KOLAR Document ID: 1433198

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 Twp S. R East Wes							
Address 2:				Feet from North / South Line of Section							
City:	State:	Zip: +	.	Feet from East / West Line of Section							
Contact Person:				Footages Calculated from Nearest Outside Section Corner:							
Phone: ()					NE NW	SE SW					
Type of Well: (Check one)		OG D&A Cathodi SWD Permit #:		,		 					
ENHR Permit #:	Gas Sto	rage Permit #:		Date Well Completed:							
Is ACO-1 filed? Yes	No If not, is well	log attached? Yes				ved on: (Date)					
Producing Formation(s): List A	ll (If needed attach another	sheet)				(KCC District Agent's Name)					
Depth to	Top: Botto	m: T.D		Plugging	a Commenced:						
Depth to	Top: Botto	m: T.D		Plugging Commenced: Plugging Completed:							
Depth to	Top: Botto	m: T.D	'	. ragging	g completed.						
Show depth and thickness of a	all water, oil and gas forma	ations.									
Oil, Gas or Water	Records		Casing Re	g Record (Surface, Conductor & Production)							
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 fo	r Plugging Fees:										
State of	County, _			, ss.							
	<i>3</i> , –			_	implayed of Onesates	Operator on obeyed decertibed					
	(Print Name)			E	imployee of 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.



Service Order No. 2279

457 Yucca Lane • Pratt, Kansas 67124 • 620-388-5676 Company Client Order# Billing Address City State Zip Lease & Well # Field Name Legal Description (coordinates) State Casing Size Casing Weight County Fluid Level (surface) Excel Wireline T.D. Engineer Operator Operator Unit# Depth Qty **Product Code** Description **Unit Price** \$ Amount To From 4 95000 Received the above service according to the terms and conditions specified below, **SUBTOTAL** which we have read and to which we hereby agree. DISCOUNT Customer **General Terms and Conditions** (1) All accounts are to be paid within the terms fixed by Excel Wireline invoices and should these terms not be observed, **SUBTOTAL** 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 over to collections. TAX (2) Because of the uncertain conditions existing in a well which are beyond the control of Excel Wireline, it is understood by the customer that Excel 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. **NET TOTAL** (3) Should any of Excel Wireline instruments be lost or damaged in the performance of the operations requested, the customer agrees to make every reasonable effort to recover same, and to reimburse Excel Wireline for the value of the items which cannot be recovered or for the cost of repairing damage to items recovered.

(4) It is further understood and agreed that all depth measurements shall be supervised by the customer or its employees,

(5) 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 to be done by Excel Wireline is in proper and suitable condition for the performance of said work.

and customer hereby certifies that the zones, as shot, were approved.

(6) No employee is authorized to alter the terms or conditions of this agreement.



FIELD SERVICE TICKET

1718 17444 A

PRESSURE PUMPING & WIRELINE							DATE TICKET NO							
DATE OF 10	STRICT POXI	NEW	OLD WELL	PROD INJ	□ WDW		JSTOMER RDER NO.:	V =						
CUSTOMER RAGOLIA GOAS						LEASE Lies WELL NO								
ADDRESS						COUNTY Barber STATE Kansas								
CITY			STATE			SERVICE CREW TO TO TO MIKE Chappen								
AUTHORIZED B	BY		79			JOB TYPE:(Same of the same o		4	-04/12			
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19843	7.7	21		-				FINISH OPE	RATION		(ANA)	0		
	-						+	RELEASED			PM)/20			
								MILES FROM	STATION TO V	VELL	40			
TEM/PRICE REF. NO.	RICE MATERIAL, EQUIPMENT AND SERVICES USED					ED	UNIT	QUANTITY	ER, OPERATOR, COUNTY PRICE	- i	ACTOR OR AC	-,-		
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THE ABOVE MATERIAL AND SERVICE

FIELD SERVICE ORDER NO.

REPRESENTATIVE

SERVICE

ORDERED BY CUSTOMER AND RECEIVED BY: (WELL OWNER OPERATOR CONTRACTOR OR AGENT)



TREATMENT REPORT

Customer Q	Lease No.						Date 10-27-18										
Lease Li	Well# A-/						1	*	-								
Field Order #	Station Station	Prat	+ Kans	0-5 /	718	Casing 5	1/2	Depth	600	County	Pas	-bc-		State	5		
Type Joh		00	2-41					mation			Carrier Co	Legal [Description /	4-325-			
PIPE DATA PERFORATIN					IG DATA FLUID USED					TREATMENT RESUME							
Casing Size	Tubing Siz	e Shots	s/Ft	Acid			, RA			RATE	ATE PRESS ISIP						
Depth 600	Depth	From		То	Pre Pad			Max				5 Min.					
Volume 11/12	Volume	From		То	Pad	Pad			Min				10 Min.				
Max Press	Max Press	From	-	Го	Frac				Avg				15 Min.				
Well Connection	Annulus V	nnulus Vol. From		То					HHP Used				Annulus Pressure				
Plug Depth	Packer De	pth From	-	-o Flush				Gas Volume				Total Load					
Customer Repre	sentative	3000	capp'	Stat	on Mana	iger 30	5 } \	~150C	.stcm	Trea	iter	Cur	5 (101)	(Fi.)			
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Driver Names	Fernis	m:K	e mille	- Ch	ayou	Charles	\sim	We	m: 14						v (8°		
	Casing Pressure	Tubing Pressure	Bbls. F	Pumped	F	Rate					Servic	ce Log					
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