

**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.

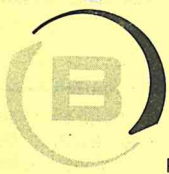
**Submitted Electronically**

Form	CP4 - Well Plugging Record
Operator	Stelbar Oil Corporation, Inc.
Well Name	MCKEAN TRUST 1-30-1831
Doc ID	1412116

Producing Formations

Formation	Top	Bottom	Total Depth
Mississippi	4619	4623	5070
Marmaton	4388	4392	5070
Marmaton	4325	4327	5070
Krider	2783	2791	5070





**BASIC**<sup>SM</sup>  
ENERGY SERVICES  
PRESSURE PUMPING & WIRELINE

10244 NE Hwy. 61  
P.O. Box 8613  
Pratt, Kansas 67124  
Phone 620-672-1201

FIELD SERVICE TICKET  
1718 <sup>0041113375</sup> 16788 A

T.M.H.  
20

DATE \_\_\_\_\_ TICKET NO. \_\_\_\_\_

DATE OF JOB <u>6-7-18</u> DISTRICT <u>Pratt</u>				NEW WELL <input type="checkbox"/> OLD WELL <input type="checkbox"/> PROD <input type="checkbox"/> INJ <input type="checkbox"/> WDW <input type="checkbox"/> CUSTOMER ORDER NO.:						
CUSTOMER <u>Stalbar Oil Corp</u>				LEASE <u>McKean Trust</u> WELL NO. <u>1</u>						
ADDRESS				COUNTY <u>SCOTT</u> STATE <u>Ks</u>						
CITY				SERVICE CREW <u>MATTAI HANSON GRAY</u>						
AUTHORIZED BY				JOB TYPE: <u>2-42 plug to abandon</u>						
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
<u>27467</u>	<u>.5</u>						<u>6-5</u>			<u>3:20</u>
						ARRIVED AT JOB	<u>6-7</u>			<u>11:00</u>
<u>19966</u>	<u>.5</u>					START OPERATION				<u>10:30</u>
						FINISH OPERATION				<u>11:55</u>
						RELEASED				<u>12:30</u>
						MILES FROM STATION TO WELL				<u>100</u>

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP.

SIGNED: [Signature]  
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
<u>CP103</u>	<u>60/40 P02</u>	<u>sq</u>	<u>300</u>		<u>3,600 00</u>
<u>CC200</u>	<u>CMT 901</u>	<u>lb</u>	<u>516</u>		<u>129 00</u>
<u>C2410</u>	<u>COTTON SEED HULLS</u>	<u>lb</u>	<u>200</u>		<u>150 00</u>
<u>0100</u>	<u>P.U. MILK</u>	<u>mi</u>	<u>100</u>		<u>750 00</u>
<u>e101</u>	<u>heavy eq milk</u>	<u>mi</u>	<u>100</u>	<u>750</u>	<u>3,225 00</u>
<u>e113</u>	<u>PIPE LINE DEL</u>	<u>mi</u>	<u>1290</u>	<u>3,225 00</u>	<u>1,800 00</u>
<u>CC203</u>	<u>DEPTH charge 2001-3000'</u>	<u>4hr</u>	<u>1</u>	<u>1,800 00</u>	<u>1,800 00</u>
<u>CC240</u>	<u>blend + mix</u>	<u>sq</u>	<u>300</u>		<u>420 00</u>
<u>5003</u>	<u>SUP. VLV</u>	<u>ea</u>	<u>1</u>		<u>175 00</u>

CHEMICAL / ACID DATA:			

SUB TOTAL		<u>10,249 00</u>
SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		<u>5,841 93</u>

SERVICE REPRESENTATIVE <u>Mike Mattai</u>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <u>[Signature]</u>
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(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO. \_\_\_\_\_



**BASIC<sup>SM</sup>**  
**ENERGY SERVICES**  
 PRESSURE PUMPING & WIRELINE

10244 NE Hwy. 61  
 P.O. Box 8613  
 Pratt, Kansas 67124  
 Phone 620-672-1201

**FIELD SERVICE TICKET**  
 1718 16788 A

DATE \_\_\_\_\_ TICKET NO. \_\_\_\_\_

DATE OF JOB		DISTRICT		NEW WELL <input type="checkbox"/> OLD WELL <input type="checkbox"/> PROD <input type="checkbox"/> INJ <input type="checkbox"/> WDW <input type="checkbox"/> CUSTOMER ORDER NO.:			
CUSTOMER				LEASE		WELL NO.:	
ADDRESS				COUNTY		STATE	
CITY		STATE		SERVICE CREW			
AUTHORIZED BY				JOB TYPE: 41			
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE AM PM TIME
						ARRIVED AT JOB	AM PM
						START OPERATION	AM PM
						FINISH OPERATION	AM PM
						RELEASED	AM PM
						MILES FROM STATION TO WELL	

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

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SIGNED: \_\_\_\_\_  
 (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
					3,600.00
					129.00
					150.00
					750.00
				750.00	3,225.00
				1800.00	6.00
					420.00
					10,249.00

SUB TOTAL 10,249.00

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		

SERVICE REPRESENTATIVE	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY:
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(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.