### KOLAR Document ID: 1433231

**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 Description:
Address 1:	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:
Type of Well: (Check one)       Oil Well       Gas Well       OG       D&A       Cathodic         Water Supply Well       Other:       SWD Permit #:       SWD Permit #:       SWD Permit #:       SWD Permit #:         ENHR Permit #:       Gas Storage Permit #:       SWD Permit #:       SWD Permit #:       SWD 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.	County: Well #: 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	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,	, \$\$.
(Print Name)	Employee 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.

#### Submitted Electronically

STATE OF

Service Order No. 2281

	457	7 Yucca Lane • Pr	ratt, Kansa		620-388-5	676	Date 10/2	9/18
Company			and a				Client Order#	6
and the second sec	Marine Barriel Contraction	辛중SN-11	OE)	plora	tion		Oh	)
Billing Address	5.0°		City	1	St	ate	Zip	
Lease & Well #	Freeland L	ease #	]	Field Name	I		Legal Description	(coordinates)
County Hes	-025	State Kansus	1	Casing Size	1%		Casing Weight	
Fluid Level (sur		Reading from		Customer T.D			Excel Wireline T.	).
Engineer	Ehmeider	Operator		Operator		e.,	Unit#	
Product Code		Description		Qty	Unit Price	From	Depth To	\$ Amount
10/24	4/2 CIBI	>					15 D Mar 1997 Bar 1997 Da - 199 44	80000
	Setting	Chan @	4390	) 4390	.25	0	4390	1097.50
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	ve service according to the		<u>9/18</u> cified below,			CURTO	TAL At-	950.00
/	ad and to which we hereby	agree.				SUBTO	THE C	197.30
Customer						DISCO	UNT - 37	47.50
interest at the	re to be paid within the terms fixe rate of 1.5% per month will be ch	arged from the date of such in	nd should these voice. Interest, A	terms not be obse Attorney, Court, F	erved, iling	SUBTO	TAL 335	00.0
(2) Because of the	s will be added to accounts turned e uncertain conditions existing in er that Excel Wireline cannot gua	a well which are beyond the co	ontrol of Excel W ices and will not	fireline, it is under be held responsit	stood ble for		TAX 21	7.75
personal or pr (3) Should any of customer agre	operty damage in the performanc Excel Wireline instruments be lo es to make every reasonable effi th cannot be recovered or for the	ce of their services. st or damaged in the performa- ort to recover same, and to reir	nce of the operal mburse Excel Wi	tions requested, t	he	NET TO	TAL革新	67.76

(4) It is further understood and agreed that all depth measurements shall be supervised by the customer or its employees, and customer hereby certifies that the zones, as shot, were approved.
(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 subscription is in a supervised by the customer of a side of the 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.(6) No employee is authorized to alter the terms or conditions of this agreement.

OPI Print Shop

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	BA	<b>GI</b> ∩ <sup>™</sup>	10244 NE Hwy. 61 P.O. Box 8613
			Pratt, Kansas 67124
	ENERGY	SERVICES	Phone 620-672-1201
F	RESSURE PUMP	ING & WIRELINE	

#### FIELD SERVICE TICKET

1718 17445 A

DATE	TICKET NO
DATE	TICKET NO.

EN	ERGY	Pra Pra	). Box 86 tt, Kansa one 620-6	as 67124	Trut	23	1/18 1/44	Α
					) /		DATE TICKET NO	
DATE OF JOB 10-29-1	4 .	DISTRICT Prott	Kansa	-5				STOMER DER NO.:
CUSTOMER RAG	301	+ Gois			LEASE	reel	and	WELL NO. 🖌
ADDRESS					COUNTY H	OSDI	STATE KAR	5×5
ADDRESS CITY STATE AUTHORIZED BY					SERVICE CF		Anis mike Jobr	1
CITY STATE AUTHORIZED BY EQUIPMENT# HRS EQUIPMENT# HRS					JOB TYPE: (	Cem		-
	HRS	EQUIPMENT#	HRS	EQU	JIPMENT#	HRS	TRUCK CALLED 10-29-16	AM TIME
1943113 -	5						ARRIVED AT JOB	AM 1230
194146	2						START OPERATION	PM /300
							FINISH OPERATION	AM 1800
		1					RELEASED	AM 1830
							MILES FROM STATION TO WELL	45

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered). The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP. 111 SIGNED

(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUN	١T
CDIOOL	COMMON Cement	SK	350-	-	560	10
CC109	Calcium Chloride	16	600-		630	0
E100	Pick 10 Mileune		45	3	202	50
E101 ,	Heavy equipment in leave	imi	90	3	675	00
E113	Build delivery charge pertur mile	S.Mh	740	× -	1420	63
CE 202	Dephyching 2001-3001	415	)	\$	1500	ie
CE 2-40	Blanking of Million Service & biller	5K	350	1	490	20
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1	MATERIALS		%TAX	K ON \$	· · · · ·	
				ΤΌΤΑΙ Υλι	6853	84
				うど	2	20
	x .					s d

REPRESENTATIVE

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY:

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.

SERVICE



# TREATMENT REPORT

Lease Fr									Date 10-2				
Lease Frecland					Well #								
Field Order #	Station	Prot	Kans	us 1	714	Casing <	11/2 Depth	h250	County	- NO E	.7	State	
The second second		-41			110	L	Formation		7 Və	Legal D	Description	215 0	
	E DATA		FORATI	NG DAT	A	FLUID I	JSED		TRE		RESUME	51-071	
Casing Size Tubing Size Shots/Ft			A	cid				ESS	ISIP				
Depth 2500	Depth	JØ From		 ō	P	re Pad		Мах			5 Min.		
/olume 38.73	S Volume 9	6 From	1	ō	P	ad		Min	. 7 2		10 Min.		
Max Press	Max Press	s From	Г	ō	Fi	rac		Avg			15 Min.		
Vell Connectio	n Annulus V	Vol. アラ From	г	ō				HHP Used	Ł		Annulus Pr	essure	
Plug Depth	Packer De	Erom	г	ō	FI	ush		Gas Volur	ne		Total Load		
Customer Rep	resentative	Jeff ca	DP5	Stat	ion Ma	nager 30	StinLieg	sternan	Treater	Fennie	-baston	)	
Service Units	75565	3328		3 64	981	199146							
Driver Names	Franks	mi Ke	m: KC	_ T.	1.5 e	5-5C							
Time	Casing Pressure	Tubing Pressure	Bbls. F	umped		Rate			Ser	vice Log			
230							Arrive	ed and	UNAT S	.) Saf	etume	e k the	
245							Piglipey istment						
300		1100	5	6		3.5	Real	Read circulation					
330		550	10	.5		3	mix su	Susse cummary man + 3/broke 15. topp1					
334		400	8	2		3	Pum H20 behind				c	,,,	
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1538	- 14	450	$\leq$		B		1 - P	H201	1.0	2			
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<u>5:45</u> .		100	4	7		2	PLAP						
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10244 NE Hiway 61 • P.O. Box 8613 • Pratt, KS 67124-8613 • (620) 672-1201 • Fax (620) 672-5383