

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

KANSAS CORPORATION COMMISSION 1355595
 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.

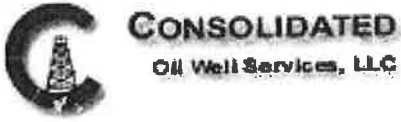
| Oil, Gas or Water Records | | Casing Record (Surface, Conductor & Production) | | | |
|---------------------------|---------|---|------|---------------|------------|
| Formation | Content | Casing | Size | Setting Depth | Pulled Out |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

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

Copy

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

Invoice Invoice# 810141

Invoice Date: 04/26/17 Terms: Net 30 Page 1

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



CARRITHERS 2

| 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 | 90.000 | 7.1500 | 30.000 | 450.45 |
| CE0710 | Cement Delivery Charge | 1.000 | 1,713.6000 | 30.000 | 1,199.52 |
| CC5829 | Lite-Weight Blend V (60:40:4) | 250.000 | 16.0000 | 30.000 | 2,800.00 |
| CC6080 | Cottonseed Hulls | 300.000 | 0.5000 | 30.000 | 105.00 |
| Subtotal | | | | | 7,457.10 |
| Discounted Amount | | | | | 2,237.13 |
| SubTotal After Discount | | | | | 5,219.97 |

Amount Due 7,768.35 If paid after 05/26/17

Tax: 217.88
 Total: 5,437.85

VENDOR NUMBER _____
 LOCATION NUMBER _____
 SELF CHARGE CODE _____ AL
 ORDER NUMBER _____
 1354050 _____
 CARRI2 _____
 CEMENT TO P&A WELL _____
 APPROVAL _____
 VERIFIED ACCURACY _____

SCT 5-1-17



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

8052
7646

TICKET NUMBER 51740
LOCATION Oakley, KS
FOREMAN Miles Sheer

**FIELD TICKET & TREATMENT REPORT
CEMENT**

Invoice # 810141 *US*

| DATE | CUSTOMER # | WELL NAME & NUMBER | SECTION | TOWNSHIP | RANGE | COUNTY |
|---|------------|--------------------|----------|-----------|---------|---------|
| 4-24-17 | 1112 | Carriethers 2 | 17 | 278 | 40N | Stanton |
| CUSTOMER | | | TRUCK # | DRIVER | TRUCK # | DRIVER |
| Abercrombie Energy 5510 Oil Center Road South Great Bend KS 67530 | | | 753 | Miles S | | |
| | | | 772-T-09 | Traavis W | | |

JOB TYPE DHP HOLE SIZE _____ HOLE DEPTH _____ CASING SIZE & WEIGHT 5 7/8"
 CASING DEPTH _____ DRILL PIPE _____ TUBING _____ OTHER Pipe 2330-2424
 SLURRY WEIGHT 13.8 SLURRY VOL 1.40 WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting and rig up on well mix 1855x 60/40 48' set down 120'
Casings displaced 12 blk water cement went on vacuum Port @ 370'
Mixed 455x down casing pressured to 500psi
Mixed 205x down 85/8

| ACCOUNT CODE | QUANTITY or UNITS | DESCRIPTION of SERVICES or PRODUCT | UNIT PRICE | TOTAL |
|--------------|-------------------|------------------------------------|-----------------|---------|
| CE0970 | 1 | PUMP CHARGE | 950.00 | 950.00 |
| CE0002 | 80 | MILEAGE | 7.15 | 643.50 |
| CE0710 | 10.88 tons | Ton M. Lessed delivery | 1.75 | 1713.60 |
| CCSP29 | 250 Sx | Site Washblend I 6040 per 469d | 16.00 | 4000.00 |
| CC6080 | 300 # | Cotton seedhulls | 1.50 | 150.00 |
| | | | Subtotal | 7457.10 |
| | | | 1 ps 300d | 2237.13 |
| | | | Subtotal | 5219.97 |
| | | | SALES TAX | 217.88 |
| | | | ESTIMATED TOTAL | 5437.85 |

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

MAY - 4 2017 Page: 1

INVOICE NUMBER: 1-55308
 INVOICE DATE: 4/24/2017
 CLIENT: ABERCR

| | |
|-----------|------------------|
| LEASE | |
| WELL # | Carrithers # 2 |
| COUNTY | Stanton |
| CLIENT PO | |
| DUE DATE | 5/24/2017 |
| ENGINEER | Nichols, Preston |

Sold To

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



| QUANTITY | DESCRIPTION | UNIT PRICE | EXTENSION |
|------------------------------|--|-----------------------------|-----------|
| 1.000 | Rig-up on Rig or Crane | 717.00 | 717.00 |
| 1.000 | Service Charge for Fast Mast Operation | 391.09 | 391.09 |
| 1.000 | Perforate Slick Low Press Depth | 488.86 | 488.86 |
| 1.000 | Perforate Slick Low Press 0-6000 | 378.05 | 378.05 |
| ----- LAST ITEM ----- | | | |
| <i>Perf. 2- holes @ 370'</i> | | | |
| VENDOR NUMBER | | _____ | |
| VENDOR NUMBER | | _____ | |
| VENDOR RECEIPT | | _____ <i>AK</i> | |
| VENDOR NUMBER | | _____ | |
| | | AMOUNT | |
| | | <i>1354050</i> | |
| | | <i>CARR12</i> | |
| | | <i>PERF TO P&A WELL</i> | |
| APPROVAL | | _____ <i>[Signature]</i> | |
| VERIFIED ACCURACY | | _____ | |

THANK YOU FOR YOUR BUSINESS

| | |
|-----------------------|-----------------|
| Subtotal | 1,975.00 |
| Freight | 0.00 |
| Sales Tax | 148.13 |
| Payment/Credit Amount | 0.00 |
| Balance: | <u>2,123.13</u> |

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.

SCF 5-1-17

PIONEER WIRELINE SERVICES, LLC

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

| | |
|--------------------|----------------------|
| DATE: 4-24-17 | ENGINEER: P. Nichols |
| CONTRACT NO. 55308 | CREW: J. Humiston |
| PAGE 1 OF 1 | CREW: |
| LOCATION: Lib | UNIT: P-65 |
| | CREW: |

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 accepted 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 _____ (PRINT CORRECT NAME) BY _____ (SIGNATURE OF CUSTOMER OR AUTHORIZED REPRESENTATIVE)

| |
|--|
| COMPANY: <u>Abercrombie</u> |
| BILL TO (IF OTHER THAN ABOVE): _____ |
| ADDRESS: _____ |
| CITY: _____ STATE: _____ ZIP CODE: _____ |
| P.O.#: _____ AFE#: _____ CONTRACT #: <u>04</u> |

| | | |
|------------------|--------------------------------|--------------------------|
| WELL INFORMATION | WELL NAME: <u>Carithers #2</u> | FIELD: <u>N/A</u> |
| | COUNTY/PARISH: <u>Stanton</u> | STATE: <u>Louisiana</u> |
| | RIG: <u>Must</u> | PRICING ZONE: <u>N/A</u> |

| RUN NO. | CODE | SERVICE DESCRIPTION | BOOK PRICE | FIELD AMOUNT |
|---------------------------------|-------|---------------------|------------|--------------|
| | 1000 | SERVICE CHARGE | 1ea. | 0200 |
| | 10002 | Must | 1ea. | 1200 |
| | 17500 | 3/4" Slick | Min | 1500 |
| | 17502 | 02.7gm Charges | 02 | 1160 |
| <p><i>How's Got 4/24/17</i></p> | | | | |
| <p><i>6000</i></p> | | | | |
| <p><i>1975</i></p> | | | | |

| | | | | |
|---|------------|------------|---------------|-------------|
| ENVIRONMENTAL CHARGE | | | | |
| | TOTAL TIME | OPER. TIME | FREE STAND BY | CHARGE TIME |
| EQUIPMENT | | | | |
| CREW | | | | |
| ESTIMATED CHARGE ADDITIONAL CHARGES MAY APPLY | | | | |

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

Signature of Customer or Authorized Representative: _____ Signature of Pioneer Engineer: P. Nichols