

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

QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 850

| | | | | | | | | | | | | | | | |
|------|---------|------|----|------|----|-------|----|--------|--------|-------|----|-------------|--|--------|--------|
| Date | 6-30-18 | Sec. | 12 | Twp. | 22 | Range | 17 | County | Pawnee | State | KS | On Location | | Finish | 5:30pm |
|------|---------|------|----|------|----|-------|----|--------|--------|-------|----|-------------|--|--------|--------|

Lease Froetschmer Well No. 1-12 Location Pawnee Rock 756 Hwy 25 Winto

Contractor Stefing Owner To Quality Oilwell Cementing, Inc.

Type Job Surface You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.

Hole Size 12 1/4 T.D. 1060' Charge To Shelby Reservoir

Csg. 8 5/8 Depth 1057 Street

Tbg. Size Depth City State

Tool Depth The above was done to satisfaction and supervision of owner agent or contractor.

Cement Left in Csg. 29.03 Shoe Joint 29.03 Cement Amount Ordered 450 40 4 100 2 100

Meas Line Displace 65 BC 1/2# F10

EQUIPMENT

| | | | | | | |
|---------|----|-----|----------|--|----------|-----|
| Pumptrk | 17 | No. | Cementer | | Common | 190 |
| | | | Helper | | Poz. Mix | 180 |

| | | | | | | |
|---------|--|-----|--------|--|---------|----|
| Bulktrk | | No. | Driver | | Gel. | 9 |
| | | | Driver | | Calcium | 20 |

| | | | | | | |
|---------|----|-----|--------|--|--|--|
| Bulktrk | 13 | No. | Driver | | | |
| | | | Driver | | | |

JOB SERVICES & REMARKS

Remarks: Halls

Rat Hole Flowseal 225#

Mouse Hole Kol-Seal

Centralizers Mud CLR 48

Baskets CFL-117 or CD110 CAF 38

D/V or Port Collar Sand

8 5/8 on bottom. Best Circulation. Handling 479

Mix 450 SIC & Displace. Mileage

Bottom 1028 **FLOAT EQUIPMENT** 8 5/8

Cement Circulated Guide Shoe Slip on

Shot in 200# Centralizer Rubber Plug

Baskets Ball Plate

AFU Inserts

Float Shoe

Latch Down

Pumptrk Charge Long Surface

Mileage 27

Signature [Handwritten Signature]

| | |
|--------------|--|
| Tax | |
| Discount | |
| Total Charge | |

| | | | |
|----------------------------------|--------------------------|-------------------------------------|-----------------|
| Customer <i>Shelby Resources</i> | Lease No. | Date <i>7/5/2018</i> | |
| Lease <i>Froetschner</i> | Well # <i>1-12</i> | | |
| Field Order # <i>16598</i> | Station <i>Pratt, KS</i> | Casing | Depth |
| Type Job | Formation | County <i>Powder</i> | State <i>KS</i> |
| | | Legal Description <i>12-225-170</i> | |

| PIPE DATA | | PERFORATING DATA | | FLUID USED | TREATMENT RESUME | | |
|-------------------|--------------|------------------|----|------------------------|------------------|-------|------------------|
| Casing Size | Tubing Size | Shots/Ft | | Acid | RATE | PRESS | ISIP |
| <i>4 1/2" DF</i> | | | | | | | |
| Depth <i>3941</i> | Depth | From | To | Pre Pad | Max | | 5 Min. |
| Volume <i>56</i> | Volume | 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/mud</i> | Gas Volume | | Total Load |

| | | |
|--------------------------------------------|-----------------------------------------|-------------------------------|
| Customer Representative <i>Alan Loftis</i> | Station Manager <i>Justin Westerman</i> | Treater <i>Darin Franklin</i> |
|--------------------------------------------|-----------------------------------------|-------------------------------|

| | | | | | | | | | |
|---------------|--------------|--------------|--------------|--------------|--------------|--|--|--|--|
| Service Units | <i>92911</i> | <i>84991</i> | <i>19843</i> | <i>19889</i> | <i>21010</i> | | | | |
| Driver Names | <i>Darin</i> | <i>Josh</i> | <i>Josh</i> | <i>D. G.</i> | <i>D. G.</i> | | | | |

| Time | Casing Pressure | Tubing Pressure | Bbls. Pumped | Rate | Service Log |
|---------------|-----------------|-----------------|--------------|----------|--------------------------------------------------------------------------------------------------------------------|
| <i>4:15pm</i> | | | | | ON LOCATION ON LOCATION / SPT, MEETINGS 210SK 60/40 P02, 4% G01 13.78 PPS, 1.43 VEB, 6.92 W910 |
| | | | | | 3941 - 50SK |
| <i>6:10pm</i> | <i>300</i> | | <i>8</i> | <i>4</i> | <i>Pump 8 water</i> |
| | <i>300</i> | | <i>13</i> | <i>4</i> | <i>mix 50SK cement</i> |
| | <i>300</i> | | <i>3</i> | <i>4</i> | <i>Displace 3 bbls water</i> |
| | <i>300</i> | | <i>46</i> | <i>4</i> | <i>46 bbls mud</i> |
| | | | | | <i>1090' - 50SK</i> |
| | <i>200</i> | | <i>8</i> | <i>4</i> | <i>Pump 8 water</i> |
| | <i>200</i> | | <i>13</i> | <i>4</i> | <i>mix 50SK cement</i> |
| | <i>200</i> | | <i>3</i> | <i>4</i> | <i>Displace 3 water</i> |
| | <i>200</i> | | <i>9</i> | <i>4</i> | <i>9 mud</i> |
| | | | | | <i>250'</i> |
| | <i>100</i> | | <i>3</i> | | <i>3 water Adhes</i> |
| | <i>100</i> | | <i>11</i> | | <i>mix 40SK cement</i> |
| | <i>100</i> | | <i>1</i> | | <i>Displace 1 bbl water</i> |
| | <i>50</i> | | <i>17</i> | <i>3</i> | <i>60' - 20SK, PH-30SK, MH-20SK</i> |