

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

KANSAS CORPORATION COMMISSION 1372075
 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



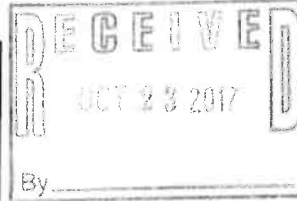
P. O. Box 466
 Ness City, KS 67560
 Off: 785-798-2300



Invoice

DATE	INVOICE #
10/19/2017	30956

BILL TO
Vess Oil Corporation 1700 Waterfront Parkway Building 500 Wichita, KS 67206



- Acidizing
- Cement
- Tool Rental

TERMS	Well No.	Lease	County	Contractor	Well Type	Well Category	Job Purpose	Operator
Net 30	#1	Doebbling	Ness	Husker Energy Ri...	Oil	workover	PTA	David K.

PRICE REF.	DESCRIPTION	QTY	UM	UNIT PRICE	AMOUNT
575W	Mileage - 1 Way	20	Miles	5.00	100.00T
576W-P	Pump Charge - PTA	1	Job	800.00	800.00T
328-4	60/40 Pozmix (4% Gel)	215	Sacks	10.25	2,203.75T
290	D-Air	4	Gallon(s)	42.00	168.00T
581W	Service Charge Cement	215	Sacks	1.50	322.50T
582W	Minimum Drayage Charge	1	Each	250.00	250.00T
	Subtotal				3,844.25
	Sales Tax Ness County			6.50%	249.88

We Appreciate Your Business!

Total \$4,094.13



TICKET 30956

PAGE 1 OF 1

CHARGE TO: Vess Oil Corp.
 ADDRESS:
 CITY, STATE, ZIP CODE:

SERVICE LOCATIONS
 1. Wess Oil 145 WELL PROJECT NO. #1 LEASE DecHilling COUNTY/PARISH Wess CITY Leavel STATE KS DATE 10-17-17 TOWNER Swinc
 2. TICKET TYPE SERVICE SALES CONTRACTOR Husker Energy Services RIG NAME/NO. #1 SHIPPED VIA CT DELIVERED TO Leavel ORDER NO.
 3. WELL TYPE Oil WELL CATEGORY Workover JOB PURPOSE PTA WELL PERMIT NO.
 4. REFERRAL LOCATION INVOICE INSTRUCTIONS

WELL LOCATION
Leavel-115 2. 1/4, 1/4, 3/4, 1/4, 3/4, 1/4, 3/4

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	LOC	ACCT	DF	DESCRIPTION	QTY.	UM	QTY.	UM	QTY.	UM	UNIT PRICE	AMOUNT
575		1			MILEAGE	20	mi.					5.00	100.00
576 P		1			Pump Charge - PTA	1	job					800.00	800.00
328.4		1			40/40 Pozmix (4% oil)	215	lbs					10.75	2203.75
290		1			D-Air	4	gal					42.00	168.00
581		1			Service Charge Cement	215	slk					1.50	322.50
582		1			Minimum Drayage Charge	1	per					250.00	250.00

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X Hunter Husker TIME SIGNED 1000 A.M. P.M.
 DATE SIGNED 10-14-17

REMIT PAYMENT TO:
 SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY
 OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?
 WE UNDERSTOOD AND MET YOUR NEEDS?
 OUR SERVICE WAS PERFORMED WITHOUT DELAY?
 WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?
 ARE YOU SATISFIED WITH OUR SERVICE?
 YES NO

PAGE TOTAL 3344
 TAX 249.88
 TOTAL 4094.13

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.
 SWIFT OPERATOR David Kuehn APPROVAL

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE 10-19-17	PAGE NO. 1
TICKET NO. # 30456	

CUSTOMER Dress Oil Corp.	WELL NO. d1	LEASE Drilling	JOB TYPE PTA
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CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0900							on location 2 7/8 x 5 1/2
								CIBP-4305 TB-1600
	0930	1/2	4		✓		300	mix 15 stg 60/40 Poz 4% down 8 3/8 * 300* Hold *
	0945	4	30		✓		∅	Pump 30 bbls water
	0950	4	50		✓		400	mix 190 stg 60/40 Poz 4% (w/c) circulate cement to surface @ 1600'
	0915							TOH
	0945	∅	2 1/2		✓		∅	Top off 5% w/*10 stg* * 215 stg total *
								wash up trucks
	1015							Job Complete

Thank You
Dave Pesteren Shane