

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

KANSAS CORPORATION COMMISSION 1364916
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

Form	CP4 - Well Plugging Record
Operator	K & N Petroleum, Inc.
Well Name	OGLE (LINSNER) 2-D
Doc ID	1364916

Producing Formations

Formation	Top	Bottom	Total Depth
Topeka	2852	2862	
Topeka	2960	2970	
Topeka	2992	3002	
Lansing	3217	3222	
Arbuckle	3396	3399	3399



FIELD :
ORDER N° C 45521

BOX 438 • HAYSVILLE, KANSAS 67060
316-524-1225

DATE 8-16 2017

IS AUTHORIZED BY: KYN Petroleum Inc
(NAME OF CUSTOMER)

Address _____ City _____ State _____

To Treat Well As Follows: Lease OGFC Well No. 2 Customer Order No. _____

Sec. Twp. Range _____ County BARTON State Ks.

CONDITIONS: As a part of the consideration hereof it is agreed that Copeland Acid Service is to service or treat at owners risk, the hereinbefore mentioned well and is not to be held liable for any damage that may accrue in connection with said service or treatment. Copeland Acid Service has made no representation, expressed or implied, and no representations have been relied on, as to what may be the results or effect of the servicing or treating said well. The consideration of said service or treatment is payable. There will be no discount allowed subsequent to such date. 6% interest will be charged after 60 days. Total charges are subject to correction by our invoicing department in accordance with latest published price schedules.

The undersigned represents himself to be duly authorized to sign this order for well owner or operator.

THIS ORDER MUST BE SIGNED BEFORE WORK IS COMMENCED

Well Owner or Operator

By

Agent

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
2	30gx	COMMON 3% CC	12.75	382.50
2	1sx	CALCIUM CHLORIDE	30.00	60.00
Top off well from PLUGGING				
		Bulk Charge		
		Bulk Truck Miles		
		Process License Fee on _____ Gallons	102	442.50
TOTAL BILLING				44.25
				399.25

I certify that the above material has been accepted and used; that the above service was performed in a good and workmanlike manner under the direction, supervision and control of the owner, operator or his agent, whose signature appears below.

Copeland Representative Duane Prozek

Station Gr. Bend, Ks.

Ed Nemnich
Well Owner, Operator or Agent

Remarks _____

NET 30 DAYS

FIELD WORK ORDER, INVOICE AND CONTRACT

1579



P.O. BOX 438
Haysville, KS 67060
(316) 524-1225 • FAX (316) 524-1027

Date <u>8-15-17</u>	Charge To: <u>K4N Petroleum, Inc.</u>	Lease and Well No. <u>Dyle #2</u>
Operator <u>Leibnitz</u>	Address	Field
Customer's T.D.	City & State	Legal Description <u>NW-SE-NE</u>
T.D.	Fluid Level	Casing Size <u>5 1/2"</u>
Zero	Type Fluid in Hole <u>Water/Oil</u>	Casing Wt.
	Elevation	Casing Depth
		Sec. <u>12</u> Twp. <u>17S</u> Rng. <u>13W</u>
		County <u>Barton</u>
		State <u>Kansas</u>

- The authorized agent and representative of the owner agrees to the following general terms and conditions of services to be rendered or which have been rendered:
- (1) All accounts are due and must be paid within 30 days from the date of services of Gressel Oil Field Service, Inc., and should these terms not be observed, interest at the rate of 18% per annum will be charged from the date of the services.
 - (2) Because of the uncertain conditions and hazards existing in a well which are beyond the control of Gressel Oil Field Service, Inc., it is understood and agreed by the parties hereto that Gressel Oil Field Service, Inc. cannot guarantee the results of its efforts and its services and will not be held responsible for personal or property damage in the performance of its services.
 - (3) Should any Gressel Oil Field Service, Inc. instruments or equipment be lost or damaged in the performance of the operations requested, the customer agrees to make every reasonable effort to recover the same, and to reimburse Gressel Oil Field Service, Inc. for the value of the items which cannot be recovered, or the cost of repairing damage to items recovered.
 - (4) The customer certifies that he has the full right and authority to order such work on such well and that the well in which the work is to be performed by Gressel Oil Field Service, Inc. is in proper and suitable condition for the performance of said work and that Gressel Oil Field Service, Inc. is merely working under the directions of the customer.
 - (5) The customer agrees to pay any and all taxes, fees and charges placed on services rendered by Gressel Oil Field Service, Inc. by governmental requirements including city, county, state and federal taxes and fees or reimburse Gressel Oil Field Service, Inc. for such taxes and fees paid to said agencies.
 - (6) No employee is authorized to alter the terms or conditions of this agreement between Gressel Oil Field Service, Inc. and the customer.
 - (7) I certify that the services have been performed by Gressel Oil Field Service, Inc. under my directions and control, and that all zones perforated were designated by me and all depth measurements were checked and approved.
 - (8) It is further stipulated and agreed to between the parties hereto that this agreement shall not become effective until the same is approved by Gressel Oil Field Service, Inc., in Harvey County, Kansas, and that the venue of any action, either in law or equity to enforce the terms of the same is agreed by the parties hereto to be in Harvey County, Kansas.

Dated in Burton, Kansas, this 15th day of August, 2017.

[Signature]
CUSTOMER
[Signature]
AUTHORIZED AGENT AND REPRESENTATIVE
GRESSEL OIL FIELD SERVICE, INC.
[Signature]
OFFICER

WORK PERFORMED	PRICING
Perforated With _____ as Follows:	SET UP: \$ <u>700.00</u>
From <u>275</u> ft. to <u>276</u> ft., <u>4</u> Shots	PERFORATING: 1st Shots \$ <u>250.00</u>
From <u>230</u> ft. to <u>231</u> ft., <u>4</u> Shots	Next Shots @ \$ _____ Ea. \$ <u>350.00</u>
From <u>1400</u> ft. to <u>1401</u> ft., <u>4</u> Shots	Next Shots @ \$ _____ Ea. \$ <u>350.00</u>
From _____ ft. to _____ ft., _____ Shots	LOGGING: Logging Chg. _____ ft. @ \$ _____ ft. \$ _____
From _____ ft. to _____ ft., _____ Shots	BRIDGE PLUG: Type _____ Depth _____ \$ _____
From _____ ft. to _____ ft., _____ Shots	CEMENT LOCATOR SURVEY: \$ _____
<u>Perforate at 275', 230' & 1400'</u>	
	SUB TOTAL \$ <u>2250.00</u>
	TAX \$ <u>Bid</u>
	TOTAL \$ <u>1450.00</u>