

**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



FIELD ORDER N<sup>o</sup> C 46533

BOX 438 • HAYSVILLE, KANSAS 67060  
316-524-1225

DATE Dec 19+20 2018

IS AUTHORIZED BY: Bene Pet (NAME OF CUSTOMER)

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

To Treat Well As Follows: Lease Gilbert Well No. B#2 Customer Order No. \_\_\_\_\_

Sec. Twp. Range \_\_\_\_\_ County Reno State Kz

CONDITIONS: As a part of the consideration hereof it is agreed that Copeland Acid Service is to service or treat at owners risk, the hereinbefore mentioned well and is not to be held liable for any damage that may accrue in connection with said service or treatment. Copeland Acid Service has made no representation, expressed or implied, and no representations have been relied on, as to what may be the results or effect of the servicing or treating said well. The consideration of said service or treatment is payable. There will be no discount allowed subsequent to such date. 6% interest will be charged after 60 days. Total charges are subject to correction by our invoicing department in accordance with latest published price schedules.

The undersigned represents himself to be duly authorized to sign this order for well owner or operator.

THIS ORDER MUST BE SIGNED BEFORE WORK IS COMMENCED \_\_\_\_\_ By \_\_\_\_\_  
Well Owner or Operator Agent

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
		12-19-18		
	1	Pump chyp for <del>play</del> Play Job		650 <sup>00</sup>
	85 sack	Class A Cem cement @ 12 <sup>75</sup> /sack		1083 <sup>75</sup>
	6 Bag	Calcium Chloride @ 30 <sup>00</sup> /bag		180 <sup>00</sup>
	8 mile	1 way mile @ 4 <sup>00</sup> /mile		32 <sup>00</sup>
		12-20-18		
	1	Pump chyp for play job		650 <sup>00</sup>
	165 sack	60-40 2 <sup>20</sup> Poz @ 10 <sup>75</sup> /sack		1773 <sup>75</sup>
	8 mile	1 way mile @ 4 <sup>00</sup> /mile		32 <sup>00</sup>
				-
	250 sack	Bulk Charge @ 1 <sup>25</sup> /sack		312 <sup>50</sup>
	8942	Bulk Truck Miles min chyp		150 <sup>00</sup>
		Process License Fee on _____ Gallons		
TOTAL BILLING				

I certify that the above material has been accepted and used; that the above service was performed in a good and workmanlike manner under the direction, supervision and control of the owner, operator or his agent, whose signature appears below.

Copeland Representative Gary Ry

Station Bullton

Well Owner, Operator or Agent

Remarks Play out 12-20-2018 @ 10:30

NET 30 DAYS

## TREATMENT REPORT

Acid Stage No. 105

Date 12-19-18 District BURTON F. O. No. \_\_\_\_\_  
 Company Bear Pt  
 Well Name & No. Gilbert B#2  
 Location \_\_\_\_\_ Field \_\_\_\_\_  
 County Russ State Kc  
 Casing: Size 5 1/2 Type & Wt. \_\_\_\_\_ Set at \_\_\_\_\_ ft.  
 Formation: \_\_\_\_\_ Perf. \_\_\_\_\_ to \_\_\_\_\_  
 Formation: \_\_\_\_\_ Perf. \_\_\_\_\_ to \_\_\_\_\_  
 Formation: \_\_\_\_\_ Perf. \_\_\_\_\_ to \_\_\_\_\_  
 Liner: Size \_\_\_\_\_ Type & Wt. \_\_\_\_\_ Top at \_\_\_\_\_ ft. Bottom at \_\_\_\_\_ ft.  
 Cemented: Yes/No \_\_\_\_\_ Perforated from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 Tubing: Size & Wt. \_\_\_\_\_ Swung at \_\_\_\_\_ ft.  
 Perforated from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 Open Hole Size \_\_\_\_\_ T. D. \_\_\_\_\_ ft. P. B. to \_\_\_\_\_ ft.

Type Treatment: Amt. \_\_\_\_\_ Type Fluid \_\_\_\_\_ Sand Size \_\_\_\_\_ Pounds of Sand \_\_\_\_\_  
 Bkdown: \_\_\_\_\_ Bbl./Gal. \_\_\_\_\_  
 \_\_\_\_\_ Bbl./Gal. \_\_\_\_\_  
 \_\_\_\_\_ Bbl./Gal. \_\_\_\_\_  
 Flush: \_\_\_\_\_ Bbl./Gal. \_\_\_\_\_  
 Treated from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. No. ft. \_\_\_\_\_  
 from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. No. ft. \_\_\_\_\_  
 from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. No. ft. \_\_\_\_\_  
 Actual Volume of Oil/Water to Load Hole: \_\_\_\_\_ Bbl./Gal. \_\_\_\_\_  
 Pump Trucks No. Used: Std. 323 Sp. \_\_\_\_\_ Twin \_\_\_\_\_  
 Auxiliary Equipment Bulk 322  
 Packer: \_\_\_\_\_ Set at \_\_\_\_\_ ft.  
 Auxiliary Tools \_\_\_\_\_  
 Plugging or Sealing Materials: Type HPS-8 80 sack Class A Com 4200  
165 sacks 60-40-2% POZ (Gals. \_\_\_\_\_) (lb. \_\_\_\_\_)

Company Representative \_\_\_\_\_

Treater G. R. B.

TIME a.m / p.m.	PRESSURES		Total Fluid Pumped	REMARKS
	Tubing	Casing		
12:00				12-19-18 On location JSA Rig up to mix cement, (C) already in water Tubing run in to 700' casing was loaded before first entry 5 1/2 Tie on tubg stand mixer 50 sack Hot Plug 4 1/2 CC 5 BBL Break circ on 12 3/4 Sack (1.4 slurry) 1 1/2 BBL 50 sacks any wash up going down hole 12:57 13 1/2 BBL Let fall out rest of way 1:40 Pull tubing up 11 joints wash to top cement Run tubing try cement @ 555' near surface Pull tubing up to 340' Stand mixer going down hole 1 1/2 BBL Break circ on 12 3/4 (1.4 slurry) 8 1/2 BBL 35 sacks com any 4 1/2 CC washing down hole. 9 1/2 BBL Let fall out pull tubing out Tear down 323 Left tools rigged up 9:00 12-20-18 Review JSA Rig up Tie on 5 1/2 stand water to haul 1/2 BBL Casing loaded pressured up 300' Hold for 30 min call Suter Rig up 1 x 4.5PF Gum run in tubed cement @ 205' Perforated 200' Tie on 5 1/2 stand water 10:00 1/2 BBL Break circ on 12 3/4 stand mixer going down hole 0 60-40-2% POZ @ 33 BBL (1.2 sack slurry) 10:30 37 BBL 165 sacks any good cement to surface 11:15 Wash up tools tear down Ply out 10:30 12-21-18 7' down in casing collar still full cement