PM	12:45
						RELEASED	2/27	AM	PM	1:00
						MILES FROM STATION TO WELL	48			

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

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SIGNED: Robert Song
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT	
CR 100C	Common Cemen.	SK	200			
F100	unit - Miesse Chesse - P. Chem, Sherrill	m.	45			
F101	Heavy Equipment - M. lesse	m.	90			
F113	Proppen - 500 Bulk Delivar, Chesse, Pr, 1000	Intm	387			
CF 201	Depth Chesse i 501 - 1,000'	4hr.	1			
CF 240	Blends & Mixes Service Chesse	SK	200			
5003	Service Supervisory P.iss. & his on loc	Es	1			
					SUB TOTAL	6,700 00

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
Discount		TOTAL
		3,618 00

SERVICE REPRESENTATIVE: <u>Devin Frank</u>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <u>Robert Song</u>
FIELD SERVICE ORDER NO. _____	(WELL OWNER OPERATOR CONTRACTOR OR AGENT)



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P.O. Box 8613
Pratt, Kansas 67124
Phone 620-672-1201

FIELD SERVICE TICKET

1718 14903 A

DATE _____ TICKET NO. _____

DATE OF JOB: 2/24/2017		DISTRICT: Pressure		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: FG 1011				LEASE: Far B				WELL NO. 210							
ADDRESS:				COUNTY: Stafford				STATE: KS							
CITY:				STATE:				SERVICE CREW: Devin, Shawn, Josh							
AUTHORIZED BY:				JOB TYPE: 241/PTA											
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME					
27463	1						2/24			3:00					
19862	1						2/24			11:00					
							2/24			11:45					
							2/24			12:45					
							2/24			1:00					
						MILES FROM STATION TO WELL: 48									

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

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SIGNED: _____
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT	
CR 1006	Common Cemen.	SK	200		3,200 00	
F100	Un. grease Chese P. chng, sm...	M	45		202 50	
F101	Hesv. Equipment M. lesse	M	10		675 00	
F113	Propden. 500 Bulk Deliv. Chese P. chng	Inch	387		967 50	
CF 201	Devin Grease 250 1000	qt	1		1,120 00	
CF 240	Blends as 4 m. as Service Chese	SK	200		250 00	
S003	Service Supervisory P. chng 8 hrs on lot	FS	1		175 00	
					SUB TOTAL	6,700 00

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$		
MATERIALS	%TAX ON \$		
TOTAL		3,618 00	

SERVICE REPRESENTATIVE: <i>Devin</i>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <i>Devin</i>
FIELD SERVICE ORDER NO.	(WELL OWNER OPERATOR CONTRACTOR OR AGENT)



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FIELD SERVICE TICKET

1718 14903 A

DATE _____ TICKET NO. _____

DATE OF JOB 2/24/2017 DISTRICT Pratt, KS	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 FG Holl	LEASE Fair B WELL NO. 2-10
ADDRESS	COUNTY Stollman STATE KS
CITY STATE	SERVICE CREW Dean, Shawn, Josh
AUTHORIZED BY	JOB TYPE: 241/PTA

EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
27463	1						2/24	<input checked="" type="radio"/>	<input type="radio"/>	11:00
19862	1						2/24	<input checked="" type="radio"/>	<input type="radio"/>	11:45
							2/24	<input checked="" type="radio"/>	<input type="radio"/>	12:45
							2/24	<input checked="" type="radio"/>	<input type="radio"/>	1:00
										48

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

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SIGNED: Robbie Long
 (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CR 100C	Common Cemen.	SK	200		
F100	Un + Milled Chese - P.Chem, Sme...	m.	45		
F101	Heavy Equipment - M.lesse	m.	90		
F113	Proppen + 500 Bulk Dehydr. Chese, Pr. 1000	Tn/m	387		
CF 201	Deppn Chese i 501 - 1,000'	4hr.	1		
CF 240	Blendings + mixins Service Chese	SK	200		
S003	Service Supervisory Piss. 8 hrs on loc	Fg	1		

CHEMICAL / ACID DATA:

SUB TOTAL	6,700	00
SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
<i>Discount</i> TOTAL	3,618	00

SERVICE REPRESENTATIVE <u>Dean Frank</u>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <u>Robbie Long</u> (WELL OWNER OPERATOR CONTRACTOR OR AGENT)
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FIELD SERVICE ORDER NO. _____