

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

810 E 7TH
 PO Box 92
 EUREKA, KS 67045
 (620) 583-5561



Cement or Acid Field Report
 Ticket No. **4037**
 Foreman Rick Leaford
 Camp Eureka Ks

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State	
7-17-18		Ward #5	36	24S	12E	GW	Ks	
Customer	Mailing Address	City	State	Zip Code	Unit #	Driver	Unit #	Driver
Tremble + Maclosky Oil LLC	P.O. Box 171	Gridley	Ks	66852	102	Jason H.		
					114	Rick L.		
					144	Russ M.		

Job Type R7A old well Hole Depth _____ Slurry Vol. _____ Tubing 2 3/8"
 Casing Depth _____ Hole Size _____ Slurry Wt. 14# Drill Pipe _____
 Casing Size & Wt. 4 1/2" Cement Left in Casing _____ Water Gal/SK 7.0 Other _____
 Displacement _____ Displacement PSI _____ Bump Plug to _____ BPM _____

Remarks: Safety meeting - Rig up to 2 3/8" tubing. Plugging orders as follows:
15 SKS w/ hulls @ 1685'
gel-spacers w/ hulls
10 SKS @ 1600'
70 SKS @ 155' to surface
 " Thank You "

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C105	1	Pump Charge	750.00	750.00
C107	20	Mileage	3.95	79.00
C203	95 SKS	60/40 Permox cement	12.75	1211.25
C206	325#	4% gel	.20	65.00
C206	250#	gel-spacers	.20	50.00
C214	45#	hulls	.45	20.25
C203	40 SKS	60/40 Permox cement	12.75	510.00
C206	135#	4% gel	.20	27.00
C108	5.8	ten mileage bulk tax	m/L	345.00
C113	4 hrs	80 Bbl UAC. TRK	85.00	340.00
C224	3300 gals	city water	10.00/1000	33.00
			Subtotal	3430.50
			590 Disc	< 184.39
			Sales Tax	231.29
				3508.40

Authorization by Brian Maclosky Title _____ Total 3508.40

I agree to the payment terms and conditions of services provided on the back of this job ticket. Any amendments to payment terms must be in writing on the front of this job ticket or in the Customer's records at ELITE's office.

Invoice



Invoice #62109

Invoice Date: 05/14/2018

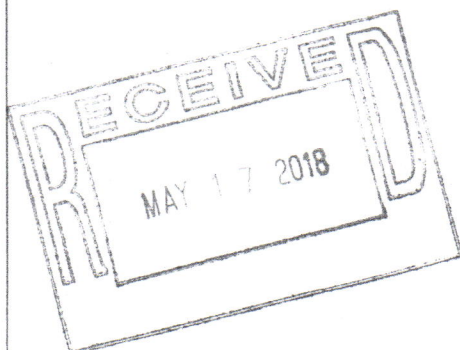
P.O. DRAWER H
CHANUTE, KS 66720

(620) 431-9308

Bill To:

TRIMBLE & MACLASKEY OIL, LLC
BOX 171
GRIDLEY, KANSAS 66852

Date	Description	Hours/Qty	Amount
5/9/2018	ERRETT #7M GREENWOOD COUNTY, KANSAS PERFORATED TO PLUG WITH 2-1/8" STEEL SHOTS 2 SHOTS AT 850' 2 SHOTS AT 250'		500.00
5/9/2018	LOVETT #1 OLD GREENWOOD COUNTY, KANSAS PERFORATED TO PLUG WITH 2-1/8" STEEL SHOTS 2 SHOTS AT 850' 2 SHOTS AT 250'		500.00
5/9/2018	WARD #5 GREENWOOD COUNTY, KANSAS PERFORATED TO PLUG WITH 2-1/8" STEEL SHOTS 2 SHOTS AT 600' 2 SHOTS AT 250'		500.00
Total			\$1,500.00
Balance Due			\$1,500.00



THANK YOU. WE APPRECIATE YOUR BUSINESS!!

QB

