KOLAR Document ID: 1419417

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 #:			,	API No.	15	
Name:				Spot De	scription:	
Address 1:			.		Sec Tw	p S. R East West
Address 2:					Feet from	
City:	State:	Zip: +	.		Feet from	East / West Line of Section
Contact Person:				Footage	s Calculated from Neares	st Outside Section Corner:
Phone: ()					NE NW	SE SW
Type of Well: (Check one)		OG D&A Cathodi		,		
ENHR Permit #:	Gas Sto	rage Permit #:				
Is ACO-1 filed? Yes	No If not, is well	log attached? Yes				ved on: (Date)
Producing Formation(s): List A	II (If needed attach another	sheet)		by:		(KCC District Agent's Name)
Depth to	Top: Botto	m: T.D		Plugging	a Commenced	
Depth to	•	m: T.D		00 0		
Depth to	Top: Botto	m:T.D			y	
Show depth and thickness of a	all water, oil and gas forma	ations.				
Oil, Gas or Water	Records		Casing Re	cord (Su	ırface, Conductor & Produc	tion)
Formation	Content	Casing	Size		Setting Depth	Pulled Out
Describe in detail the manner cement or other plugs were us		_				Is used in introducing it into the hole. If
Plugging Contractor License #	:		Name:			
Address 1:			Address 2:	:		
City:			;	State:		Zip:+
Phone: ()						
Name of Party Responsible for	r Plugging Fees:					
State of	County, _			, SS.		
	,				imployed of Operator or	Operator on above-described well,
	(Print Name)			E	improyee or 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.

SUNFLOWER WELL SERVICE, INC.

P.O. BOX 341

CANTON, KS 67428-0341

PH. (620) 628-4723

FAX (620) 628-7911

	Buf	Jalo GP Schnoeder	10050
INVOICE	Ed.	Schnoeder	
P O BO	N OPERATOR		
INVOICE	/ INVOICE NUMBER	LEASE	NAME)
07-11-18	3624	Ed Sci	hroeder #1
DATE	DESCRIPTION	UNIT PRICE TO	OT INV
06/29/18	MOVED TO LOCATION:		
	Rigged up, Pulled and singled rods out, anchor, Ran bailer, Found T.D. at 3010 Shut down.	, Dumped sand for bottom plu	ıg,
	Rig & Crew 8 hrs	\$205 per hr	\$1,640.00
07/02/18	Ran bailer, Found top of sand at 2900', Had surface dug out, Had to cut 4-1/2" of Stretch, Shut down.	If of $5-\frac{1}{2}$, Pulled on $4-\frac{1}{2}$, Ha	nd no
	Rig & Crew 4 hrs	\$205 per hr	\$ 820.00
07/03/18	Rigged logger up, Perforated at 250', R On 4-½", Pumped cement to surface, W Rigged down.	ashed up, Cut 4-½" and 5-½"	
	Rig & Crew 4 hrs Power tongs	\$205 per hr	\$ 25.00
	Cutting Equipment		\$ 100.00
	4 sacks Cement		\$ 48.00
Loewen C	Perator Inc. Perator inc. haul water and empty pit		\$ 230.00
	GHANK YOU FOR YO	OUR BUSINESS !!!!	
D	AID	Sub Total	\$3,683.00
Г	7-17-18	Sales Tax 8.00%	294.64
Date:	111021	TOTAL	\$2.077.64
Ck#	4031	TOTAL	\$3,977.64
Amt	TERMS: NET 30_1_5% WILL BE AD DATE OF INVOICE. PLEASE PA		M

COMPLETION – WORKOVER – ROD & TUBING SERVICE 408 N. 4TH STREET, PO. BOX 341, CANTON, KS 67428

	Company	Loeweno	perator					
	LeaseE	D-Schroc	der		_ Well	#/		
	Unit	_OperO		Prod. well N	lew well In	j. well		
DATE	6-29-18		WORK DONI	E	· · ·	1 46_	HRS.	AMOUNT
M	loved to	location						
	Rissed 4	p pulled.	+ Sinale	es rods a	out Po	ulled tubing		
	seat nin	ble + mad	acher	Can haile	of four	dIDat		
	3010,	lump sand	y for bo	Hom Dlya.	Shut	cloan.		
	_			R	mycn	eJ	8	1,640,00
	7-2-18							
	Ran ba	ler found	top of	sand at	2900+	+ dump		
	41 S/1c	of c/m or	n bottom	with bai	le H	ad surface	م ر	
	duc ou	iler found of Im or nt. had t	e Cut 1	-1/2 off of	5/2.	Dulled		
	on 41/2	had no	Stretch	. Shut d	bun.	V		
,	,				RISTER	C 45	4	82000
	フ-3-19	ુ		·	•			
F	315 acol 10	g gser up f up broke wash up	perforat	ed at 250	ft. No	ssed		
	2 menter	40 broke	Circula	tion on 41%	2. Pum	D C/m to		
5	urface.	Wash up.	cut 4/	+5/20H.	RISTO	down		
_		/		O-	SISTOC	Pal	4	820,00
			EXTRA EQU	IPMENT & SUPPL	IES		HRS.	AMOUNT
Power tong	es 250							25,00
Kero. & Pa								
Swab Cups	s							378,00
Other: C	cutting 6	equipment:	to cut p.	pe 1000		SUB TOTAL_	36	
4	Slic of cli	M LIGOR J	ank ton	de haul	water t	<u>Lo</u> tax_		
	n tem	ipty pit	23000	+ water.				
	·	V (•				TOTAL _		
			WE	LL RECORD				
Pul	led RO	DS Ran		Pulled	TUBING	Ran	_	
	1 7/:				_ 3" _ 2½		_	
	3/-	4			_ 2		_	
	5/s				_ subs _ subs			
	sub sub				_ subs _ barrel		_	
	pur				_ sn		_	
			 _		_ perf. _ ma			
			_					



1023 Reservation Rd Hays, KS 67601-3982

Office: 785-625-1182 or 785-625-1118

Fax: 785-625-1180

Buffolo Gp Ed Schnoeder Gp

Loewen Op	oera	itor Inc
PO BOX 3	35	
CANTON	KS	67428-0335

IU/	oice Date	7/9/2018	
12255	Lease	Ed Schroeder	
	Well	1	
	County	McPherson	
	State	KS	-

Service Date	Job Ticket	Description		Amount
07/03/18	1230	Perforating		\$ 1,450.00
		PAID Date:	:. _ Gp _1 <u>8</u> _29	
·			SubTotal	\$ 1,450.00 \$ -

We Appreciate Your Business!

Terms: Invoice payable net 30 from date on invoice.

Past due invoices subject to finance charge at maximum rate allowed by state law.

Larry Smith 785-432-0165 **Hays** KS Scott Chesney 620-672-8300 Pratt KS David Burns 620-629-3972 **Liberal** KS



TICKET

1230

1023 Reservation Road • Hays, Kansas 67601 • (785) 625-1182

	1							[Date 🔐	<u>- 1 </u>	3-	<u> </u>
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ddress:	308 3	Ma	in t	10x 33	5	<u>Co</u>	nfon	KS	67	428		
ease and Wel	INO, Zo	<u> </u>	chroco	her No	0-1	F	ield					
	Monum					_ C	ounty \underline{Z}	lc ph	est s	state _	Sans	25
ustomer's Ord	der No. <u>Ve</u>	rba(oud.	Sec.	<u>8</u>	<u> </u>	Twp.	21	Range	<u> </u>	
ero O	tal c	L Scol			Casing Siz	.e	45	iner		Weight	115	₩
ustomer's T.D				Gemin	i Wireline	T.D.	NA	<u> </u>	uid Level	Fo	ll/ [c	<u>droj</u>
ngineer <u>A</u>	- Die	ling			Operator _		has				· (
	Perf	orations						Truck	Rental			
Code Reference	From	То	Number Of Holes	Amount	Çod Refere	e nce	Uni	t	File Nam	ne	Amount	
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108 E	VT3									Tax		
	aboye service a	<u> </u>								TOTAL		Щ

- **General Terms and Conditions** All accounts are to be paid within the terms fixed by Gemini Wireline invoices and should these terms not be observed, interest at the rate of 1.5% per month will be charged from the date of such invoice. Interest, Attorney, Court, Filing and other fees will be added to accounts turned to collections.

 Because of the uncertain conditions existing in a well which are beyond the control of Gemini Wireline, it is understood by the customer that Gemini Wireline, cannot guarantee the results of their services and will not be held responsible for personal or property damage in the performance of their services. (1)
- (2)
- Should any of Gemini Wireline instruments be lost or damage in the performance of the operations requested the customer agrees to make every reasonable effort to recover same, and to reimburse Gemini Wireline, for the value of the items which cannot be recovered, or the cost of repairing damage to items recovered. It is further understood and agreed that all depth measurements shall be supervised by the customer or its employees and customer hereby certifies that the zones, as shot were approved.

 The customer certifies that it has the full right and authority to order such work on such well and that the well in which the work is to be done by Gemini Wireline is in proper (3)
- (4)
- (5) and suitable conditions for the performance of said work
- (6) No employee is authorized to alter the terms or conditions of this agreement.



Date:

Amt.

-€k#<u>----</u>

REMIT TO

QES Pressure Pumping LLC Dept:970 P.O.Box 4346 Houston, TX 77210-4346

MAIN OFFICE

P.O.Box884 Chanute,KS 66720 620/431-9210,1-800/467-8676 Fax 620/431-0012

813560 Invoice# Invoice

Invoice Date: 07/06/18 C.O.D. Terms: Page

LOEWEN OPERATOR INC

208 S. MAIN **CANTON KS 67428** USA

Ed Schroeder #1

		=========			
Part No	Description	Quantity	Unit Price [Discount(%)	Total
CE0450	Cement Pump Charge 0 - 1500'	1.000	1,500.0000	35.000	975.00
CE0002	Equipment Mileage Charge - Heavy Equipment	50.000	7.1500	35.000	232.38
CE0711	Minimum Cement Delivery Charge	1.000	660.0000	35.000	429.00
CC5829	Lite-Weight Blend V (60:40:4)	115.000	16.0000	35.000	1,196.00
CC5325	Calcium Chloride	200.000	1.2500	35.000	162.50
				Subtotal	4,607.50
			Discounted	d Amount	1,612.63
	Loewen Operator, Inc.		SubTotal After	Discount	2,994.87
	Gp		Amount D	ue 4,774.70 If paid	d after 07/06/18

Buffolo Ep Ed. Schnooder lease

Tax:

fotal:

108.68

3,103,56



PRESSURE PUMPING LLC
PO Box 884, Chanute, KS 66720
830-431-9210 or 800-467-8678

11041

TICKET NUMBER 54549

LOCATION Eldorado 145

FOREMAN PAREFIR

FIELD TICKET & TREATMENT REPORT

Invoict#813560

DATE	l0 or 800-467-867	<u> </u>		CEMEN	I	10400	nut or	1	
DATE	CUSTOMER#	WELL	NAME & NUME	BER	SECTION	TOWNSHIP	RANGE		OUNTY
-3-18	4779	EO Sch	roeder	st /	8	21	1	Mc	phc:30
STOMER	. 00				TDI IOV #	* ***	TDI ION #	1.11	19-7
AJLING ADDRE	<u>r Catal</u> Ess	er Inc		1	TRUCK#	Austin 1	TRUCK#	#-	DRIVER
200	5 MAIN	IPAR.					<u> </u>	+	
TY	> NUA. N	P.O. Do	ZIP CODE	}	750	Chris		-	<u> </u>
1 1	•				775	Setimy	·	+	
OB TYPE A		KS	67428	 -				4	
		HOLE SIZE		HOLE DEPTH	1	CASING SIZE & W	·	+	
ASING DEPTH		DRILL PIPE		TUBING	•-		OTHER	+	
LURRY WEIGH ISPLACEMENT		SLURRY VOL_		WATER gal/s	K	CEMENT LEFT in	CASING	+	
_		DISPLACEMENT		MIX PSI		RATE		+	
ement:	to Suthac	e-hole.	standing	hul/	-	·			
	•	••						\prod	•
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					-				
ACCOUNT	QUANITY	or UNITS	DE	SCRIPTION of	SERVICES or PR	ODUCT	UNIT PRICE		TOTAL
ECHSO			PUMP CHARG	<u> </u>	-		1500.00	150	20,00
E0002	1 30		MILEAGE				2.15	11/35	12.50
								-	
E0317			Mia I	bulk de	livery	·	156000	1	0.00
C8829	115		prin 1 60/4	bulk de	livery		11.00		10.00
E0317			mia 1 60/4 Calci	bulk de 10 4% mu Ch	livery		16.00		
1000 10211 108829 1057257	115		mia 1 60/4 Calci	bulk de o 4% om Ch	livery		11.00		10.00
E0317	115		mia 1 60/4 Calci	bulk de b 4% om Ch	livery		11.00		10.00
E0317	115		mia 1 60/4 CAICS	bulk de By 4% iom Ch	livery		11.00		10.00
E0317	115			bulk de 10 4% ions Ch	livery		11.00		10.00
E0311	115			bulk de 10 4% ions Ch	livery		11.00		10.00
C8829	115			bulk de 10 4% ions Ch	livery		11.00		10.00
E0317	115			bulk de	livery		11.00	25	0,00
C8829	115			bulk de	livery		11.00	25	10.00
E0317	115			bulk de	livery		11.00	25	0,00
C8829	115			bulk de	livery		16.25	25	0,00
E0311	115			bulk de	livery		11.00	25	0,00
E0317	115			bulk de	livery		16.25	25	0,00
C8829	115			bulk de	livery		16.25	25	0,00
C8829	115			bulk de	livery		16.23-	25	0,00
E0511 C8829 A CS325	115			bulk de	livery		16.25	25	0,00
E0317	115			bulk de	livery		16. 23 - 1. 23 - 16. 24 - 16.	25	0,00



PRESSURE PUMPING LLC
PO Box 884, Chanute, KS 66720
620-431-9310 or 900 467 9676

LOCATION Fldorado 165 FOREMAN PARSEN

FIELD TICKET & TREATMENT REPORT CEMENT

020-101-92	10 01 800-407-667	, ,	CEMEN	l J			
DATE	CUSTOMER#	WELL NAME & NUI	MBER	SECTION	TOWNSHIP	RANGE	COUNTY
2-3-18		ED Schreede	#/	8	21.	7	Mephesser
CUSTOMER		10.00 B. 1. 18 B. 18					
10000	ESS	e-Inc		TRUCK #	DRIVER	TRUCK#	DRIVER
2 - 12 - 12 - 12 - 12 - 12 - 12 - 12 -	the contract of the contract of			166	Austra	income the property	
208	Sittlin	1P.O. Box 3351		110	Chris		
CITY	/	STATE ZIP CODE	7	775	Jecony		
Canton		KS 154128			Je Period		
JOB TYPE /-							<u> </u>
		HOLE SIZE	_ HOLE DEPTI	1	CASING SIZE & W		
CASING DEPTH		DRILL PIPE	TUBING		<u>amphalas</u> ann a	OTHER	
SLURRY WEIGH	łT	SLURRY VOL	WATER gal/s	k	CEMENT LEFT in	CASING	
DISPLACEMEN	T	DISPLACEMENT PSI	MIX PSI		RATE	+ 4	
REMARKS:	Coli Her.	true buttheast	149 20161	つき オーノモーバー	+ 121 + 1/1		
Consent	to Curture	e thole stacking	- 6.11		7: 14 / 15 7 10	eti premep	- 21
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-						9.00	
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ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CENSO		PUMP CHARGE	1500,00	1500,00
FOBOR	50	MILEAGE	2.15	357.50
110511	/	LA Cion Chloride	66000	1100
C5329	115	60/40 4%	11.00	18400,00
CC5325	200	CHICIONI Chloride	1.25-	250,00
	e w w			
- 1				
			<u> </u>	
				4609.50
				7607.
				1612.62
	· · · · · · · · · · · · · · · · · · ·			
<u> </u>				
vin 3737			SALES TAX	
WTHORIZTION 7			ESTIMATED TOTAL	2994.87

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.