

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

Form CP-4
March 2009

Type or Print on this Form
Form must be Signed
All blanks must be Filled

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

OPERATOR: License #: _____
 Name: _____
 Address 1: _____
 Address 2: _____
 City: _____ State: _____ Zip: _____ + _____
 Contact Person: _____
 Phone: (_____) _____
 Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic
 Water Supply Well Other: _____ SWD Permit #: _____
 ENHR Permit #: _____ Gas Storage 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. _____
 _____ Depth to Top: _____ Bottom: _____ T.D. _____
 _____ Depth to Top: _____ Bottom: _____ T.D. _____

API No. 15 - _____
 Spot Description: _____
 _____ - _____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West
 _____ Feet from North / South Line of Section
 _____ Feet from East / West Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: _____
 Lease Name: _____ Well #: _____
 Date Well Completed: _____
 The plugging proposal was approved on: _____ (Date)
 by: _____ (KCC District Agent's Name)
 Plugging Commenced: _____
 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.

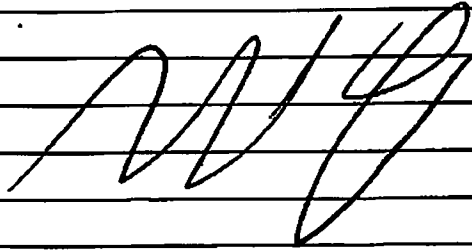
Plugging Contractor License #: _____ Name: _____
 Address 1: _____ Address 2: _____
 City: _____ State: _____ Zip: _____ + _____
 Phone: (_____) _____
 Name of Party Responsible for Plugging Fees: _____
 State of _____ County, _____, ss.
 _____ Employee of Operator or Operator on above-described well,
 (Print Name)

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

Elite WIRELINE

PRICES SHOWN ARE ESTIMATES AND SUBJECT TO CHANGE BY ACCOUNTING DEPARTMENT DISCOUNTS DO NOT APPLY TO CHECKS RETURNED INSUFFICIENT FUNDS

AMOUNT	DESCRIPTION
	Mast
	Set a 5.5 CIBP @ 2990.
	Dumped 2 sacks of cement on top of plug
	Shot 3 square holes @ 300
	w/ 3.125" slick guns & 2 1/2 jet charges
	
	Total \$ 2975

(SIGNATURE HEREIN IS ACCEPTANCE OF TERMS AND CONDITIONS PRINTED ON REVERSE SIDE)
 I certify that the services listed below have been performed to my satisfaction, that all zones performed were designated by me and all depth measurements checked and approved.
 I have read and understand terms and conditions as outlined on reverse of this ticket.
 Customer or Authorized Representative Signature: _____

WELL BORE INFORMATION

Well Level: 800	Type Fluid: Mch	Top Of Cement: 1/3	Depth: 35/1
Field Level: 800	Casing Depth:	Casing Weight:	Casing Size: 5.5"

WELL INFORMATION

Well Name and Number: Berry #2
 County: Cowley
 Legal Description: All SE NE NW
 4402 1st & 31st #2
 4-355-SE

CUSTOMER INFORMATION

Customer Name: Endeavor Energy Resources
 Invoicing Address:
 Contact: Gus Myers
 Phone:

FIELD SERVICE ORDER NO.

(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: *Dr. Braid*

SERVICE REPRESENTATIVE

TOTAL	43	4986
SUB TOTAL	-	9638
SERVICE & EQUIPMENT	% TAX ON \$	
MATERIALS	% TAX ON \$	

CHEMICAL / ACID DATA:			

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
RE 104	Pomeron Cement	SK	40		1700
CC 132	60:40:PO2	SX	130		4030
CC 109	Calcium chloride	lb	113		113
CC 200	Cement 602	lb	224		112
RE 101	Light Vehicle Mileage	MI	100		500
RE 102	Heavy Vehicle Mileage	MI	200		1600
CE 240	Blending and Mixing Charge	SX	170		238
RE 143	Supervisor Charge	ea.	1		75
RE 144	Driver Charge	ea.	2		70
CC 2	Depth Charge 1001-2000'	HI	1		1500

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered). The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP.

DATE OF JOB	4-17-19	DISTRICT	Pratt, KS #1218
CUSTOMER	Eden Energy Resources LP	LEASE	Berry
ADDRESS	County	STATE	Kansas
CITY		SERVICE CREW	Paul B King (Gen'l D)
AUTHORIZED BY		JOB TYPE:	Plus to Abandon 2-41
EQUIPMENT#	27463	HRS	2
EQUIPMENT#	19860	HRS	5
ARRIVED AT JOB	8:30 PM	TRUCK CALLED	4-17-19 5:30 PM
START OPERATION	9:00 AM	DATE	4-17-19
FINISH OPERATION	1:00 AM	TIME	5:30 PM
RELEASED	1:00 AM		
MILES FROM STATION TO WELL			

BASIC ENERGY SERVICES
 10244 NE Hwy. 61
 P.O. Box 8613
 Pratt, Kansas 67124
 Phone 620-672-1201

PRESSURE PUMPING & WIRELINE
 T.M.H. 42

FIELD SERVICE TICKET
 1718 17901 A

