

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

Form	CP4 - Well Plugging Record
Operator	H & B Petroleum Corp.
Well Name	B HOWARD 7
Doc ID	1432580

Producing Formations

Formation	Top	Bottom	Total Depth
Lansing	3048	3052	
Lansing	3064	3066	
Lansing	3073	3076	
Lansing	3080	3082	
Lansing	3127	3128	

OCT 15 2018

Invoice

GLOBAL OIL FIELD SERVICES, LLC

24 S. Lincoln
RUSSELL, KS 67665

Date	Invoice #
10/12/2018	0013235

Bill To
H & B PETROLEUM CORPORATION PO BOX 1305 Hutchinson, KS 67504

H & B PETROLEUM	
VOUCHER	<u>62536</u>
ACCT#	<u>5001 14</u>
PROPERTY	<u>260</u>
DESCRIPTION	<u>Cement to plug well</u>
APPROVAL	<u>mit</u>

P.O. No.	Terms	Project
HOWARD#7	Due on receipt	

Quantity	Description	Rate	Amount
380	60/40 POZMIX CEMENT	13.75	5,225.00
13	BENTONITE GEL	30.00	390.00
8	COTTON SEED HULLS	31.50	252.00
401	HANDLING	1.90	761.90
	BULK MILEAGE	950.00	950.00
1	TRI-PLEX PUMP CHARGE FOR PLUG	850.00	850.00
45	HEAVY EQUIPMENT. ONE WAY	6.50	292.50
45	LMV- ONE WAY	2.75	123.75
	20% DISCOUNT IF PAID WITHIN 15 DAYS OF INVOICE		
	STAFFORD CO SALES TAX	7.50%	0.00

Thank you for your business.

Phone #	Fax #
785-445-3525	785-445-3526

Total

\$8,845.15

- 1789.03

\$ 7076.12