KOLAR Document ID: 1442310

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				
Address 2:				Feet from North / South Line of Section Feet from East / West Line of Section					
City:	State:	Zip: +	.						
Contact Person:				Footages Calculated from Nearest Outside Section Corner:					
Phone: ()					NE NW	SE SW			
Type of Well: (Check one)		OG D&A Cathodic		County: Well #: Date Well Completed: The plugging proposal was approved on: (Date)					
ENHR Permit #:	Gas Sto	rage Permit #:							
Is ACO-1 filed? Yes	No If not, is well	log attached? Yes							
Producing Formation(s): List A	ll (If needed attach another	sheet)				(KCC District Agent's Name)			
Depth to	Top: Botto	m: T.D		Plugging Commenced:					
Depth to	Top: Botto	m: T.D		Plugging Completed:					
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	Oil, Gas or Water Records				Casing Record (Surface, Conductor & Production)				
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:	e:						
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			
			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.



TREATMENT REPORT

Customer Shelby Resources			Lease I	No.		Date	Date				
Lease Borcie Unit				1-5		-	12/12/2018				
Field Order #	Station	Pre	++1105	Casing	Depth	County	Howa -e	State /			
Type Job	242	197	B		Formation			scription 25-215-16			
PIPE DATA PERFORATING DAT				A FLUID U	FLUID USED		TREATMENT RESUME				
Casing Size	Tubing Size	Shots/F	t	Acid		RATE PRESS		ISIP			
Depth 388	Depth	From	То	Pre Pad		Max	300 30 1000000 400	5 Min.			
Volume 55	Volume	From	То	Pad		Min		10 Min.			
Max Press	Max Press	From	То	To Frac		Avg		15 Min.			
Well Connectio	Annulus Vo	I. From	То			HHP Used		Annulus Pressure			
Plug Depth	Packer Dep	oth From	То	Flush 618de	r, muz	Gas Volume		Total Load			
Customer Rep	resentative /		551095 Sta	tion Manager Town		Treat	er D95,7	Franklin			
Service Units	92911	78982		959 21010							
Driver Names	Derin	Breff	Brett DS	Gign Davian				2			
// Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log						
10:30pm		iev.	II I A		on Location Issley meeting						
Sask .					22051 60/40 POZ 40/0Ge, 13,78 pps, 1,43 yeilt, 6,92 Waley						
+10.7			8 7	%) 2							
-	nov ² e			15		1110 821 00					
			* 8 e		3887 -	50 sk 573	3	1 1306 76			
3:00 mm	400	- I	8	3 4		Pump & bhis ware					
V	400	13		4	mix	MIX SOSK CEMENS					
8	400		3	4	Pispic	ce 3 bb/s w	19 10,				
	you	- de-siesse	46	4	46 61	ors muz					
			ev a treating , a sales	e before a series of the							
			17	-	990'		10				
	200		21	21 4		Pump 21 bbls Waler					
	200		13	4	mix	SOSK Cer	nena				
8	200		7	4	Pisple	are 7661s	Water				
			- 1								
				, A	4aci			7747			
	Poo	20		3/ 4		Pump 3bbis warer					
	200		1/3	14		SU SICCEM					
5 20	200		-11	4	Displace 1 pp1 max			" DHI 509 19			
	100		5	3		200K 2		191 -			
	90	2	7	3		2954 Z	15/6				
	50		5	3	ml.			(620) 672 F292			