

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

KANSAS CORPORATION COMMISSION 1370245  
 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**

GLOBAL OIL FIELD SERVICES, LLC

24 S. Lincoln  
 RUSSELL, KS 67665

# Invoice

Date	Invoice #
7/18/2017	3012

Bill To
BACH OIL PO BOX 723 ALMA, NE 68920

P.O. No.	Terms	Project
EILERS#B-5	Due on receipt	

Quantity	Description	Rate	Amount
180	COMMON	16.00	2,880.00
120	POZ	9.50	1,140.00
11	GEL	21.50	236.50
10	COTTON SEED HULLS	31.50	315.00
321	HANDLING	1.90	609.90
	BULK MILEAGE	642.00	642.00
1	TRI-PLEX PUMP CHARGE FOR PLUG	750.00	750.00
20	PUMP TRUCK MILEAGE	7.00	140.00
20	PICKUP FOR TRANSPORTATION OF GOODS TO JOB SITE	3.00	60.00
	DEDUCT 20% FROM TOTAL IF PAID WITHIN 15 DAYS OF INVOICE ROOKS CO	7.00%	0.00

Thank you for your business.

**Total** \$6,773.40

# GLOBAL OIL FIELD SERVICES, LLC

3012

REMIT TO 24 S. Lincoln  
Russell, KS 67665

SERVICE POINT Russell

DATE <u>7-13-17</u>	SEC. <u>22</u>	TWP. <u>10</u>	RANGE <u>18</u>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
LEASE <u>EILERS</u>	WELL # <u>B-5</u>	LOCATION <u>Hays N 75 AD CC</u>			COUNTY <u>ROOKS</u>	STATE <u>KANSAS</u>	

OLD OR NEW (CIRCLE ONE) 1 W 1/2 N INTO

CONTRACTOR Tools "Perty"  
 TYPE OF JOB Plug ABANDONED WELL  
 HOLE SIZE \_\_\_\_\_ T.D. \_\_\_\_\_  
 CASING SIZE 3.50 DEPTH \_\_\_\_\_  
 TUBING SIZE 2 7/16 DEPTH \_\_\_\_\_  
 DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_  
 TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_  
 PRES. MAX 1,000 # MINIMUM 300 #  
 MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_  
 CEMENT LEFT IN CSG. \_\_\_\_\_  
 PERFS \_\_\_\_\_  
 DISPLACEMENT \_\_\_\_\_  
 EQUIPMENT \_\_\_\_\_  
 PUMP TRUCK CEMENTER Heath  
 # 417 HELPER Jason  
 BULK TRUCK \_\_\_\_\_  
 # 422 DRIVER CHRIS  
 BULK TRUCK \_\_\_\_\_  
 # \_\_\_\_\_ DRIVER \_\_\_\_\_

OWNER (USED 300 SX)  
 CEMENT \_\_\_\_\_  
 AMOUNT ORDERED 300 SX @ 60 4 1/2 GAL  
500 # Hull's (USED ALL #)  
 COMMON \_\_\_\_\_ @ \_\_\_\_\_  
 POZMIX \_\_\_\_\_ @ \_\_\_\_\_  
 GEL \_\_\_\_\_ @ \_\_\_\_\_  
 CHLORIDE \_\_\_\_\_ @ \_\_\_\_\_  
 ASC \_\_\_\_\_ @ \_\_\_\_\_  
 \_\_\_\_\_ @ \_\_\_\_\_  
 \_\_\_\_\_ @ \_\_\_\_\_  
 \_\_\_\_\_ @ \_\_\_\_\_  
 HANDLING \_\_\_\_\_ @ \_\_\_\_\_  
 MILEAGE \_\_\_\_\_ @ \_\_\_\_\_  
 TOTAL \_\_\_\_\_

REMARKS:

2 7/16 TUBING @ 3315' SPOT 75 SX  
Cement w/ 200 # Hull's. SPOT 75 SX  
@ 2520 w/ 200 # Hull's. Pulled  
up to 1400' & CIRCULATED Cement  
TO SURFACE w/ 150 SX Cement  
100 # Hull's Pulled TUBING  
CAP-OFF w/ 20 SX. TUBING  
2 7/16 COND Not Pump INTO @ 500 #

CHARGE TO: JASON BACH/BACH OIL CO.  
 STREET \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

Global Oil Field Services, LLC  
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME \_\_\_\_\_  
 SIGNATURE Paul Pelland

SERVICE  
 DEPTH OF JOB \_\_\_\_\_  
 PUMP TRUCK CHARGE \_\_\_\_\_  
 EXTRA FOOTAGE \_\_\_\_\_ @ \_\_\_\_\_  
 MILEAGE \_\_\_\_\_ @ \_\_\_\_\_  
 MANIFOLD \_\_\_\_\_ @ \_\_\_\_\_  
 \_\_\_\_\_ @ \_\_\_\_\_  
 TOTAL \_\_\_\_\_

PLUG & FLOAT EQUIPMENT

\_\_\_\_\_ @ \_\_\_\_\_  
 \_\_\_\_\_ @ \_\_\_\_\_  
 \_\_\_\_\_ @ \_\_\_\_\_  
 \_\_\_\_\_ @ \_\_\_\_\_  
 TOTAL \_\_\_\_\_

SALES TAX (If Any) \_\_\_\_\_  
 TOTAL CHARGES \_\_\_\_\_  
 DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS