

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.
 _____ 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

Speedy Well Service LLC

402 W. Elm
Sedan, KS 67361

Invoice

Date	Invoice #
8/15/2019	2378

Bill To
Cyclone Petroleum INC. 1030 W. Main Jenks, OK 74037

Ship To

P.O. Number	Terms	Rep	Ship	Via	F.O.B.	Project
	Due on receipt		8/15/2019			

Quantity	Item Code	Description
	CEMENT	Wall #10 plugged 300ft to surface 60 sacks, gel spacer, cut well off 3ft below surface
4	GEL	
4	Spool truck and Ce...	Spool truck and Cement Pump
20	labor	
	CEMENT	haul truck
	Misc.	cut off saw and torch
10	CEMENT	Came back topped well off fell back 90ft
1	Spool truck and Ce...	Spool truck and Cement Pump
5	labor	
		Disgard first ticket 70 total sacks

We appreciate your prompt payment. **To**

1013 240th AVENUE • HAYS, KANSAS 67601 • 785-621-2135

Date 8-14-2019

CHARGE TO: Cyclone Petroleum, Inc
 ADDRESS 1030 W Main St, Jenks, OK 74037
 R/A SOURCE NO. _____ CUSTOMER ORDER NO. OW
 LEASE AND WELL NO. Wall #10 FIELD _____
 NEAREST TOWN Ark City COUNTY Cowley STATE Kansas
 SPOT LOCATION 1320 FWL + 660' FEL SEC. 7 TWP. 35S RANGE 3E
 ZERO KB CASING SIZE 5 1/2 WEIGHT _____
 CUSTOMER'S T.D. 3400 LOG-TECH TD _____ FLUID LEVEL 800'
 ENGINEER S. Chesney OPERATOR J. Smith

PERFORATING				
Description	No. Shots	Depth		
		From	To	
Perf Perf 3 1/8 HEC 1x4	4	300	301	

DEPTH AND OPERATIONS CHARGES				
Description	Depth		Total No. Ft.	Price Per Ft.
	From	To		
Setting Charge	0	3090		
5 1/2 CIBP	3090			
5 Sx Cement Bailer	0	3090		

MISCELLANEOUS	
Description	Quantity
Service Charge	
TJ. T902 Portable Mast	
A.O.L.	
S.J.	
F.J. T.W.T.	

PRICES SUBJECT TO CORRECTION BY BILLING DEPARTMENT

RECEIVED THE ABOVE SERVICES ACCORDING TO THE TERMS AND CONDITIONS SPECIFIED ON THE REVERSE SIDE TO WHICH WE HEREBY AGREE.

..... Sub Tot

 Cowley Co. 6.5% T

 Total

Customer Signature _____ Date _____