

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 #: _____

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.

(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

QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Home Office P.O. Box 32 Russell, KS 67665

No. 1503

Phone 785-483-1071

Cell 785-324-1041

| Date | Sec. | Twp. | Range | County | State | On Location | Finish |
|---------|------|------|-------|--------|-------|-------------|--------|
| 2-10-19 | 4 | 20 | 25 | Neosho | KS | | 9:00pm |

| Lease | Well No. | Owner |
|----------|----------|------------------------------------|
| Schlegel | 1-4 | To Quality Oilwell Cementing, Inc. |

| Contractor | You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed. | |
|------------|--|--|
| S. T. P. | | |

| Type Job | Charge To |
|------------|-----------------------|
| Rammy Plug | Cholla Production LLC |

| Hole Size | T.D. | Depth | Street |
|-----------|------|-------|--------|
| 7 7/8 | 4520 | | |

| Csg. | Depth | City | State |
|------|-------|------|-------|
| | | | |

| Tbg. Size | Depth | The above was done to satisfaction and supervision of owner agent or contractor. | |
|-----------|-------|--|--|
| | | | |

| Tool | Depth | Cement Amount Ordered |
|------|-------|------------------------|
| | | 230 60/40 4/16 1/4" 10 |

| Cement Left in Csg. | Shoe Joint | |
|---------------------|------------|--|
| | | |

| Meas Line | Displace | Common |
|-----------|----------|--------|
| | | |

| EQUIPMENT | | |
|------------|--------------|----------|
| Pumptrk 20 | No. Cementer | Poz. Mix |

| | | |
|---------|------------|------|
| | Helper | |
| Bulktrk | No. Driver | Gel. |

| | | |
|------------|------------|---------|
| | Driver | |
| Bulktrk 14 | No. Driver | Calcium |

| | | |
|--|--------|-------|
| | Driver | |
| | Driver | Hulls |

| JOB SERVICES & REMARKS | | |
|------------------------|--|------|
| Remarks: | | Salt |

| | | |
|---------------|--|----------|
| Rat Hole 300K | | Flowseal |
| Mouse Hole | | Kol-Seal |

| | | |
|--------------|--|-------------------------|
| Centralizers | | Mud CLR 48 |
| Baskets | | CFL-117 or CD110 CAF 38 |

| | | |
|--------------------|--|----------|
| D/V or Port Collar | | Sand |
| 15' 50SK 1720 | | Handling |

| | | |
|--------------|--|---------|
| 20' 80SK 850 | | Mileage |
| 3' 50SK 300 | | |

| | | |
|-------------|--|-----------------|
| 4' 20SK 100 | | |
| | | FLOAT EQUIPMENT |

| | | |
|--|--|-------------|
| | | Guide Shoe |
| | | Centralizer |

| | | |
|--|--|-------------|
| | | Baskets |
| | | AFU Inserts |

| | | |
|--|--|------------|
| | | Float Shoe |
| | | Latch Down |

| | | |
|--|--|----------------|
| | | |
| | | Pumptrk Charge |

| | | |
|--|--|---------|
| | | Mileage |
| | | |

| | | |
|--|--|----------|
| | | Tax |
| | | Discount |

| | | |
|--|--|--------------|
| | | Total Charge |
| | | |

| | |
|-------------|--|
| X Signature | |
| | |

QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025

Home Office P.O. Box 32 Russell, KS 67665

No. 1887

Cell 785-324-1041

| | | | | | | | | | | | | | | | |
|---------------------------|--------|------|---|------|----|-------|----|--|------|-------|----|-------------|--|--------|--|
| Date | 7-2-19 | Sec. | 4 | Twp. | 20 | Range | 25 | County | Ness | State | KS | On Location | | Finish | |
| Lease | | | | | | | | Location | | | | | | | |
| Schlegel | | | | | | | | Fair rd J 65 to 60rd 1W | | | | | | | |
| Well No. | | | | | | | | Owner | | | | | | | |
| 1-4 | | | | | | | | To: Quality Oilwell Cementing, Inc. | | | | | | | |
| Contractor | | | | | | | | You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed. | | | | | | | |
| STP DRILLING | | | | | | | | | | | | | | | |
| Type Job | | | | | | | | Charge To | | | | | | | |
| Surface | | | | | | | | Cholla Energy | | | | | | | |
| Hole Size | | | | | | | | T.D. | | | | | | | |
| 12 1/4 | | | | | | | | 246' | | | | | | | |
| Csg. | | | | | | | | Depth | | | | | | | |
| 8 5/8 | | | | | | | | 265.65' | | | | | | | |
| Tbg. Size | | | | | | | | Depth | | | | | | | |
| | | | | | | | | City | | | | | | | |
| Tool | | | | | | | | State | | | | | | | |
| | | | | | | | | | | | | | | | |
| Cement Left in Csg. | | | | | | | | The above was done to satisfaction and supervision of owner agent or contractor. | | | | | | | |
| 15' | | | | | | | | Cement Amount Ordered | | | | | | | |
| Shoe Joint | | | | | | | | 150sk 8 1/2 31. + 21. | | | | | | | |
| Meas Line | | | | | | | | Displace | | | | | | | |
| 16 1/2 1120 | | | | | | | | | | | | | | | |
| EQUIPMENT | | | | | | | | | | | | | | | |
| Common | | | | | | | | | | | | | | | |
| Pumptrk 20 No. Cementer | | | | | | | | | | | | | | | |
| 10AY | | | | | | | | | | | | | | | |
| Bulktrk 4 No. Driver | | | | | | | | | | | | | | | |
| Mike | | | | | | | | | | | | | | | |
| Bulktrk No. Driver | | | | | | | | | | | | | | | |
| Jack | | | | | | | | | | | | | | | |
| JOB SERVICES & REMARKS | | | | | | | | | | | | | | | |
| Remarks: | | | | | | | | | | | | | | | |
| Rat Hole | | | | | | | | | | | | | | | |
| USED: 150SK 8 1/2 | | | | | | | | | | | | | | | |
| Mouse Hole | | | | | | | | | | | | | | | |
| + 31. 21. | | | | | | | | | | | | | | | |
| Centralizers | | | | | | | | | | | | | | | |
| Baskets | | | | | | | | | | | | | | | |
| D/V or Port Collar | | | | | | | | | | | | | | | |
| 8 5/8 Set @ 265.65' | | | | | | | | | | | | | | | |
| Grain Circulation | | | | | | | | | | | | | | | |
| Mixed 150SK 8 1/2 31. 21. | | | | | | | | | | | | | | | |
| Displaced cement. | | | | | | | | | | | | | | | |
| Cement to Surface. | | | | | | | | | | | | | | | |
| Quality Oilwell Cementing | | | | | | | | | | | | | | | |
| Pumptrk Charge | | | | | | | | | | | | | | | |
| Mileage | | | | | | | | | | | | | | | |
| Tax | | | | | | | | | | | | | | | |
| Discount | | | | | | | | | | | | | | | |
| Total Charge | | | | | | | | | | | | | | | |
| Signature | | | | | | | | | | | | | | | |

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
July 2014
Type or Print on this Form
Form must be Signed
All blanks must be Filled

OPERATOR: License #: 31819
Name: Cholla Production, LLC
Address 1: 10390 Bradford Rd, Suite 201
Address 2: _____
City: Littleton State: CO Zip: 80127 + _____
Contact Person: Emily Hundley-Goff
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 - 15-135-26054
Spot Description: _____
SW SE NE NE Sec. 4 Twp. 20 S. R. 25 ☐ East ☒ West
1,080 Feet from ☒ North / ☐ South Line of Section
510 Feet from ☒ East / ☐ West Line of Section
Footages Calculated from Nearest Outside Section Corner:
☒ NE ☐ NW ☐ SE ☐ SW
County: Ness
Lease Name: Schlegel Well #: 1-4
Date Well Completed: 7/11/19
The plugging proposal was approved on: 7/5/19 (Date)
by: Scott Alberg (KCC District Agent's Name)
Plugging Commenced: 7/10/19 @ 6:45 PM
Plugging Completed: 7/10/19 @ 9:00 PM

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 |
| | | Surface | 12 1/4 | 266 | None |
| | | | | | |
| | | | | | |
| | | | | | |

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.

Commenced cementing 7/10/19 @ 6:45 PM, 1st plug: 50sx @ 1720', 2nd plug: 80sx @ 850', 3rd plug: 50sx @ 300', 4th plug: 20sx @ 60', 30sx in the rathole. Total of 230sx of 60/40 Poz - 4% Gel - 1/4 # per sx flo-seal. Drilling mud was placed between all stages. Plugging complete 7/10/19, by Quality Cementing.

Plugging Contractor License #: 35410 Name: STP Drilling, LLC
Address 1: 2777 US Hwy 24 Address 2: _____
City: Hill City State: KS Zip: 67642 + _____
Phone: (785) 421-2990
Name of Party Responsible for Plugging Fees: Cholla Production, LLC
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.

Signature: _____