

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

KANSAS CORPORATION COMMISSION 1365749
 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



Invoice #61854

Invoice Date: 07/11/2017

P.O. DRAWER H
CHANUTE, KS 66720

(620) 431-9308

Bill To:

TRIMBLE & MACLASKEY OIL, LLC
BOX 171
GRIDLEY, KANSAS 66852

Date	Description	Hours/Qty	Amount
7/10/2017	SCHINDLER #3 GREENWOOD COUNTY, KANSAS PERFORATED TO PLUG WITH 2-1/8" STEEL SHOTS 2 SHOTS AT 850' 2 SHOTS AT 250'		500.00
7/10/2017	YOUNG #1 OLD GREENWOOD COUNTY, KANSAS PERFORATED TO PLUG WITH 2-1/8" STEEL SHOTS 2 SHOTS AT 850' 2 SHOTS AT 250'		500.00
7/10/2017	YOUNG #2 OLD GREENWOOD COUNTY, KANSAS PERFORATED TO PLUG WITH 2-1/8" STEEL SHOTS 2 SHOTS AT 850' 2 SHOTS AT 250'		500.00

THANK YOU. WE APPRECIATE YOUR BUSINESS!!

Total \$1,500.00

TERMS: All invoices are due in full 30 days after invoice date. A FINANCE CHARGE of 1-3/4% (21% per annum) will be assessed after 30 days.

Balance Due \$1,500.00

810 E 7TH
 PO Box 92
 EUREKA, KS 67045
 (620) 583-5561



Cement or Acid Field Report
 Ticket No. **3452**
 Foreman Rick Ledford
 Camp Eureka Ks

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State
8-2-17	1200	Schindler # 3	116	235	13E	GW	Ks
Customer	Trimble + MacLuskey Oil LLC		Safety Meeting	Unit #	Driver	Unit #	Driver
Mailing Address	P.O. Box 171		RL	102	Rick L.		
City	State	Zip Code	JH	112	Jason H.		
			SM	141	Steve M.		
			GM	125	Greg M.		
Gridley	Ks	66852					

Job Type P-7A Hole Depth _____ Slurry Vol. _____ Tubing 2 3/4"
 Casing Depth 1782' Hole Size _____ Slurry Wt. 14.8" Drill Pipe _____
 Casing Size & Wt. 5 1/2" Cement Left in Casing _____ Water Gall/SK 2.0 Other _____
 Displacement _____ Displacement PSI _____ Bump Plug to _____ BPM _____

Remarks: Safety meeting: Well perforated @ 254' - 250'
20 sks @ 1701'
Gel spacer
15 sks @ 862'
Gel spacer
95 sks @ 250' to surface
 "THANK YOU"

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C105	1	Pump Charge	750.00	750.00
C107	30	Mileage	3.95	118.50
C203	130 sks	60/40 Permox cement	12.75	1657.50
C206	450"	4% gel	.20	90.00
C206	300"	gel-spacer	.20	60.00
C214	40"	hulls	.45	18.00
C108A	5.6	tan mileage bulk tank	m/c	345.00
C113	3 hrs	80 Bbl VAC TRK	85.00	255.00
C224	3000 gals	city water	10.00/1000	30.00
<div style="border: 1px solid black; border-radius: 50%; padding: 10px; display: inline-block;"> 590 <178.68> # 3394.68 </div>				
			Subtotal	3324.00
			Sales Tax	249.30
Authorization by <u>Brian MacLuskey</u>	Title _____	Total	3573.30	

I agree to the payment terms and conditions of services provided on the back of this job ticket. Any amendments to payment terms must be in writing on the front of this job ticket or in the Customer's records at ELITE's office.

810 E 7TH
 PO Box 92
 EUREKA, KS 67045
 (620) 583-5561



Cement or Acid Field Report
 Ticket No. 3499
 Foreman Steve Meard
 Camp Eureka

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State	
8-29-17	1000	Schneider #7	15	23	13E	Greenwood	KS	
Customer <u>Trimble + Macloskey Oil LLC</u>			Safety Meeting		Unit #	Driver	Unit #	Driver
Mailing Address <u>P.O. Box 171</u>					102	Rick		
City <u>Gardley</u>					112	Alan		
State <u>KS</u>					141	Jason		
Zip Code <u>66852</u>								

Job Type PTA oldwell Hole Depth _____ Slurry Vol. _____ Tubing _____
 Casing Depth _____ Hole Size _____ Slurry Wt. _____ Drill Pipe _____
 Casing Size & Wt. 6" Cement Left in Casing _____ Water Gal/SK _____ Other _____
 Displacement _____ Displacement PSI _____ Bump Plug to _____ BPM _____

Remarks: Safety Meeting: Rig up to 2 3/4 Tubing. Break circulation w/ 55 bbls Freshwater. Mix 100 sks 60/40 Pozmix Cement w/ 4% Gel. Did not circulate cement to surface. Pullout tubing, let set next day.
8-30-17 Run tubing tag cement @ 124' fill w/ cement to surface = 32 SKs well stayed full of cement Job complete TRAC Down.
TOP of Schneider #3 w/ 30 SKs cement
THANKS

Code	Qty or Units	Description of Product or Services	Unit Price	Total
		Pump Charge No charge on location		
		Mileage		
C-203	132	SKs 60/40 Pozmix } Schneider #7	12.75	1683.00
C-206	450#	Gel = 4%	.20	90.00
C-203	30	SKs 60/40 Pozmix } Schneider #3	12.75	382.50
C-113	1	hr 80 Bbl VAC TRUCK	85.00	85.00
C-108A		Ton Mileage BULK TRUCK	MYC	345.00
<div style="border: 1px solid black; border-radius: 50%; padding: 10px; display: inline-block;"> 590 < 138.91 > \$2640.24 </div>				2,585.50
			Sales Tax	193.91
Authorization <u>by Jim</u> Title <u>COY REP</u>			Total	<u>2199.41</u>

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