

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

KANSAS CORPORATION COMMISSION 1355608  
 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  
 QES Pressure Pumping LLC  
 Dept:970  
 P.O.Box 4346  
 Houston, TX 77210-4346

MAIN OFFICE

P.O.Box884  
 Chanute, KS 66720  
 620/431-9210, 1-800/467-8676  
 Fax 620/431-0012

Invoice

Invoice#

810280

Invoice Date: 05/19/17

Terms: Net 30

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VAL ENERGY

125 N. Market, Ste. 1110  
 WICHITA KS 67202  
 USA  
 316-263-6688

Bannon 1-27owwo

Tax: 105.34

Total: 2,948.17



8165 / 810280

TICKET NUMBER 52130  
LOCATION 180  
FOREMAN Jacob Storm

620-431-9210 or 800-467-8676

WELD TICKET & TREATMENT REPORT  
CEMENT

Invoice # 810280

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
5-13-17	8576	Bannon 1-270uvwo	27	30	4E	Couley
CUSTOMER Val Energy						
MAILING ADDRESS 125 N Market St Ste 110						
CITY Wichita		STATE KS	ZIP CODE 67202			
			TRUCK #	DRIVER	TRUCK #	DRIVER
			446 /	Jeremy mo		
			681 /	Jud		
			557 /	Jacob		

JOB TYPE Plug HOLE SIZE 7 7/8 HOLE DEPTH 3300 CASING SIZE & WEIGHT 8 5/8  
 CASING DEPTH 165 DRILL PIPE 4 1/2 TUBING OTHER  
 SLURRY WEIGHT 14.5 SLURRY VOL WATER gal/sk CEMENT LEFT in CASING Full  
 DISPLACEMENT DISPLACEMENT PSI 100 MIX PSI 200 RATE 3bpm

REMARKS: Baffly meeting, Run drill pipe to 1500ft mix 35 sks 60/40  
 4 1/2 gel 1 1/2 cc displaced with 20 bbl mud pull to 372 ft mix  
 35 sks 60/40 4 1/2 gel 1 1/2 cc displaced 3 bbl pull to 186 ft mix 40 sks  
 60/40 4 1/2 gel 1 1/2 cc displaced 1 bbl circulated cement to surface  
 plug Rathole with 35 sks 60/40 4 1/2 gel 1 1/2 cc mouse hole with  
 25 sks 60/40 per 4 1/2 gel 1 1/2 cc.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CE0450	1	PUMP CHARGE	1500.00	1500.00
CE0000	30	MILEAGE	7.15	214.50
CE0011	1	min bulk delivery	660.00	660.00
CE5829	170	60/40 4 1/2 gel	16.00	2720.00
CE5325	136	calcium chloride #49	1.25	170.00
			Subtotal	5264.50
			4490	2421.67
			total	2842.83
			SALES TAX	105.34
			ESTIMATED TOTAL	2948.17

AUTHORIZATION [Signature] TITLE 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.