KOLAR Document ID: 1457211

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 #: Lease Name: Well #: Date Well Completed: The plugging proposal was approved on: (Date) by: (KCC District Agent's Name) Plugging Commenced: Plugging Commenced:
Depth to Top: Bottom: T.D	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.
(Print Name)	Employee 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.

Submitted Electronically

Acid & Cement		FIELD ORDER Nº C 46671
Acid & Cement	BOX 438 • HAYSVILLE, KANSAS 67 316-524-1225	DATE 2-27 20 19
	(NAME OF CUSTOMER) City	State
Address To Treat Well As Follows: Lease Varek	Data Well No. A H	Customer Order No
Sec. Twp. Range	County Bills in	JorthState

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 operator.

Oreg

81

THIS ORDER MUST BE SIGNED BEFORE WORK IS COMMENCED

BEFORE WORK	S COMMENCED	Well Owner or Operator	Agent	
CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
2	40	Mileage Prange Truck	COST Y ^{ee}	160 00
				Contraction of the second s
2		Pump Charge- PTA		65000
				6 50;
2	50	Sades Common Cement	1225	63750
				11 1 2 35
2	155	Sacks 60140 250 601	1025	1666 25
			0.200	1/00
2	3	Additional 2% Gel	2200	66-
			2200	110 00
2	5	Get on Side	2200	110 -
			125	21,25
2	213	Bulk Charge	1	26625
2		Bulk Truck Miles 9.57 TX Yamiles = 382.80 TA	12	JL1.00
		Process License Fee onGallons		20000
		TOTAL BILLING	159,	39.77.08

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

Station

Well Owner, Operator or Agent

Remarks_

NET 30 DAYS



TREATMENT REPORT

Acid	& Cemen							Acid Stag	ge No.	
					Type Treatment:	Amt.	Type F	luid Sand S	ize Pou	nds of Sand
			F.O.	No. 46671	Bkdown					ias or saila
	DARRAH OIL					Bbl./Gal.				
	ne & No. VACEK	A INJ #5				Bbl./Gal.				
Location Field						Bbl./Gal.				
County	ELLSWORTH		State KS		Flush	Bbl./Gal.				
	5.44				Treated from			ft.	No. ft.	0
Casing:		Type & Wt.		Set atft.			ft. to	ft.	No. ft.	0
Formation				to	from			ft.	No. ft.	0
Formation	:		Perf.		Actual Volume of Oil / W	Vater to Load Hol	e:			Bbl./Gal.
Formation			Perf	to						
Liner: Si	ize Type 8	Wt.	Top at ft.	Bottom atft.	Pump Trucks. No. U	Jsed: Std.	320	Sp	Twin	
Tubles	Cemented: Yes	Perforated f	rom	ft. toft.	Auxiliary Equipment			367-310T		
rubing:	Perforated f		Swung at		Personnel					silved v
	Periorateu n	rom	ft. to		Auxiliary Tools					
Onen Unio	Cine .				Plugging or Sealing Mate	erials: Type				
Open Hole	Size	1.D.	ft. P	.B. to ft.				G	als.	lb.
	Representative		MIKE KE	LSO	Treater		GRE	G CURTIS		
TIME a.m./p.m.	PRES	SURES Casing	- Total Fluid Pumped			REMARKS				
9:30	Tubing	Casing		ON LOCATION						
9.30				ONLOCATION						
				WAIT ON BACKLY		UITEC				
				WAIT ON BACKH	DE FOR 90 MIN	NUTES				
11.50						1011 001 0			**************************************	
11:50				PUMP 5 GEL AND	50 SKS COMIN	10N 3% C	C@12	50'		
1.15					12001					
1:15				TAG CEMENT @ :	1200					
					140 404 651 0	1000				
				PUMP 50 SKS 60/	40 4% GEL @ .	1000.				
				CIRCULATE CEME	NT 350° TO SU	RFACE. TO	OK 105	5 SKS		
					1					
				HOLE STAYED FUI	L					
3:30										
5:30				JOB COMPLETE						
				THANK YOU!!!			****			
							-			
							6			
					-	-				
				s.						

Mike's Testing & Salvage Inc.

V51335

Invoice

DBA Kelso Well Service P.O. Box 467 Chase, KS 67524

Bill To

.

John J. Darrah, Jr. P.O. Box 2786 Wichita, KS 67201-2786

Date	Invoice #
3/5/2019	16721

83900/100

Qty
 34 Hours Rig Time Casing Cutter 5 Sacks Cement 5 Sacks Cement 2-22-19 Drove to location, set 1 packer stuck, worked t up, pulled out 104 jts. packer. Sanded off box 8 Hours 2-25-19 Drove to location, dur hooked up water truck 300#, leaking off, goin floor, backhoe dug cel 14" of stretch. 9 Hour 2-26-19 Drove to location, cut came loose @1510', p 2-27-19 Cement truck got stuck Hooked up cementers, 3% cc @1250'. pulled tagged cement @1200 @1000', pulled casing gel to surface, laid rest Plugging Complete. 1 KCC On Location: V

Page 1

Mike's Testing & Salvage Inc.

DBA Kelso Well Service P.O. Box 467 Chase, KS 67524

Invoice

Date	Invoice #
3/5/2019	16721

Bill To

John J. Darrah, Jr. P.O. Box 2786 Wichita, KS 67201-2786

		P.O. No.	County	Lease
		Teo - Rig #3	Ellsworth	Vacek A-5 Inject.
Qty	Description		Rate	Amount
	Sales Tax		7.509	% 574.69
			Total	\$8,237.19