

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

KANSAS CORPORATION COMMISSION 1354927
 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



REMIT TO
 Consolidated Oil Well Services, LLC
 Dept: 970
 P.O. Box 4346
 Houston, TX 77210-4346

RECEIVED
 APR 24 2017
 WICHITA

MAIN OFFICE

P.O. Box 884
 Chanute, KS 66720
 620/431-9210, 1-800/467-8676
 Fax 620/431-0012

Invoice

Invoice#

810063

Invoice Date: 04/17/17

Terms: Net 30

Page 1

ABERCROMBIE ENERGY
 5510 OIL CENTER ROAD SOUTH
 GREAT BEND KS 67530
 USA
 6207938186

REED BRAMLETT 2-30



Part No	Description	Quantity	Unit Price	Discount(%)	Total
CE0470	Cement Pump Charge 0' - 300' (Coalbed/Methane)	1.000	950.0000	30.000	665.00
CE0002	Equipment Mileage Charge - Heavy Equipment	70.000	7.1500	30.000	350.35
CE0710	Cement Delivery Charge	1.000	1,923.2500	30.000	1,346.28
CC5829	Lite-Weight Blend V (60:40:4)	365.000	16.0000	30.000	4,088.00
CC6080	Cottonseed Hulls	400.000	0.5000	30.000	140.00
Subtotal					9,413.75
Discounted Amount					2,824.13
SubTotal After Discount					6,589.62

Amount Due 9,866.75 If paid after 05/17/17

Tax: 317.10
 Total: 6,906.73

VENDOR NUMBER _____
 VOUCHER NUMBER _____
 DATE _____
 1354050
 REED BR 2
 CEMENT TO P&A WELL
 APPROVAL _____
 VERIFIED ACCURACY _____



CONSOLIDATED
Oil Well Services, LLC

1715
7870

TICKET NUMBER 51771
LOCATION Ogkley KS
FOREMAN Jerry Y

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

Invoice # 810063 KS

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
4-13-17	1112	Reed Bramlett 2-30	30	30S	41W	Stanton
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Abercrombie			731	Cory D		
MAILING ADDRESS			772-T-139	Traits W		
5510 Oil Center Road South						
CITY	STATE	ZIP CODE				
Great Bend	KS	67530				

Johnson S
to 23
4W
1/2 S
2 into

JOB TYPE OHD HOLE SIZE _____ HOLE DEPTH _____ CASING SIZE & WEIGHT 4 1/2
CASING DEPTH _____ DRILL PIPE _____ TUBING 2 3/8 OTHER _____
SLURRY WEIGHT 13.8 SLURRY VOL 1.42 WATER gal/sk _____ CEMENT LEFT in CASING _____
DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting early upon Border line Inc. plugs as ordered with 365 sks
liteblend II
80 sks @ 1652' with 250# hulls set 2 hrs pressure never held & docked
chip @ 1600 perf @ 1550
50 sks with 150 hulls > displace to 1150
230 sks @ 550' circulating cement to surface
5 sks top off

Thank you
Jerry & crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CE0470	1	PUMP CHARGE	950.00	950.00
CE0002	70	MILEAGE	7.2	500.50
CE0710	15.7	ton mileage delivery	122	1923.25
CC5829	365 sks	liteblend II	16.00	5840.00
CC6080	400 #	onion seed hulls	50	20000
			Subtotal	9413.75
			-30%	2824.13
			Subtotal	6589.62
			SALES TAX	317.10
			ESTIMATED TOTAL	6906.73

Ravin 3737

AUTHORIZATION [Signature] TITLE Foreman DATE _____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.



AESC 2015
Gold Safety Award

copy

Invoice

Pioneer Wireline Services, LLC
P.O. Box 202567
Dallas, TX 75320-2567
(620) 626-4466

RECEIVED
 APR 26 2017
 WICHITA

Page: 1

INVOICE NUMBER: 1-55127
 INVOICE DATE: 4/13/2017
 CLIENT: ABERCR

Sold To

ABERCROMBIE ENERGY LLC
 Attention: Accounts Payable
 5510 Oil Center Road South
 Great Bend, KS 67530 USA



LEASE	
WELL #	Reed Bramlett 2-30
COUNTY	Stanton
CLIENT PO	
DUE DATE	5/13/2017
ENGINEER	Page, Michael

QUANTITY	DESCRIPTION	UNIT PRICE	EXTENSION
1.000	Rig-up on Rig or Crane	484.03	484.03
1.000	Setting Service Depth	528.03	528.03
1.000	Setting Service Operation	572.04	572.04
1.000	Operation Charge for 3.50-4.24" CIBP	488.43	488.43
1.000	Perforate Slick Low Press Depth	330.02	330.02
1.000	Perforate Slick Low Press 0-6000	255.22	255.22
1.000	Perforate Slick Low Press Depth	330.02	330.02
1.000	Perforate Slick Low Press 0-6000	255.21	255.21
----- LAST ITEM -----			
	VENDOR NUMBER _____		
	VOUCHER NUMBER _____		
	VERIF OF RECEIPT _____ <i>AK</i>		
	CODE NUMBER _____	AMOUNT	
	<u>1354050</u> _____		
	<u>REEDBR2</u> _____		
	<u>PERF TO P&A WELL</u> _____		
	APPROVAL <i>TP</i> _____		
	VERIFIED ACCURACY _____		
		<i>Cut Tbg # @ 5090'</i>	
		<i>Set CIBP @ 5080'</i>	
		<i>Dumped 2 SKC cont w/</i>	
		<i>Dump bailer.</i>	
		<i>Set CIBP @ 1558'</i>	
		<i>Perf. 1557'</i>	
		<i>Perf. 550'</i>	

THANK YOU FOR YOUR BUSINESS

TERMS: If Company has an approved open account with Pioneer, invoices are payable NET 30 days from date of invoice. If Company does not have an approved open account with Pioneer, all sums are payable prior to performance of services or delivery of equipment, products, or materials. Company agrees to pay interest on any unpaid balance from the date payable until paid at the highest lawful contract rate applicable, but never to exceed 18% per annum. In the event Pioneer employs an attorney for collection of any account, Company agrees to pay reasonable attorney fees plus all collection and court costs.

Subtotal	3,243.00
Freight	0.00
Sales Tax	243.23
Payment/Credit Amount	0.00
Balance:	<u>3,486.23</u>

507 4-21-17

PIONEER WIRELINE SERVICES, LLC

1100A SMEDE ROAD
BROUSSARD, LA 70518
337-364-9391

DATE: 4-13-17	ENGINEER: M. Page
CONTRACT NO. 55127	CREW: F. Villa
PAGE 1 OF 1	CREW: I. Deavola
LOCATION: Liberal	UNIT: P118

The operations to be conducted, services to be rendered, and all personnel and equipment provided by Pioneer Wireline Services, LLC. are done so at the sole request of Customer and are offered according to Pioneer's General Terms and Conditions. Any modification to these Terms and Conditions shall not bind Pioneer unless accompanied in writing by an authorized corporate representative of Pioneer.

Customer acknowledges and accepts that at all times it has full control of the well, both surface and downhole, including all conditions related to wellbore environments, and has sole responsibility for all decisions regarding operations performed on the well. Customer also agrees that their authorized representative will direct all services being performed and accepts total control over activities.

When a radioactive source is utilized as part of a logging service, Customer accepts full responsibility for all radiation safety requirements for well logging. If a radioactive source becomes lost or lodged in the well, Customer shall meet the requirements of Section 39.15 of the NRC regulations, or equivalent requirements of an Agreement State. Those regulations are summarized in Pioneer's General Terms and Conditions, unless superseded by a Master Service Agreement.

Customer agrees that the services described and the prices listed below are binding as a negotiated agreement and subsequent payment for the services rendered will be according to the General Terms and Conditions.

TO BE PAID BY AMBERCROMBIE BY Tim Julian
(PRINT CORRECT NAME) (SIGNATURE OF CUSTOMER OR AUTHORIZED REPRESENTATIVE)

COMPANY AMBERCROMBIE Energy, LLC
BILL TO (IF OTHER THAN ABOVE) _____
ADDRESS _____
CITY _____ STATE _____ ZIP CODE _____
P.O.# _____ AFE# _____ CONTRACT # DW

WELL INFORMATION
WELL NAME Reed Bramlett 2-30 FIELD _____
COUNTY/PARISH Stanton STATE KS RIG _____ PRICING ZONE _____

RUN NO.	CODE	SERVICE DESCRIPTION	BOOK PRICE	FIELD AMOUNT
	11000	SERVICE CHARGE	2200 ⁰⁰	
	15071	setting service (Depth) 46 1590'	2400 ⁰⁰	
	15072	setting service (operation)	2400 ⁰⁰	
	15090	C.T.B.P 10K 3.50"	2220 ⁰⁰	
	17500	L.P 2" slick gun (Depth) 25' 590'	1500 ⁰⁰	
	1750Z	0-6000' 58' per shot + 20 shot min	1160 ⁰⁰	
	17500	L.P 2" slick gun (Depth) 25' 590'	1500 ⁰⁰	
	1750Z	0-6000' 58' per shot + 20 shot min	1160 ⁰⁰	
<u>Reed OL 4/13/17</u>				
Book Price Gross			<u>\$14,740⁰⁰</u>	
ENVIRONMENTAL CHARGE				

TOTAL TIME	OPER. TIME	FREE STAND BY	CHARGE TIME	ESTIMATED CHARGE ADDITIONAL CHARGES MAY APPLY <u>\$3243⁰⁰</u>
EQUIPMENT				
CREW				

THE SERVICE(S) AND/OR EQUIPMENT COVERED BY THIS SERVICE ORDER HAVE BEEN PERFORMED OR RECEIVED

Signature of Customer or Authorized Representative: [Signature] Signature of Pioneer Engineer: [Signature]