KOLAR Document ID: 1429852

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

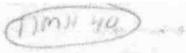
WELL PLUGGING RECORD K.A.R. 82-3-117

Form CP-4
March 2009
Type or Print on this Form
Form must be Signed
All blanks must be Filled

OPERATOR: License #	:		APIN	No. 15					
Name:				Spot Description:					
Address 1:				Sec Twp S. R East West					
				Feet fron					
		:		Feet from East / West Line of Section					
		·		Footages Calculated from Nearest Outside Section Corner:					
Phone: ()				□ NE □ NW	SE SW				
Water Supply Well ENHR Permit #: Is ACO-1 filed? Ye Producing Formation(s)	Other: G s No If not, : List All (If needed attach a	as Storage Permit #: is well log attached? Yes	Leasi Date The p	County: Well #: The plugging proposal was approved on: (KCC District Agent's Name)					
	epth to Top:	Bottom: T.D	Plugg	ging Commenced:					
	epth to Top:	Bottom: T.D	Plugg	ging Completed:					
De	epth to Top:	Bottom:T.D							
Show depth and thickne	ess of all water, oil and gas	s formations							
·	Water Records	- I	Casing Record	Record (Surface, Conductor & Production)					
Formation	Content	Casing	Size	Setting Depth	Pulled Out				
· omaion	Comon	- Cuomig	0.20	Johning 2 op in	. 4.154 541				
		cter of same depth placed from	•		ods used in introducing it into the hole. If				
Plugging Contractor License #: Name				:					
Address 1: Address				ss 2:					
City:			State	:					
Phone: ()									
Name of Party Respons	sible for Plugging Fees:								
State of	Co	unty,	, ss.						
		,		Employee of Operator a	r Operator on above-described well,				
	(Print Na			Employee of Operator o	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.





TREATMENT REPORT

Customer Vess O'l Corn. Lease Colchen				Lease No.				Date	1	7-5-		
				Well # 12 - 20			11/20/2018					
Field Order #	Station	Prad	1.105		Casing	Dep	oth	County E	1,5	State	His	
1990	2411	PTA	751			Formation	on		_egal Descrip	otion		
PIPE DATA PERFORATING DATA					FLUID USED TREATMENT RESUME							
Casing Size	Tubing Siz	e Shots/F	t	Acid				RATE PRESS	3 ISI	ISIP		
Depth	Depth 3, Occ	From	То	Pre Pad			Max		5 N	5 Min.		
Volume	Volume 4		To		Pad		Min		10 Min.			
Max Press	Max Press		То		Frac		Avg		15 Min.			
Well Connection	n Annulus V	_	То				HHP Used		Annulus Pressure			
Plug Depth	Packer De	pth From	То		Flush WS Her		Gas Volun	ne	Total Load			
Customer Rep	resentative J	Raisa		Station	Manager 7	to hips	to some	Treater D	Sun F	CONFI		
Service Units	9291	84980	2,92	1950	3 2140	19889	19860					
Driver	Dean	Fa	Ex	D. 52	D. 52	CIPIGN	Clerene					
Time	Casing Pressure	Tubing Pressure	Bbls. Pu		Rate			Service	Log			
9:30 na						on	Locsia	n / 58/er	meet	26		
								0/40 Poz, 490601				
1								1.4311	7		94-	
						1						
1						3,000	1- 50	sr 3001	+ Hulis			
10: Sonn		200	6	5 1		Pump 6 hore wising						
	1.5	200	30		5	mir Scoths Goj						
		200 1			5	mix SOSK Cemen						
101	To think	200	J sty	ab of h	5	PISPI.	14	bals WSF	PHILAD	Name to the Owner	TO LEE	
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	F 4 1					CIRCUISIO to SUSPACE						
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	, Kee						واستوياه				14	
122	Service Co.						Tol		10			
12.30pm		27					-	Complete		- Crew		
								hank You)//!	4	W-1-1-	
		1		80.0								
10244	NF Hiwa	av 61 • P	O. Box	8613 •	Pratt. KS 6	7124-86	13 • (620	672-1201	• Fax (62	20) 672-5	383	