

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
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



FIELD ORDER N° C 45022

P+A

BOX 438 • HAYSVILLE, KANSAS 67060
316-524-1225

DATE Jan 23 2018

IS AUTHORIZED BY: Bene Pat (NAME OF CUSTOMER)
 Address _____ City _____ State _____
 To Treat Well As Follows: Lease M Shannon Well No. 7 Customer Order No. _____
 Sec. Twp. Range _____ County Cowley State Ks

CONDITIONS: As a part of the consideration hereof it is agreed that Copeland Acid Service is to service or treat at owners risk, the hereinbefore mentioned well and is not to be held liable for any damage that may accrue in connection with said service or treatment. Copeland Acid Service has made no representation, expressed or implied, and no representations have been relied on, as to what may be the results or effect of the servicing or treating said well. The consideration of said service or treatment is payable. There will be no discount allowed subsequent to such date. 6% interest will be charged after 60 days. Total charges are subject to correction by our invoicing department in accordance with latest published price schedules.

The undersigned represents himself to be duly authorized to sign this order for well owner or operator.

THIS ORDER MUST BE SIGNED BEFORE WORK IS COMMENCED _____ By _____
 Well Owner or Operator Agent

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
	1	Pump chrg fee Plug Job		650 ⁰⁰
	50 sack	Class A Cem cement @ 12 ⁵⁰ /sack		637 ⁵⁰
	3 Bag	Calcium Chloride @ 30 ⁰⁰ /sack		90 ⁰⁰
	300 #	Hulls @ 40¢ / lb		80 ⁰⁰
	240 sack	60-40-4% Pz @ 11 ²⁵ /sack		2700 ⁰⁰
	8 mile	1 way mileage @ 4 ⁵⁰ /mile		364 ⁰⁰
	290 sack	Bulk Charge @ 12 ⁵⁰ /sack		362 ⁵⁰
	1174 ⁸¹	Bulk Truck Miles @ 1 ¹⁰ /100 miles		1292 ²⁷
Process License Fee on _____ Gallons				
TOTAL BILLING				

I certify that the above material has been accepted and used; that the above service was performed in a good and workmanlike manner under the direction, supervision and control of the owner, operator or his agent, whose signature appears below.

Copeland Representative [Signature]

Station Bureau

Well Owner, Operator or Agent

Remarks Plug out 4:15

NET 30 DAYS



TREATMENT REPORT

Acid Stage No. RT

Date Jan 23 2015 District Buckeye F. O. No. _____
 Company Bene Pet
 Well Name & No. M. Shannon # 17
 Location _____ Field _____
 County Cowley State Ks
 Casing: Size 6 5/8 Type & Wt. _____ Set at _____ ft.
 Formation: _____ Perf. _____ to _____
 Formation: _____ Perf. _____ to _____
 Formation: _____ Perf. _____ to _____
 Liner: Size _____ Type & Wt. _____ Top at _____ ft. Bottom at _____ ft.
 Cemented: Yes/No. Perforated from _____ ft. to _____ ft.
 Tubing: Size & Wt. _____ Swung at _____ ft.
 Perforated from _____ ft. to _____ ft.
 Open Hole Size _____ T.D. _____ ft. P.B. to _____ ft.

Type Treatment: Amt. _____ Type Fluid _____ Sand Size _____ Pounds of Sand _____
 Bkdwn _____ Bbl./Gal. _____
 _____ Bbl./Gal. _____
 _____ Bbl./Gal. _____
 _____ Bbl./Gal. _____
 Flush _____ Bbl./Gal. _____
 Treated from _____ ft. to _____ ft. No. ft. _____
 from _____ ft. to _____ ft. No. ft. _____
 from _____ ft. to _____ ft. No. ft. _____
 Actual Volume of Oil/Water to Load Hole: _____ Bbl./Gal. _____
 Pump Trucks. No. Used: Std. 323 Sp. _____ Twin _____
 Auxiliary Equipment Bulk 322 TT 131
 Packer: _____ Set at _____ ft.
 Auxiliary Tools _____
 Plugging or Sealing Materials: Type 50 sacs 240 60-40-4 1/2
200# Hulls Gal. _____ lb. _____

Company Representative _____ Treater Jay [Signature]

TIME a.m. / p.m.	PRESSURES		Total Fluid Pumped	REMARKS
	Tubing	Casing		
1:30				On loc TSA Rig up to use stuck Bulk truck in place. Mix Calcium nitrate for Hot Plug.
:			0	Tie on 2" tubing start mixing going down hole to pack slurry add 175# Hulls to 1st of Beach
2:15			12 Bbl.	50 sacs com hot away wash up going down hole
:			18 Bbl.	Knock off last ball out rest of day
:			0	Pull tubing out Leave 256' (8') for hole
:			17 Bbl.	Had 1/4" Hg count time Tie on tubing to load hole well loaded 3 Bbl.
3:30			18 Bbl.	have pipe up 10 3/4" + 6 5/8" stop pump
:			0	fluid started Start mixing going down hole
3:45			28 Bbl.	240 sacs avg 175# hulls added TSA has good slurry to surface grey water out of surface pull tubing out
:				Tie on 2 1/2" + start mixing going down hole
4:15			53 Bbl.	Have good slurry in collar is Amt cast in with 200#
4:20				Wash up keep down left located