

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

KANSAS CORPORATION COMMISSION 1364200
 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



TICKET
2058

1023 Reservation Road • Hays, Kansas 67601 • (785) 625-1182

Date 8-2-2017

Charge To: Excaliber Production Co. Inc.
 Address: _____
 Lease and Well No. Lowe 1002 Field Burton
 Nearest Town Haven County Reno State Kansas
 Customer's Order No. Verbal Sec. 16 Twp. 24 Range 46
 Zero 5' AGL Casing Size 5.5" Weight 15.5#
 Customer's T.D. _____ Gemini Wireline T.D. _____ Fluid Level 1950/1650
 Engineer A Dreiling Operator Chris D

Perforations				
Code Reference	From	To	Number Of Holes	Amount
400	3312	3313	2	900
400	3319	3323	2	900
H&C charge				750.00
3336	3304.2	3316.5	2.5	
5.0				
3341	330	3319		
Material Inventory				

Truck Rental					
Code Reference	Unit	File Name	Amount		
100	T-173		1500.00		
Services					
Code Reference	From	To	No. Feet	Price Per Ft.	Amount
305.1	0	3348	3348	ma	1500.00
501.1					
501.2	55"	(TRPC)	3341		1000.00
504					
305.1					
305.1		3311		3311	1000.00
					1000.00
305.2		3311			
					Bid 2800.00
Please Pay From This Invoice					Subtotal
					Tax
					TOTAL

Received the above service according to the terms and conditions specified below, which we have read and to which we hereby agree.

Customer [Signature]

General Terms and Conditions

- (1) All accounts are to be paid within the terms fixed by Gemini Wireline invoices and should these terms not be observed, interest at the rate of 1.5% per month will be charged from the date of such invoice. Interest, Attorney, Court, Filing and other fees will be added to accounts turned to collections.
- (2) Because of the uncertain conditions existing in a well which are beyond the control of Gemini Wireline, it is understood by the customer that Gemini Wireline, cannot guarantee the results of their services and will not be held responsible for personal or property damage in the performance of their services.
- (3) Should any of Gemini Wireline instruments be lost or damage in the performance of the operations requested the customer agrees to make every reasonable effort to recover same, and to reimburse Gemini Wireline, for the value of the items which cannot be recovered, or the cost of repairing damage to items recovered.
- (4) It is further understood and agreed that all depth measurements shall be supervised by the customer or its employees and customer hereby certifies that the zones, as shot were approved.
- (5) The customer certifies that it has the full right and authority to order such work on such well and that the well in which the work is to be done by Gemini Wireline is in proper and suitable conditions for the performance of said work.
- (6) No employee is authorized to alter the terms or conditions of this agreement.



TREATMENT REPORT

Acid Stage No. RT

Date 8-17-17 District Bucara F. O. No. _____
 Company Excalibur Field
 Well Name & No. Leone #2
 Location _____ Field _____
 County Leone State Pa
 Casing: Size 12 3/4 Type & Wt. _____ Set at _____ ft.
 Formation: _____ Perf. _____ to _____
 Formation: _____ Perf. _____ to _____
 Formation: _____ Perf. _____ to _____
 Liner: Size _____ Type & Wt. _____ Top at _____ ft. Bottom at _____ ft.
 Cemented: Yes/No _____ Perforated from _____ ft. to _____ ft.
 Tubing: Size & Wt. 2 7/8 Swung at 6028' ft.
 Perforated from _____ ft. to _____ ft.
 Open Hole Size _____ T. D. _____ ft. P. B. to _____ ft.

Type Treatment: Amt. _____ Type Fluid _____ Sand Size _____ Pounds of Sand _____
 Bkdown _____ Bbl. /Gal. _____
 _____ Bbl. /Gal. _____
 _____ Bbl. /Gal. _____
 _____ Bbl. /Gal. _____
 Flush _____ Bbl. /Gal. _____
 Treated from _____ ft. to _____ ft. No. ft. _____
 from _____ ft. to _____ ft. No. ft. _____
 from _____ ft. to _____ ft. No. ft. _____
 Actual Volume of Oil/Water to Load Hole: _____ (Bbl.) /Gal. _____
 Pump Trucks. No. Used: Std. 323 Sp. _____ Twin _____
 Auxiliary Equipment Bulk 322
 Packer: _____ Set at _____ ft.
 Auxiliary Tools _____
 Plugging or Sealing Materials: Type 60 sack Cem. 180 sack CO-40 2 3/8 Gal. _____ lb. _____

Company Representative _____ Treater John M

TIME a.m /p.m.	PRESSURES		Total Fluid Pumped	REMARKS
	Tubing	Casing		
8:00				On loc USA Rig up to plug well
:				Mix 4 bags Calcium Chloride in 9 Bbl's water
8:40			0	Run @ 6028' tie on start water
:			17 Bbl	Break pipe on 12 3/4
:			0	Start mixing acid down hole Cem. 1/4 50 cc mix in
:				150# Bulk Vinylidene
:			15 BBl	60 sack Hot plug acid. Wash up acid down hole
9:00			17 1/2	BBl's stop pump let cement fill back of way out.
:				Pull tubing
10:00				Run sand line to solid cement @ 500' down
:				Had soft cement on sand line let set 1 additional hour
:				Run tube in to 384' shut down the
11:00			2	Start mixing acid down hole 50 sack CO-40 2 3/8
:			40 BBl	Grand cement to surface
11:15			41 BBl	180 sack acid sterilize + cellar
:				Pull tube out wash up tools
11:35				Team down left loc.
:				Plug out 11:15

Add to Ticket 44954

8/9/17

Pump dry for ^{ply} cement.

23 sacks Class A Cem.

Check with dick about Bulk charges and miley
Cement 25' down from top of surface Rig up for Exhibitors
2" poly to bottom fill 12 3/4 to surface - 5 1/2 Bbls 23 sacks.

650^{sq}

293²⁵