KOLAR Document ID: 1440486

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

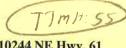
WELL PLUGGING RECORD K.A.R. 82-3-117

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 -								
				Spot Description:								
Address 1:			I .	Sec Twp S. R East We								
				Feet from North / South Line of Section								
City:	State:	Zip: +		Feet from East / West Line of Section								
Contact Person:			Footage	Footages Calculated from Nearest Outside Section Corner:								
Phone: ()				NE NW SE SW								
Water Supply Well ENHR Permit #: Is ACO-1 filed? Yes Producing Formation(s):	Other: Ga S No If not, i	SWD Permit #: as Storage Permit #: swell log attached? Yes [nother sheet) Bottom: T.D.	Lease N Date We The plug	County: Well #: Well #: Date Well Completed: (Date) by: (KCC District Agent's Name)								
De	pth to Top:	Bottom: T.D	""									
De	pth to Top:	Bottom:T.D	——— Plugging	Plugging Completed:								
Show depth and thickness	ss of all water, oil and gas	formations.										
Oil, Gas or V	Water Records		Casing Record (Su	sing Record (Surface, Conductor & Production)								
Formation	Content	Casing	Size	Setting Depth	Pulled Out							
		plugged, indicating where the muter of same depth placed from (but it is a first from the muter of same depth placed from (but it is a first from the muter of same depth placed from the same depth placed from the muter of same depth placed from the same depth placed from t	·		ods used in introducing it into the hole. If							
Plugging Contractor Lice	ense #:		_ Name:	ə:								
Address 1:			_ Address 2:									
City:			State:									
Phone: ()												
Name of Party Responsil	ble for Plugging Fees:											
State of	Cou	unty,	, SS.									
	(Print Na	ma)	E	mployee 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.





FIELD SERVICE TICKET

	. Box 8		
	tt, Kan		
Pho	ne 620-	672-12	201
gr.	10		

1718 17558 A

	PRESSU	JRE PUM	IPING & WIRELINE	-19-	27			DATE	TICKET NO.					
DATE OF 1/4/2019 DISTRICT Products						NEW WELL PROD □INJ □ WDW □ CUSTOMER ORDER NO.:								
CUSTOMER LD Deilling						LEASE GCTY WELL NO. 1-5								
ADDRESS		COUNTY Lane STATE KS												
CITY	STATE	SERVICE CREW Desin, Bless, Cleisner, Deura												
AUTHORIZED E	ЗҮ		1		JOB TYPE: 2 491/PTA									
EQUIPMENT	Γ#	HRS	EQUIPMENT#	HRS	EQU	IPMENT#	HRS	TRUCK CAL	LED	PATE	AM TIP	VIE		
19843								ARRIVED A	T JOB	1/4	AM 10:	45		
11/10 /2-								RATION	1/4	Committee of	00			
5								FINISH OPE	RATION	1/4	AM 3.1			
									1/4	2M 4'				
								MILES FROI) WELL					
products, and/or sulbecome a part of the	pplies inc	ct without	execute this contract as ar of and only those terms an the written consent of an	id conditions apport	pearing on t Energy Ser	the front and back	of this do	cument. No addi	ER, OPERATOR	e terms a	and/or condition	s shall		
ITEM/PRICE REF. NO.		М	ATERIAL, EQUIPMEN	T AND SERV	ICES USE	D	UNIT	QUANTITY	UNIT PRI	CE	\$ AMOUN	T.		
CP103	60,	140	Po2				SK	280			3.360	a		
CC 102	Ce)	10/1	Ske				40	70			259	0		
CC 107	(510	Sum	Chloride	C. S.	6.1.		46	773			759	15		
Fim		oden		US 831	8	1 -00	ES	100		-	160	Q.		
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E113			and the same of th		heren I	by tonnie	Them	1255			3,00	0 0		
CE 203			herse; 2,001	- 3,000	1		Hhr	1			1,800	00		
CE 240	Blen	dins	& mixing Se	cuice C	herse	,	SK	280			392	00		
5003	Seri	rice	Supervisory	first 8	Phise	antoc.	ES	- 1			175	00		
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											k	,		
CHE	MICAL / A	ACID DAT	A:]					SUB TO)TAL	1,867	65		
					SERV	/ICE & EQUIP	MENT	%TAX	ON\$					
	MATE							ERIALS %TAX ON \$						
								Die	GCOUNTED TO	DTAL	7,357	94		
THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY:														



TREATMENT REPORT

Customer D Dolling Lease GCry					Т	Lease No.							1	1,.	1 -	. 1 0)				
					1	Well # 1 - 5						1/4/2019									
Field Order		n 1	769+	d, Ics		-		Casing		Depth	1	County	19	Pne		St	tate KS				
Type Job						Formati							-	Legal D	Description	5-	19-27				
PIPE DATA PERFORATIN					ING	NG DATA FLUID USED					TREATMENT RESUME										
Casing Size	Tubing S	ize	Shots/f	-t		Acid								SS							
Depth 210			Erom		To		Pre	Pad			Max			5 Min.							
Volume	ıme Volume			То		Pad	Pad			Min			10 Min.								
Max Press Max Press		ss	From				Frac	Frac			Avg		15 Min.								
Well Connect	ion Annulus	Annulus Vol.			To		-	N N			HHP Used		1		Annulus Pressure						
Plug Depth	Packer D	epth	From h		То		Flus	Flush Ligger, muz			Gas Volume			Total Load							
Customer Re	presentative	-	From		10	Station	l n Mana	iger T	, MUZ		ternso	Treate	er D	0412	Fig						
Service Units	92911		982	1984.	?	8498	, [19915	36.0	wes	termso		U	967	France	1.0					
Driver Names	Deca	1310		Brers		Dan		Deura				_					 				
Time	Casing	T	ubing	Clerca Bbls.				Rate					Condi	20 1 22	!						
10:4500	Pressure		essure	DDIS.	T un	riped		iate	On Location Scient Meeting												
i.								280 SK 60140 POZ 496601													
7									13,78 ppg, 1,43 Veila, 6,92wager												
												75 1		C/ 60 c	124	100					
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