

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.

(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

SUNFLOWER WELL SERVICE, INC.

P.O. BOX 341

CANTON, KS 67428-0341

PH. (620) 628-4723

FAX (620) 628-7911

INVOICE

TO: Trek AEC, LLC
4925 Greenville Ave., Ste 915
Dallas, TX 75206

INVOICE	INVOICE NUMBER	LEASE NAME	
04-25-18	3541	Scully 34-4	
DATE	DESCRIPTION	UNIT PRICE	TOT INV
04/17/18	MOVED TO LOCATION: Rigged up, Singled out 68 7/8" rods, Shut down.		
	Rig & Crew 2 hrs	\$205 per hr	\$ 410.00
04/18/18	Singled out 30 3/4" rods and 17 1" rods, Pulled metal valves and standing valve, Pulled tubing slips, Unset tubing anchor, Pulled 91 joints of tubing, 10' barrel and 10' mud anchor, Ran dump bailer and got T.D. at 2930', Sanded back to 2900', Dug surface head out, Cut surface to get casing slip out, No stretch on casing, Shut down.		
	Rig & Crew 10 hrs	\$205 per hr	\$2,050.00

THANK YOU FOR YOUR BUSINESS!!!

SubTotal	\$2,460.00
Sales Tax 8.00%	196.80
TOTAL	\$2,656.80

TERMS: NET 30 1.5% WILL BE ADDED AFTER 30 DAYS FROM
DATE OF INVOICE. PLEASE PAY FROM THIS INVOICE.

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INVOICE

TO: Trek AEC, LLC
4925 Greenville Ave., Ste 915
Dallas, TX 75206

INVOICE	INVOICE NUMBER	LEASE NAME
04-25-18	3542	Scully 34-4
DATE	DESCRIPTION	TOT INV
04/19/18	Ran 250' of tubing in casing and 150' of 1" down surface, Rigged up cement trucks, Tied on to tubing, Broke circulation, Cemented to surface, Pulled tubing, Tied on to 1", Broke circulation and cemented to surface, Pulled 1" pipe, Washed up, Rigged down.	
	Rig & Crew 4 hrs	\$820.00
	Sand and cement for bottom plug	\$ 80.00
	Cutting equipment to cur surface and casing	\$ 80.00

THANK YOU FOR YOUR BUSINESS!!!

SubTotal	\$ 980.00
Sales Tax 8.00%	78.40
TOTAL	\$1,058.40

TERMS: NET 30 1.5% WILL BE ADDED AFTER 30 DAYS FROM
DATE OF INVOICE. PLEASE PAY FROM THIS INVOICE.

