

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° C 46534

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

DATE Dec 21, 24 2018

IS AUTHORIZED BY: Bene Per (NAME OF CUSTOMER)

Address _____ City _____ State _____

To Treat Well _____ As Follows: Lease Gullbent Well No. 4 Customer Order No. _____

Sec. Twp. _____ Range _____ County Peru State Ko

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 _____ Agent

Well Owner or Operator

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
	1	Pump chg for Plog Job		650 ⁰⁰
	55 sack	Class A Com. cement @ 12 ⁷⁵ /sack		701 ²⁵
	5 Bag	Calcium Chloride @ 30 ⁰⁰ /bag		150 ⁰⁰
	250 ⁰⁰	Corrosion seed Halls @ 40 ⁰⁰ /lb.		100 ⁰⁰
	165 sack	60-40-2% PO2 @ 10 ⁷⁵ /sack		1773 ⁷⁵
	8 mile	1 way pump truck mileage @ 4 ⁰⁰ /mile		32 ⁰⁰
		12-24-18		
	25 sack	60-40-2% PO2 @ 10 ⁷⁵ /sack top off		
		4 = B2 Dry cement		268 ⁷⁵
	800 sack	Bulk Charge @ 12 ⁷⁵ /sack		275 ⁰⁰
	78 ⁰⁰	Bulk Truck Miles min chg		150 ⁰⁰
		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 [Signature]

Station Bene Per

Well Owner, Operator or Agent

Remarks Plog out 12:20

NET 30 DAYS

TREATMENT REPORT

Acid Stage No. PS

Date 12-21-84 District Burton F. O. No. _____
 Company Bene Per
 Well Name & No. Gilbert #4
 Location _____ Field _____
 County Law State Ky

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: Ysg/No. _____ Perforated from _____ ft. to _____ ft.
 Tubing: Size & Wt. 2 1/8 Swung at 311' 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. _____
 _____ 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 55 sack Can 165 sack 60-40-28
50 bag cc 250# Halls Gal. _____ lb. _____

Company Representative _____ Treater Yusef Ryl

TIME a.m / p.m.	PRESSURES		Total Fluid Pumped	REMARKS
	Tubing	Casing		
9:00			0	5 1/2" 715' ISA Rig up tie on Casing Start water
9:05			8 Bbl	Break Circ on surface shut down mix Calcium Chloride
9:15			0	Start mixing down hole Can cement G.2 slurry - 4%
:				CC + add 150# Halls @ 3 1/2 BPM rate
:			12 Bbl	55 sack can any wash up down hole 15 Bbl water
9:33			27 Bbl	let fill rest way out
:				pull core out, rig up drilling to end tubing
11:00				run sandline to 450' well starting full water
:				Run tubing to 355'
:			0	Start mixing gain down hole 60-40-28 Poz 3 1/2 CC
:				Add 100# Halls. Cold sack slurry @ 3 1/2 BPM
:			7 Bbl	35 sack any wash up Down Hole 1 1/2 Bbl water
:			82 Bbl	let fill rest way out
:				pull tubing up to 280' start mixing gain down hole
:			0	60-40-28 Poz G.2 sack slurry @ 3 1/2 BPM Immediate Circ
12:30			35 Bbl	180 sacks any good slurry to surface.
:				wash up in bellax.
12:45				Tease down last loc.
:				
:				12-24-84
:				Bulk truck to dry fill Both wells
:				25 sacks total