KOLAR Document ID: 1446352

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
City: State: Zip: +	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	NE NW SE SW
Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic Water Supply Well Other: SWD Permit #: SWD Permit #: SWD Permit #: ENHR Permit #: Gas Storage Permit #: Gas Storage Permit #: SWD Permit #: SWD 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.	County: Well #: Well #: Date Well Completed: The plugging proposal was approved on: (Date) by: (KCC District Agent's Name) Plugging Commenced: Plugging Completed:
Depth to Top: Bottom: T.D	

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.						
(Print Name)	Employee of Operator or Operator on above-described we						

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



Page: 1

COPELAND

Acid & Cement

(620) 463-5161 FAX (620) 463-2104

> 1.1

30

BURRTON, KS 🍐 GREAT BEND, KS (620) 793-3366 FAX (620) 793-3536

INVOICE	NUM	BER:
C46659-	IN	

LEASE: HODSON A #5

BILL TO: CARMEN SCHMITT, INC. **PO BOX 47** GREAT BEND, KS 67530

DATE	ORDER	SALESMAN ORDER DATE PURCHAS			ORDER	SPECIAL IN	INSTRUCTIONS		
01/21/2019	C46659	01/09/2019 HODSON A #			5	N	ET 30		
QUANTITY .	U/M	ITEM NO./DI	ESCRIPTION		D/C	PRICE	EXTENSION		
35.00	MI	MILEAGE CEME			20.00	4.00	, 112.00		
1.00	EA	PUMP CHARGE	-PTA		20.00	650.00	520.00		
320.00	SK	60/40,POZ MIX 2	2% GEL		20.00	10,75	2,752.00		
6.00	sк	2% ADDITIONAL	GEL		20.00	22.00	105.60		
326.00	EA	BULK CHARGE			20.00	1.25	326.00		
502.04	м	BULK TRUCK -	TON MILES		20.00	1.10	441.80		
ал - <u>,</u> , <u>, , , , , , , , , , , , , , , , ,</u>		1231 Uell (eme	10/43 50.0005 Alle NF Fo Plug						
REMIT TO: P.O. BOX 438 HAYSVILLE, KS 67060		COP FUEL SURCHARGE IS NOT TAXABLE AND IS ADDED TO MILEAGE, PUMP AND OR DELIVERY CHARGES ONLY.			ROOCO	4,257.40 298.02 4,555.42			
RECEIVED BY		NET 30 DAYS			Invoice Total: 4,55				

1 A. P

POST OFFICE BOX 438

HAYSVILLE, KS 67060

(316) 524-1225

(316) 524-1027 FAX

There will be a charge of 1.5% "per month" (18% annual rate) on all accounts over 30 days past due.

Copeland Acid & Cement is a subeldiary of Gressel Oll Field Service

Gressel Oil Field Service reserves a security interest in the goods sold until the same are paid for in full and reserve all the rights of a secured party under the Uniform Commercial Code.

Acid & Cement	
Acid & Cement 🛣	

FIELD ORDER Nº C 46659

		BOX 438	 HAYSVILL 316-524 	.E, KANSAS (-1 225	67060	1-9	15
IS AUTHORIZED BY:		Larme		hm:H	DATE_ Inc		20//
Address			(NAME OF C	CUSTOMER)	- • •	State	
To Treat Well As Follows: Lease	Hudson	A	Well No.	H5		Customer Order No.	
Sec. Twp. Range			County _	Ro	oks	State	165

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.

By.

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

THIS ORDER MUST BE SIGNED BEFORE WORK IS COMMENCED

Remarks

CODEQUANTITYDESCRIPTIONUNIT COSTAMOUNT235Milenge Pump Truck $1/40^{-22}$ 2Pump Charge - PTA 650^{-2} 2320' Sacks 60140 2% 6cl 10^{-25} 26Additonal 2^{-6} 6cl26Additonal 2^{-6} 6cl2932.0026Additonal29 32.00 29 32.00 29 32.00 29 32.00 3929293929392939292939292929292929393949495959294949595949595959494959595949595949595949595			Well Owner or Operator	Agent	
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
2 Purp Charge - PTA 650° 2 320 Sacks 60140 2% 6el 10 ²⁵ 3440 2 6 Additoral 2% Gel 22° 132° 2 6 Additoral 2% Gel 27° 132° 2 826 Bulk Charge 14.3447 × 35 p. les: 502.047A 1° 552°4	2	35	Mileage Pamp Truck	4 <u>ce</u>	14000
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$					
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	2		Purp Charge - PTA		65000
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$				- 20	
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	2	320	Sacks 60140 2% bel	10 -	34409
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	<i>b</i>		A 1 1 1	7	10-00
2 Bulk Truck Miles 14.3447 × 35 miles: 502.0471 1 55224	2	6	Holditonal L'o Gel	62-	132 -
2 Bulk Truck Miles 14.3447 × 35 miles: 502.0471 1 55224					
2 Bulk Truck Miles 14.3447 × 35 miles: 502.0471 1 55224					
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2 Bulk Truck Miles 14.3447 × 35 miles: 502.0471 1 55224					
DUIX HUCK WHES I TIST I I SPATES SOFTITI I SS 2	2	386			4075
Process License Fee onGallons	2		Bulk Truck Miles 14.3447 × 35 miles = 502.0474	15	55224
			Process License Fee onGallons		
TOTAL BILLING 204 5321 24			TOTAL BILLING	20%	532124

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.

L 00 Copeland Representative, <u>6</u>B Station Weil Owner, Operator or Acent

NET 30 DAYS



i.

TREATMENT REPORT

Acid & Cement 🗟							Acid Stage No	»		
					Type Treatment:	Amt.	Type Fluid	Sand Size	Pound	ds of Sand
Date	1/9/2019 D	District <u>GB</u>	F.O. N	lo. <u>46659</u>	Bkdown					
Company	CARMEN SCH	MITTINC				Bbi./Gal.				
	e & No. HODSO					8bl./Gal.				
			Field		{		- <u></u>			
County	ROOKS		State KS		Flush	Bbl./Gal.				
					Treated from		ft. to		No. ft	0
Casing:		Type & Wt.		Set atft.			ft. to		No. ft	0
Formation	:		Perf	to	from	··· <u>-</u> · ··· -	ft. to	h.	No. ft.	0
Formation	:		Perf	to	Actual Volume of Oi	il / Water to Load Ho	ole:			861./Gal.
Formation				to						
Liner: Si			Top at ft.		Pump Trucks. N				Twin	
					Auxiliary Equipment		36	57-308T		
Tubing:			Swung at		Personnet GREG	VIIĶE				-
	Perforated fr	rom	ft. to	it.	Auxiliary Tools					
Onen Mala	fire	TD	4 8	D km Št	Plugging or Sealing P	Materials: Type				(b.
Open Hole	Size	1.0.	<u>ft.</u> P.	8. toft.				Gais.		
Company	Representative		CURTIS HITSC	HNAANN	Treater		GREG CI	IRTIS		
TIME		SURES								
a.m./p.m.		Casing	Total Fluid Pumped			REMARKS				
8:00				ON LOCATION						
				CIRCULATE CEM	ENT FROM 8	327' TO SUR	FACE. TOOI	< 100 SKS	60/40	4% GEI
					·					
				PULL TUBING. T	E ON TO 5 1	2 AND PUM	ИР 200 SKS	60/40 4%	GEL	
		<u> </u>		TIE ON TO 8 5/8	. PUMPED 20	O SKS. PRES	SURED UP 1	O 300 PSI	. SHUI	ΓΙΝ
		<u> </u>								
12:00				JOB COMPLETE		_				
				THANK YOU!!!				<u> </u>		
-										
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