

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

KANSAS CORPORATION COMMISSION 1376258
 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

Invoice

24 S. Lincoln
RUSSELL, KS 67665

Date	Invoice #
10/31/2017	3094

Bill To
BACH OIL PO BOX 723 ALMA, NE 68920

P.O. No.	Terms	Project
WARNER UNIT#4...	Due on receipt	

Quantity	Description	Rate	Amount
81	COMMON CEMENT	16.00	1,296.00
54	POZ	9.50	513.00
5	GEL	21.50	107.50
140	HANDLING	1.90	266.00
	BULK MILEAGE	504.00	504.00
1	TRI-PLEX PUMP CHARGE FOR PLUG	750.00	750.00
65	PUMP TRUCK MILEAGE	7.00	455.00
65	PICKUP FOR TRANSPORTATION OF GOODS TO JOB SITE	3.00	195.00
4	COTTON SEED HULLS	31.50	126.00
	20% DISCOUNT IF PAID WITHIN 15 DAYS OF INVOICE		
	DECATUR CO SALES TAX	7.50%	0.00
Thank you for your business.		Total	\$4,212.50

GLOBAL OIL FIELD SERVICES, LLC

309A

REMIT TO 24 S. Lincoln
Russell, KS 67665

SERVICE POINT: Russell, KS

DATE <u>10-26-17</u>	SEC. <u>11</u>	TWP. <u>1</u>	RANGE <u>27</u>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH <u>10/25/17</u>
LEASE <u>Warner unit</u>	WELL# <u>405</u>	LOCATION <u>Northern US west to 2700rd</u>			COUNTY <u>Dearborn</u>	STATE <u>KS</u>	
OLD OR NEW (CIRCLE ONE)			<u>At 7 1/4 miles west</u>				

CONTRACTOR CO Tools

TYPE OF JOB PTA

HOLE SIZE _____ T.D. _____

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS _____

DISPLACEMENT _____

OWNER _____

CEMENT AMOUNT ORDERED 1.35 x 60/40 4% gel

EQUIPMENT

PUMP TRUCK CEMENTER Heath

257 HELPER Wes

BULK TRUCK DRIVER Mark

410

BULK TRUCK DRIVER _____

COMMON @ _____

POZMIX @ _____

GEL @ _____

CHLORIDE @ _____

ASC @ _____

HANDLING @ _____

MILEAGE @ _____

TOTAL _____

REMARKS:

1060' pump 1105r and circulated to surface - came out at hole and top all with 20% - shall up to backside and mix up - prepared up to 200PS

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE @ _____

EXTRA FOOTAGE @ _____

MILEAGE @ _____

MANIFOLD @ _____

TOTAL _____

CHARGE TO: Back

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

200 #6 x 115 @ _____

_____ @ _____

_____ @ _____

TOTAL _____

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 is 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. Thank You!

PRINTED NAME Dale Perland

SIGNATURE Dale Perland

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS