

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

GLOBAL OIL FIELD SERVICES, LLC

24 S. Lincoln
 RUSSELL, KS 67665

Invoice

Date	Invoice #
4/12/2019	0013350

Bill To
BACH OIL PO BOX 723 ALMA, NE 68920

P.O. No.	Terms	Project
DRYDEN#1	Due on receipt	

Quantity	Description	Rate	Amount
240	60/40 POZMIX CEMENT	13.75	3,300.00
8	BENTONITE GEL	30.00	240.00
10	COTTON SEED HULLS	31.50	315.00
248	HANDLING	1.90	471.20
	BULK MILEAGE	750.00	750.00
1	TRI-PLEX PUMP CHARGE FOR PLUG	850.00	850.00
35	HEAVY EQUIPMENT. ONE WAY	6.50	227.50
35	LMV- ONE WAY	2.75	96.25
	15% DISCOUNT IF PAID WITHIN 15 DAYS OF INVOICE		
	ROOKS CO SALES TAX	7.00%	0.00

5312-44

Thank you for your business.		Total	\$6,249.95
Phone #	Fax #		
785-445-3525	785-445-3526		

GLOBAL OIL FIELD SERVICES, LLC

0013350

REMIT TO 24 S. Lincoln
Russell, KS 67665

SERVICE POINT: Russell

DATE <u>4-4-19</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
LEASE <u>Drillen</u>	WELL# <u>1</u>	LOCATION <u>Webster-Dam W109R</u>			COUNTY <u>ROCKY</u>	STATE <u>KS</u>	
OLD OR NEW (CIRCLE ONE)			<u>3N win</u>				

CONTRACTOR <u>Professional</u>	OWNER
TYPE OF JOB <u>Plug</u>	
HOLE SIZE _____ T.D.	
CASING SIZE <u>4 1/2</u> DEPTH _____	
TUBING SIZE <u>2 3/8</u> DEPTH _____	
DRILL PIPE _____ DEPTH _____	
TOOL _____ DEPTH _____	
PRES. MAX _____ MINIMUM _____	
MEAS. LINE _____ SHOE JOINT _____	
CEMENT LEFT IN CSG. _____	
PERFS _____	
DISPLACEMENT _____	
<u>3000</u> EQUIPMENT	
PUMP TRUCK # _____ CEMENTER <u>Bill</u>	
HELPER <u>Jason</u>	
BULK TRUCK # _____ DRIVER <u>Tom</u>	
BULK TRUCK # _____ DRIVER <u>Cody</u>	

CEMENT AMOUNT ORDERED <u>500' H-11</u>	
<u>240 lbs 60/40-4</u>	
COMMON _____ @ _____	
POZMIX _____ @ _____	
GEL _____ @ _____	
CHLORIDE _____ @ _____	
ASC _____ @ _____	
_____ @ _____	
_____ @ _____	
_____ @ _____	
_____ @ _____	
_____ @ _____	
_____ @ _____	
HANDLING _____ @ _____	
MILEAGE _____ @ _____	
TOTAL _____	

REMARKS:

Tubing e 3350 Spot 80' 200' H-11
Tubing e 2350 Spot 80' 300' H-11
Tubing C 1150 CIRC. Cent 70' 4
Top of FS 10' ch
Backside 300 #

SERVICE

DEPTH OF JOB _____	
PUMP TRUCK CHARGE _____	
EXTRA FOOTAGE _____ @ _____	
MILEAGE _____ @ _____	
MANIFOLD _____ @ _____	
_____ @ _____	
_____ @ _____	
TOTAL _____	

CHARGE TO: Bach Oil Inc
 STREET _____
 CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

_____ @ _____	
_____ @ _____	
_____ @ _____	
_____ @ _____	
_____ @ _____	
TOTAL _____	

Global Oil Field Services, LLC
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME _____
 SIGNATURE Dale Perland

SALES TAX (If Any) _____
 TOTAL CHARGES _____
 DISCOUNT _____ IF PAID IN 30 DAYS