

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

BASIC

energy services, L.P.

TREATMENT REPORT

Customer VINCENT OIL CORP.	Lease No.	Date 11-25-2017
Lease KEOUGH	Well # 9-34	
Field Order # 16098	Station PRATT, Ks.	Casing 8 5/8"
Type Job 8 5/8" S.P.	Depth 650'	County FORD
	Formation	State Ks
		Legal Description 34-28-23W

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size 8 5/8" x 23"	Tubing Size	Shots/Ft	CMT	Acid	150sx ACON	RATE	PRESS	ISIP
Depth 647.50'	Depth	From	To	From	To	Max		5 Min.
Volume 41.4 BBL	Volume	From	To	From	To	Min		10 Min.
Max Press	Max Press	From	To	From	To	Avg		-15 Min.
Well Connection	Annulus Vol.	From	To			HHP Used		Annulus Pressure
Plug Depth	Packer Depth	From	To	Flush	38.7 BBL	Gas Volume		Total Load

Customer Representative A. GREGORY	Station Manager J. WESTERMAN	Treater K. LESLEY
Service Units 78809 24780 20920 11903 73768		
Driver Names KEOUGH McBRIDE DILLON		

Time	Casing Pressure	Tubing Pressure	Bbbs. Pumped	Rate	Service Log
1:00 AM					ON LOCATION - SAFETY MEETING
1:30 AM					RUN 15 JTS. 8 5/8" x 23" CSG.
					SJ - 42.17' BAFFLE @ 6L5'
10:30 AM					(SG ON BOTTOM)
10:55 AM	300		10	6	H2O AHEAD
11:00 AM	300		166	6	MIX 150 SKS HP/IN @ 12 PPG
11:13 AM	250		35	6	MIX 150 SKS HP/IN/PLZ @ 14.4 PPG
11:19 AM					SHOT DOWN - DROP TR. PLUG
11:28 AM	0		0	6	START DISPLACEMENT
11:30 AM	500		30	4	SLOW RATE
11:30 AM	750		38.7	3	PLUG DOWN - PLUSE IN @ HEAD
					CIRC. THRU JOB
					CIRC. TO PHL TO PIT
					JOB COMPLETE
					1 HANDS -
					KEVIN LESLEY



PAGE	CUST NO	YARD #	INVOICE DATE
1 of 1	1004433	1718	11/30/2017
INVOICE NUMBER			
92580824			

Pratt (620) 672-1201
 B VINCENT OIL CORPORATION
 1 200 WEST DOUGLAS STE 725
 L WICHITA
 L KS US 67202
 T
 O ATTN: BRYAN HILLS

J LEASE NAME Keough 9-34
 O LOCATION
 B COUNTY Ford
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 T JOB CONTACT
 E

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
41072690	20920		Net - 30 days	12/30/2017

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<i>For Service Dates: 11/25/2017 to 11/25/2017</i>				
0041072690				
171816098A Cement-New Well Casing/Pi 11/25/2017 Cement Surface				
A-Con' Blend	150.00	EA	10.26	1,539.00 T
60/40 POZ	150.00	EA	6.84	1,026.00 T
Calcium Chloride	810.00	EA	0.60	484.78 T
Celloflake	76.00	EA	2.11	160.28 T
"Top Rubber Cmt Plug, 8 5/8""	1.00	EA	128.25	128.25
"Baffle Plate Alum., 8 5/8"" (Blue)"	1.00	EA	96.90	96.90
"Unit Mileage Chg (PU, cars one way)"	60.00	MI	2.57	153.90
Heavy Equipment Mileage	120.00	MI	4.28	513.00
Proppant & Bulk Del. Chgs., per ton mil	810.00	EA	1.43	1,154.25
Blending & Mixing Service Charge	300.00	BAG	0.80	239.40
Plug Container Util. Chg.	1.00	EA	142.50	142.50
Depth Charge; 501'-1000'	1.00	EA	684.00	684.00
"Service Supervisor, first 8 hrs on loc.	1.00	EA	99.76	99.76

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	6,422.02
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	245.57
PO BOX 841903	801 CHERRY ST, STE 2100	INVOICE TOTAL	6,667.59
DALLAS, TX 75284-1903	FORT WORTH, TX 76102		

QUALITY WELL SERVICE, INC.

6768

Federal Tax I.D. # 481187368

Home Office 30060 N. Hwy 281, Pratt, KS 67124

Mailing Address P.O. Box 468

Office 620-727-3410

Fax 620-672-3663

Rich's Cell 620-727-3409

Brady's Cell 620-727-6964

Date <u>12-5-17</u>	Sec. <u>34</u>	Twp. <u>28</u>	Range <u>23</u>	County <u>Ford</u>	State <u>Ks</u>	On Location <u>6:30 pm</u>	Finish <u>9:00 pm</u>
Lease <u>Keough</u>		Well No. <u>9-34</u>		Location			
Contractor <u>Duke 1</u>				Owner			
Type Job <u>Rotary PTA</u>				To Quality Well Service, Inc.			
Hole Size <u>7 7/8</u>				You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.			
Csg. <u>4.5 Drill Pipe</u>				Charge To <u>Vincent</u>			
Tbg. Size				Street			
Tool				City			
Cement Left in Csg.				State			
Meas Line				The above was done to satisfaction and supervision of owner agent or contractor.			
EQUIPMENT				Cement Amount Ordered <u>170sx 60/40 4 1/2 Gel</u>			
Pumptrk <u>8</u> No.	<u>Duck</u>			<u>44 C.F.</u>			
Bulktrk <u>10</u> No.	<u>Blk</u>			Common <u>105</u>			
Bulktrk No.				Poz. Mix <u>65</u>			
Pickup No.				Gel. <u>6</u>			
JOB SERVICES & REMARKS				Calcium			
Rat Hole <u>3000</u>				Hulls			
Mouse Hole <u>2000</u>				Salt			
Centralizers				Flowseal <u>42.50</u>			
Baskets				Kol-Seal			
DN or Port Collar				Mud CLR 48			
<u>1st Pumped 50sx 60/40 4% Gel @ 1610'</u>				CFL-117 or CD110 CAF 38			
<u>2nd Pumped 50sx 60/40 4% Gel @ 660'</u>				Sand			
<u>3rd Pumped 20sx 60/40 4% Gel @ 60' to surface</u>				Handling <u>176</u>			
<u>4th Plugged Rat + Mouse hole with 50sx 60/40 4% Gel</u>				Mileage <u>50</u>			
				FLOAT EQUIPMENT			
				Guide Shoe			
				Centralizer			
				Baskets			
				AFU Inserts			
				Float Shoe			
				Latch Down			
				<u>1000 SD</u>			
				<u>Service supervisor</u>			
				Pumptrk Charge <u>Rotary Plug</u>			
				Mileage <u>50x2</u>			
				Tax			
				Discount			
				Total Charge			
X Signature <u>[Signature]</u>							