KOLAR Document ID: 1429850

**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 #:	I API No.	15 -					
Name:							
Address 1:	'	•	Twp S. R East West				
Address 2:		Feet from					
City:	+	Feet from	East / West Line of Section				
Contact Person:	Footage	s Calculated from Nea	rest Outside Section Corner:				
Phone: ( )		□ NE □ NW	SE SW				
Type of Well: (Check one) Oil Well Gas Well OG D&A  Water Supply Well Other: SWD Permit #:  ENHR Permit #: Gas Storage Permit #:  s ACO-1 filed? Yes No If not, is well log attached? Yeroducing Formation(s): List All (If needed attach another sheet)  Depth to Top: Bottom: T.D.	Lease N  Date We The plug by:	lame:ell Completed: gging proposal was app	Well #: (Date) (KCC <b>District</b> Agent's Name)				
Depth to Top: Bottom: T.D.							
Depth to Top: Bottom:T.D.		g Completed.					
Show depth and thickness of all water, oil and gas formations.							
Oil, Gas or Water Records	Casing Record (Su	g 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 to the cement or other plugs were used, state the character of same depth placed from the	·		ods used in introducing it into the hole. If				
Plugging Contractor License #:	Name:						
Address 1:	Address 2:						
City:	State:						
Phone: ( )							
Name of Party Responsible for Plugging Fees:							
State of County,							

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.



P. O. Box 466 Ness City, KS 67560 Off: 785-798-2300



DATE	INVOICE#
11/15/2018	27423

DII	1	TO

Vess Oil Corporation 1700 Waterfront Parkway Building 500 Wichita, KS 67206



- Acidizing
- Cement
- Tool Rental

TERMS	Well N	10.	Lease	County	Contractor	Wel	I Туре	W	ell Category	Job Purpose	€	Operator
Net 30	#1-A		Nollette	Logan	Husker Energy		Oil		Workover	PTA		David E
PRICE	REF.			DESCRIPT	TON		QΤ\	Y UM		UNIT PRICE	UNIT PRICE	
575W 576W-P 290 279 275 328-4 581W 583W		Pun D-A Ben Cot 60/4 Ser Dra	eage - 1 Way np Charge - PTA Air ntonite Gel ton Seed Hulls 40 Pozmix (4% C vice Charge Cem- yage btotal es Tax Logan Cor	ent				1 7 14 7 450	Sacks	5.00 875.00 42.00 30.00 10.60 1.75 0.85		450.00T 875.00T 294.00T 420.00T 210.00T 4,770.00T 787.50T 1,462.00T 9,268.50 741.48

We Appreciate Your Business!

Total

\$10,009.98

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CITY, STATE, ZIP CODE	ADDRESS	CHARGE TO:
	7	0.0

TICKET 27423

Services, Inc.		CHY, STATE, ZIP CODE			PAGE OF
SERVICELOCATIONS	WELL/PROJECT NO.	LEASE	COUNTYPARISH	STAJE CITY	DATE
110	1:14	1 Jollette	Coour	7	11-15-18
211/pss 6194 85	SERVICE CONTRACTOR	the same	RIG NAMEJNO.	SHIPPED DELIVERED TO	ORDER NO.
33	SALES HOSKON	Present Service		"Cr Courton	
	WELL IYPE	WELL CATEGORY JO	JOB PURPOSE	WELL PERMIT NO.	WELLLOCATION
	0.7	backowi	10m		
REFERRAL LOCATION	INVOICE INSTRUCTIONS				

INVOICE INSTRUCTIONS

<b>LEGAL TERMS:</b> Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include,		283	28/	328-4 2		275	279	2%	13768	575	PRICE SECONDARY REFERENCE/ REFERENCE PART NUMBER LOC
id agrees to lich include,											ACCOUNTING DF
REMIT PAYMENT TO: OUR EQUIPMENT SU		Drawar	Service Charge Char	60/46 Posnix 40/6 941		Cotton Seed 11.11s	Bentomite becu	D. Aler	Timo Charge Py	MILEAGE TIL # 111	DESCRIPTION
SURVEY  AGREE  DECIDED AGREE  OUR EQUIPMENT PERFORMED  WITHOUT BREAKDOWN?		1720 m	420 27	1 3/2 05/4	,	75 L	14 36	12 / L	Cp .	90 m	מזץ. עאן מזץ. עאו
PAGE TOTAL		Es .	N X	07 4		30 -6	24 0%	42 00	875/20	2 - 5	UNIT
as action		14/2 00	28 484	es of th	,	2/0	420 10	299/10	8757 00	20/2/1	AMOUNT

LIMITED WARRANTY provisions. but are not limited to, PAYMENT, RELEASE, INDEMNITY, and

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

D A.M.

TIME SIGNED

DATE SIGNED

SWIFT SERVICES, INC. NESS CITY, KS 67560 P.O. BOX 466 785-798-2300

WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS ARE YOU SATISFIED WITH OUR SERVICE? PERFORMED WITHOUT DELAY? WE UNDERSTOOD AND SATISFACTORILY? OUR SERVICE WAS MET YOUR NEEDS? ☐ CUSTOMER DID NOT WISH TO RESPOND ☐ YES ONO TOTAL

是

win Edgeston CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES. The customer hereby acknowledges receipt of the materials and services listed on this ticket

APPROVAL

Thank You!

SWIFT OPERATOR

SWIFT Services, Inc. PAGE NO. **JOB LOG** CUSTOMER WELL NO. CHART NO. VOLUME (BBL) (GAL) PRESSURE (PSI)
JBING CASING RATE (BPM) PUMPS TIME DESCRIPTION OF OPERATION AND MATERIALS TUBING 800