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

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1368265

Form CP-4

March 2009

Type or Print on this Form

Form must be Signed

All blanks must be Filled

WELL PLUGGING RECORD K.A.R. 82-3-117

			API No. 1	15						
			Spot Des	Spot Description:						
Address 1:				Sec 7	Гwp S. R	East West				
Address 2:										
City:	State:	Zip:++		Feet from East / West Line of Section						
Contact Person:			Footages	Footages Calculated from Nearest Outside Section Corner:						
Phone: ()				□ NE □ NW □ SE □ SW						
Type of Well: (Check one)	Oil Well Gas Well	OG D&A Cathodic	County:							
Water Supply Well	Other:	SWD Permit #:	1	Lease Name: Well #: Date Well Completed: The plugging proposal was approved on: (Date the plugging proposal was approxed on (Date the plugging proposal was approxed on (Date the plugging proposal was approxed						
ENHR Permit #:	Gas St	orage Permit #:								
s ACO-1 filed? Yes	No If not, is we	Il log attached? Yes	I I							
Producing Formation(s): List	All (If needed attach anothe	er sheet)			(KCC Dist					
Depth	to Top: Bott	om: T.D								
Depth	to Top: Bott	om: T.D	""							
Depth	to Top: Bott	om:T.D		Completed						
Show depth and thickness of	f all water, oil and gas form	ations.								
Oil, Gas or Wate	er Records		Casing Record (Su	ing Record (Surface, Conductor & Production)						
Formation	Content	Casing	Size	Setting Depth	Pulled Out					
ement or other plugs were t	used, state the character o	f same depth placed from (bott	om), to (top) for ear	on plug set.						
00 0										
00 0										
Address 1:			Address 2:							
Address 1:			Address 2:							
Address 1:			Address 2: State:		Zip:					
Address 1: City:) Phone: ()	for Plugging Fees:		Address 2: State:		Zip:					

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.

(Print Name)



10244 NE Hwy. 61 P.O. Box 8613 Pratt, Kansas 67124 Phone 620-672-1201

FIELD SERVICE TICKET

22-23-5

1718 15255 A

	PRESSURE PUMPING & WIRELINE 23-23-5							DATE	TICKET NO				
DATE OF 8/28/2017 DISTRICT Presto, KS						NEW □ OLD PROD □ INJ □ WDW □ CUSTOMER ORDER NO.:							
CUSTOMER LD DCILLAG						LEASE SW9 Son OWWO WELL NO. SW							
ADDRESS						COUNTY Rend STATE KS							
CITY	STATE	SERVICE CREW Dagin, McCrow, Cobb											
AUTHORIZED B		JOB TYPE: 241/ PTA											
EQUIPMENT	EQUIPMENT# HRS EQUIPMENT# HRS EQU							TRUCK CAL	LED	PAT	19 AM /	ME	
19843	X							ARRIVED A	Г ЈОВ	8/2		100	
13/68	^		1					START OPE	RATION	8/25	A 8.4	30	
					-			FINISH OPE	RATION §	1/24	&	30	
								RELEASED		129	EM 2.	00	
	·							MILES FROM	M STATION TO	WELL	- 58		
CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered). The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP. SIGNED: SIGNED: WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)													
ITEM/PRICE REF. NO.			MATERIAL, EQUIPMENT	AND SER	VICES USE	D	UNIT	QUANTITY	UNIT PRIC	E	\$ AMOUN		
CP103		40 P					SK.	75	and the same of th		200	_	
CC 200		co-				ane	16	130			33		
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w e								(JW	1)	-1217	1	
SERVICE REPRESENTATIVE POINT FULL THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: Mark Davis By DC5co4										(

FIELD SERVICE ORDER NO.

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)



TREATMENT REPORT

Customer	0 0	M		Ŷ	TL	ease No.						Date						
Lage												Date	9-	25	17			
JW950h OWWO						300				Depth	oth County			State				
Type Job Z 41/ PTD										mation		1		Legal De	_egal Description			
		110																
PIPE DATA PERFORATIN					TING				USED			TREATMENT RESU						
21-18			Shots/F	t				id		7	RATE		PRESS		ISIP			
Depth	From			То						Max				5 Min.				
Volume	lume Volume 2, 7 From			То		Pa	d			Min				10 Min.				
Max Press	ax Press Max Press F		From	rom To				Frac			Avg				15 Min.			
Well Connecti	/ell Connection Annulus Vol.		From	rom To)					HHP Used			Annulus F		Pressure		
Plug Depth	Packer D		From		То			ısh			Gas Volu	me			Total Loa	d		
Customer Re	presentative	Dev	1. 2 Si	2014				n Manager Justa wes			Treater D		9rn Franklin		SING.			
Service Units			1981	1984	<i>'</i> 3	1990	3	73768								7.63		
Driver Names	Drin	1	Gran	mc G		Cobb	\neg	cobb										
Time	Casing Pressure	Ti	ubing essure		. Pum	ped		Rate				Service Log						
2:00pm									on Location Issleymeetins									
	5					- L				755K 60/40 802+4 % 601 13.78 ppg, 1.43 yeirs, 6,82 water								
									7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7									
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