KOLAR Document ID: 1436007

**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 Tw	p S. R East West					
Address 2:					Feet from						
City:	State:	Zip: +	.		Feet from	East / West Line of Section					
Contact Person:				Footage	s Calculated from Neares	st Outside Section Corner:					
Phone: ( )					NE NW	SE SW					
Type of Well: (Check one)		OG D&A Cathodi		County: Well #:							
ENHR Permit #:	Gas Sto	rage Permit #:									
Is ACO-1 filed? Yes	No If not, is well	log attached? Yes		Date Well Completed: The plugging proposal was approved on:							
Producing Formation(s): List A	ll (If needed attach another	sheet)				(KCC <b>District</b> Agent's Name)					
Depth to	Top: Botto	m: T.D		Plugging	a Commenced:						
Depth to	Top: Botto	m: T.D		00 0							
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	cord (Su	urface, Conductor & Produc	tion)					
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 for	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.



PAGE	CUST NO	YARD #	INVOICE DATE
1 of 1	1009504	1718	01/14/2019
	INVOIC	E NUMBER	
	928	887893	

Pratt

(620) 672-1201

B K3 OIL & GAS

24900 PITKIN RD, SUITE 305

THE WOODLANDS

TX US

77386

O ATTN:

SELIGMAN

LEASE NAME

Leis #15-31

LOCATION

COUNTY

Sumner

STATE

KS

JOB DESCRIPTION T

Cement-New Well Casing/Pi

JOB CONTACT

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				Net - :	30 days	02/13,	/2019
s: 01/11/2019 to	01/11/2019	QTY	U of M	UNIT	PRICE	INVOICE	AMOUNT
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PLEASE REMIT TO:

PO BOX 841903 DALLAS, TX 75284-1903

BASIC ENERGY SERVICES, LP BASIC ENERGY SERVICES, LP 801 CHERRY ST, STE 2100 FORT WORTH, TX 76102

SUB TOTAL

4,492.04

71.10

TAX

INVOICE TOTAL

4,563.14



tym H

### FIELD SERVICE TICKET

1718 17597 A

1	
DATE	TICKET NO

		IG & WIRELINE			NEW D	OLD □ PF	ROD []INJ	□ WDW □ CUS	STOMER DER NO.:		
DATE OF JOB		STRICT PLATE				eis	•.		WELL NO	<u>)/5</u>	#
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become a part of this	contract withou	TRACT CONDITIONS: (The execute this contract as an of and only those terms an the written consent of an	Officer of Date.	0,			SIGNED: X (WELL OWNE	R, OPERATOR, CONT	RACTOR C	OR AGE	۹T)
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SERVICE REPRESENTATIVE	M. Ne	M	LOTTU



# FIELD SERVICE TICKET

1718 1757 A

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SERVICE

REPRESENTATIVE



# TREATMENT REPORT

Customer	() Di	1 4	GAC	Le	ease No.						Date	. \		4hry		J	
Lease L R	ij 5			W	ell#	15-	31							·	Ţ	\ .	
Field Order #	Station	PIAT	T				Casing	[ [	Depth	3900	County	54	MA	~ J	Sta	ite US	
Type Job	2-42	P	149 70	, A	BANL	) <sub>0</sub> 4	•	Form	ation				Legal De	escription 2	ديما	OZ É.	
PIPE	DATA	PE	RFORAT	ING	DATA		FLUID	USED		e <sub>ke</sub>	Т			RESUME			
Casing Size	Tubing Siz	e Shot	s/Ft			Acid	125	- 5M	()	(a)/4	PATE)	PRES	SS	ISIP			
Depth	Depth	Fron	1	То		Pre	Pad			Max				5 Min.			
Volume	Volume	Fron		То		Pad				Min				10 Min.			
Max Press	Max Press	Fron	<b>1</b>	То		Frac	;			Avg				15 Min.			
Well Connectio	n Annulus V	ol. Fron	1	То						HHP Used				Annulus	Press	ure	
Plug Depth	Packer De	Fron		То		Flus				Gas Volum	ne			Total Loa	d		
Customer Rep	resentative	) W 5T1	· (\		Station	Mana	ger W	Start	An		Treat	er 🎮	ATTA	t .			
Service Units	<u>&amp;3353</u>		8498	0	ع٥٩٥	Ç u		1990		19865							
Driver Names	MATTAL			416	シャルマ	~		P	11	/ S							
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PAGE	CUST NO	YARD #	INVOICE DATE
1 of 1	1009504	1718	01/07/2019
	INVOIC	E NUMBER	

92881710

Pratt

(620) 672-1201

B K3 OIL & GAS

24900 PITKIN RD, SUITE 305

THE WOODLANDS

TX US

77386

O ATTN:

SELIGMAN

LEASE NAME

LEIS 15-31

LOCATION

COUNTY

SUMNER

STATE

JOB DESCRIPTION Т

Cement-New Well Casing/Pi

JOB CONTACT

јов #	EQUIPMENT #	PURCHASE	ORDER NO.		TE	RMS	DUE I	DATE
41153806	20920				Net -	30 days	02/06,	/2019
			QTY	U of M	UNIT	PRICE	INVOICE	TRUOMA
For Service Dat	es: 01/04/2019 to	01/04/2019					,	
0041153806								
: .		3						
171817596A Ce 8 5/8" SURFACE	ement-New Well Casing, E CASING	Pi 01/04/2019						
A-Serv Lite			165.00			7.80		1,287.00
60/40 POZ Calcium Chloride			110.00 717.00			7.20 0.63		792.00 451.71
Celloflake			69.00			2.22		153.18
Top Rubber Cem	_		1.00			135.00		135.0
Heavy Equipment	ng (PU, cars one waγ)" t Mileage		100.00 200.00			2.70 4.50		270.0 900.0
Proppant & Bulk	Del. Chgs., per ton mi	ı	1,195.00			1.50		1,792.5
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PLEASE REMIT TO:

SEND OTHER CORRESPONDENCE TO:

PO BOX 841903 PALLAS, TX 75284-1903

BASIC ENERGY SERVICES, LP BASIC ENERGY SERVICES, LP 801 CHERRY ST, STE 2100 FORT WORTH, TX 76102

SUB TOTAL

6,867.39 201.29

TAX

INVOICE TOTAL

7,068.68



#### **FIELD SERVICE TICKET** 1718 17596 A

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DATE OF   _ [	1-19		DISTRICT POTT			NEW P	MELL □ Ł	PROD   INJ	□ WDW	□ CL OF	JSTOMER RDER NO.;	
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AUTHORIZED BY						JOB TYPE:	2 4	2:85/8	SUZKI	14		
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## FIELD SERVICE TICKET

1718 .... A

	PRESSURE PUMI	IPING & WIRELINE					DATE	TICKET NO				
DATE OF JOB		DISTRICT			NEW O	OLD	PROD IN	J 🗍 WDW	□°	USTOMER RDER NO.:		
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CITY		STATE			SERVICE CF	REW /						
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SERVICE REPRESENTATIV	Έ .				IAL AND SER' OMER AND R		ову: √	E 1. 125				



### TREATMENT REPORT

Customer	1-5 Oil	4 60	-	Lease No.					Date \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
Lease	Well # 15 - 31				1	No. 10 May 1	17						
Field-Order	# Statio	n Prati				Casing	Dep	th 506	County	SuMA	27	State [/ )	
Type Job ~	2-43	7 ( 7	SHIF	Aso.			Formation Legal Description 32 W - 02 E						
PIP	NG DATA FLUID US			JSED	TREATMENT RESUME								
Casing Size	ng Size Tubing Size		-t		Acid 16.5					PRESS			
Depth 5   Z		From				Pre Pad 60/40 Poz			1 3 3 3 3 3				
Volume Z.(		From			Pad		40 1 = -	Min 7	D ((	,25 PM	10 Min.		
Max Press	Max Pres					Frac		Avg		15 Min.			
	Connection Annulus Vol.			То				HHP Used		Annulus Pressure		ressure	
Plug Depth	Packer D	. I From	To		Flush 7/3		3	Gas Volume		,	Total Load		
Customer Re	presentative	John R	GAI	Station Manager			Nestown			Treater MATTAL			
Service Units	83353		8498	<u>0. 5985</u>		<u> </u>	WY 744	19860					
Driver Names	N ATTA		MA	MAIRUER			B10						
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