

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

KANSAS CORPORATION COMMISSION 1373513
 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

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



Cement or Acid Field Report
 Ticket No. **3524**
 Foreman Steve Meul
 Camp EurekaKS

API 15-073-19668

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State	
9-29-17	1000	Lease # 2	26	24S	12E	Greenwood	KS	
Customer <u>Trumble & MacLusk</u>			Safety Meeting		Unit #	Driver	Unit #	Driver
Mailing Address <u>P.O. Box 171</u>					<u>102</u>	<u>Rick</u>		
City <u>Gardley</u>					<u>113</u>	<u>Tyson</u>		
State <u>KS</u>					<u>143</u>	<u>Alan</u>		
Zip Code <u>66853</u>								

Job Type PIA old well Hole Depth 1715 Slurry Vol. _____ Tubing _____
 Casing Depth 1701 Hole Size _____ Slurry Wt. _____ Drill Pipe _____
 Casing Size & Wt 5 1/2 Cement Left in Casing _____ Water Gal/SK _____ Other _____
 Displacement _____ Displacement PSI _____ Bump Plug to _____ BPM _____

Remarks Safety Meeting: Plug well as follow, Pump 250^{ft} Gel Flush ahead.
Spot 25 SKS AT 1680'
Spot 20 SKS AT 450
75 SKS 250 To Surface
Total 120 SKS 60/40 Pozmix Cement 4% Gel

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	120 SKS	60/40 Pozmix Cement	12.75	1530.00
C206	400*	Gel 4%	.20	80.00
C206	250*	Gel Flush	.20	50.00
C108A	3/16 ton	Ten Mule Bulk Truck	M/K	345.00
C113	3 hrs	80001 Use Truck	85.00	255.00
<div style="border: 1px solid black; border-radius: 50%; padding: 10px; display: inline-block;"> 690 < 1168.16 > # 319498 </div>				
			Sub Total	3128.50
			7.50% Sales Tax	234.64
Authorization Witness by <u>Brian</u> Title <u>Co. Rep</u>			Total	3363.14

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.

Invoice



Invoice #61913

Invoice Date: 09/25/2017

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
9/22/2017	LANE #2 GREENWOOD COUNTY, KANSAS PERFORATED TO PLUG WITH 2-1/8" STEEL SHOTS 2 SHOTS AT 450' 2 SHOTS AT 250'		500.00

SEP 28 2017

THANK YOU. WE APPRECIATE YOUR BUSINESS!!

Total \$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 \$500.00

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



Cement or Acid Field Report
 Ticket No. **3648**
 Foreman Steve Mead
 Camp Eureka

API 15-207-01499

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State	
11-9-17	1000	MYRILE Cork Key # 1-B	29	25S	14E	Woodson	KS	
Customer <u>Trimble & Macloskey Oil LLC</u>			Safety Meeting		Unit #	Driver	Unit #	Driver
Mailing Address <u>P.O. Box 171</u>					102	<u>Rick</u>		
City <u>Gridley</u>					110	<u>Jason</u>		
State <u>KS</u>					145	<u>Steve</u>		
Zip Code <u>66852</u>					125	<u>Greg</u>		

Job Type PTA oldwell Hole Depth 1450' Slurry Vol. _____ Tubing 2 3/8
 Casing Depth _____ Hole Size _____ Slurry Wt. _____ Drill Pipe _____
 Casing Size & Wt. 4 1/2 Cement Left in Casing _____ Water Gal/SK _____ Other _____
 Displacement _____ Displacement PSI _____ Bump Plug to _____ BPM _____

Remarks: Safety Meetings: Plug well as follow. Pump 300* Gel Spacer.
Spot 20 SKS AT 1386'
Spot 15 SKS AT 538'
60 SKS 250' to surface
Total 95 SKS 60/40 Pozmix Cement 4% Gel
Job complete Rig down.

Thank you

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C105	1	Pump Charge		
C107	25	Mileage	750.00	750.00
			3.95	98.75
C203	95 SKS	60/40 Pozmix Cement	12.75	1211.25
C206	325#	4% Gel	.20	65.00
C206	300*	Gel spacer	.30	60.00
C108	4.09 Ton	Ton Mileage bulk Truck	M/C	245.00
C113	2 hrs	Bobbi Vac Truck	85.00	255.00
C203		Johnson # 28 35 SKS 60/40 Pozmix Top	12.75	446.25
C203		Lane # 2 10 SKS 60/40 Pozmix OFF	12.75	127.50
<div style="border: 1px solid black; border-radius: 50%; padding: 10px; display: inline-block;"> 590 < 180.54 > \$3430.12 </div>				
			SubTotal	3358.75
			Sales Tax	251.91
Authorization <u>by Brian</u> Title <u>SO Rep</u>			Total	3610.66

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