

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

1375881

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

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.

(Print Name) ☐ Employee of Operator or ☐ Operator on above-described well,

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

Elite Cementing & Acidizing of KS, LLC
810 E 7th, PO Box 92
Eureka, KS 67045



| Date | Invoice # |
|------------|-----------|
| 11/30/2017 | 3636 |

| | |
|--|------|
| Bill To | |
| Nordmeyer, John JB Nordmeyer Oil 2253 P Road Eureka, KS 67045 | |
| Customer ID# | 1087 |

| | |
|-------------------|------------|
| Job Date | 11/29/2017 |
| Lease Information | |
| Olsen Anderson #3 | |
| County | Greenwood |
| Foreman | KM |

| Item | Description | Qty | Terms | Net 15 |
|--------|-----------------------------------|-----|--------|-----------|
| | | | Rate | Amount |
| C105 | Cement Pump-Plug (old well) | 1 | 750.00 | 750.00T |
| C107T | Pump Truck Mileage-taxable | 15 | 3.95 | 59.25T |
| C203 | Pozmix Cement 60/40 | 110 | 12.75 | 1,402.50T |
| C206 | Gel Bentonite | 380 | 0.20 | 76.00T |
| C206 | Gel Bentonite | 300 | 0.20 | 60.00T |
| C108AT | Ton Mileage (min. charge)-taxable | 1 | 345.00 | 345.00T |
| C113T | 80 Bbl Vac Truck | 3 | 85.00 | 255.00T |

We appreciate your business!

Subtotal \$2,947.75

Sales Tax (7.5%) \$221.08

Total \$3,168.83

Payments/Credits \$0.00

Balance Due \$3,168.83

| Phone # | Fax # | E-mail |
|--------------|--------------|-------------------------|
| 620-583-5561 | 620-583-5524 | rene@elitecementing.com |

Send payment to:
Elite Cementing & Acidizing of KS, LLC
PO Box 92
Eureka, KS 67045

Invoice



INVOICE #61966

INVOICE DATE: 11/28/2017

P.O. DRAWER H
CHANUTE, KS 66720

(620) 431-9308

BILL TO: JB NORDMEYER, LLC
2253 P ROAD
EUREKA, KS 67045

| Date | Description | Amount |
|------------|--|--------|
| 11/27/2017 | <p>OLSON-ANDERSON #3 GREENWOOD COUNTY, KANSAS</p> <p>PERFORATED TO PLUG WITH 2-1/8" STEEL SHOTS 2 SHOTS AT 1000' 2 SHOTS AT 200'</p> | 625.00 |
| 11/27/2017 | <p>OLSON-ANDERSON #7 GREENWOOD COUNTY, KANSAS</p> <p>PERFORATED TO PLUG WITH 2-1/8" STEEL SHOTS 2 SHOTS AT 1000' 2 SHOTS AT 200'</p> | 625.00 |

*pd 12-7-17
CKH
11/4*

THANK YOU. WE APPRECIATE YOUR BUSINESS!!

Total \$1,250.00

Balance Due \$1,250.00

Invoice



Invoice #61972

Invoice Date: 12/04/2017

P.O. DRAWER H
CHANUTE, KS 66720

Bill To:

JB NORDMEYER, LLC
2253 P ROAD
EUREKA, KS 67045

(620) 431-9308

| Date | Description | Hours/Qty | Amount |
|-----------|---|-----------|--------|
| 12/1/2017 | <p>ANDERSON-OLSON #28 GREENWOOD COUNTY, KANSAS</p> <p>PERFORATED TO PLUG WITH 2-1/8" STEEL SHOTS 2 SHOTS AT 1000' 2 SHOTS AT 200'</p> <p><i>Pl 12-7-17 CKH 1114</i></p> | | 625.00 |

THANK YOU. WE APPRECIATE YOUR BUSINESS!!

Total

\$625.00

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

\$625.00