

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.

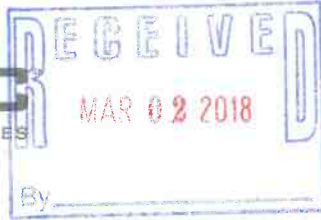
Oil, Gas or Water Records		Casing Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size	Setting Depth	Pulled Out

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



PAGE	CUST NO	YARD #	INVOICE DATE
1 of 1	1004542	1718	02/27/2018
INVOICE NUMBER			
92646116			

Pratt (620) 672-1201
 B VESS OIL CORPORATION
 I 1700 WATERFRONT PKWY BLDG 500
 L WICHITA
 L KS US 67206
 T
 O ATTN: ACCOUNTS PAYABLE

J LEASE NAME Thrasher V #1
 O LOCATION
 B COUNTY Logan
 S STATE KS
 I JOB DESCRIPTION Cement-Casing Seat-Prod W
 T JOB CONTACT
 E

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
41090260	86779		Net - 30 days	03/29/2018

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<i>For Service Dates: 02/23/2018 to 02/23/2018</i>				
0041090260				
171816186A Cement-Casing Seat-Prod W 02/23/2018 Cement/PTA				
60/40 POZ	340.00	EA	6.84	2,325.60 T
Cement Gel	586.00	EA	0.14	83.50 T
Celloflake	86.00	EA	2.11	181.37 T
Cotton Seed Hulls	550.00	EA	0.43	235.12 T
"Unit Mileage Chg (PU, cars one way)"	100.00	MI	2.57	256.50 T
Heavy Equipment Mileage	200.00	MI	4.28	855.00 T
Proppant & Bulk Del. Chgs., per ton mil	1,465.00	EA	1.42	2,087.62 T
Depth Charge; 4001'-5000'	1.00	EA	1,436.40	1,436.40 T
Blending & Mixing Service Charge	340.00	BAG	0.80	271.32 T
"Service Supervisor, first 8 hrs on loc.	1.00	EA	99.77	99.77 T

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	7,832.20
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	626.58
PO BOX 841903	801 CHERRY ST, STE 2100	INVOICE TOTAL	8,458.78
DALLAS, TX 75284-1903	FORT WORTH, TX 76102		

Customer <i>Vess Oil Corp.</i>	Lease No.	Date <i>2/23/2018</i>	
Lease <i>Thresher V</i>	Well # <i>1</i>		
Field Order # <i>16186</i>	Station <i>Prsttike</i>	Casing <i>2 5/8</i>	Depth <i>4260</i>
Type Job <i>241/PTA</i>	Formation	County <i>Logan</i>	State <i>KS</i>
		Legal Description <i>1-11s-340</i>	

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP	
Depth	Depth <i>4660</i>	From	To	Pre Pad	Max		5 Min.	
Volume	Volume <i>18.0</i>	From	To	Pad	Min		10 Min.	
Max Press	Max Press	From	To	Frac	Avg		15 Min.	
Well Connection	Annulus Vol.	From	To		HHP Used		Annulus Pressure	
Plug Depth	Packer Depth	From	To	Flush <i>water</i>	Gas Volume		Total Load	

Customer Representative <i>Hunter</i>	Station Manager <i>Justin Westerman</i>	Treater <i>Darin Franklin</i>
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Service Units	<i>92911</i>	<i>78982</i>	<i>86779</i>	<i>70959</i>	<i>19862</i>				
Driver Names	<i>Darin</i>	<i>Scott</i>	<i>Scott</i>	<i>Hanson</i>	<i>Hanson</i>				

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>9:00pm</i>					<i>on location / setup machines</i>
					<i>340 SK 60/40 pad, 4% Gel, 1/2# Cellulose</i>
					<i>13.78pps, 1.43 vol, 6.92 water</i>
					<i>4660' - 100SK</i>
<i>9:30pm</i>		<i>50</i>	<i>10</i>	<i>4</i>	<i>Establish 9 blw on casing</i>
		<i>50</i>	<i>24</i>	<i>4</i>	<i>mix 105SK Cement with 400# Hulls</i>
		<i>50</i>	<i>10</i>	<i>4</i>	<i>Displace 10 bbls water</i>
					<i>2900' - 100SK</i>
		<i>50</i>	<i>24</i>	<i>4</i>	<i>mix 105SK Cement with 150# Hulls</i>
		<i>50</i>	<i>4 1/2</i>	<i>4</i>	<i>Displace 4 1/2 bbls water</i>
					<i>1450'</i>
		<i>50</i>	<i>31</i>	<i>4</i>	<i>Circulate to surface - 120SK</i>
	<i>0</i>		<i>4</i>	<i>2</i>	<i>TOP OFF casing</i>
	<i>300</i>		<i>4</i>	<i>2</i>	<i>Plug 8 5/8</i>
<i>12:13pm</i>					<i>Job complete / Darin & crew</i>
					<i>Thank you!!!</i>