KOLAR Document ID: 1471358

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 #:			APIN	No. 15	
Name:					
Address 1:				Sec	
				Feet fron	
City:	State	:		Feet fron	
Contact Person:			Foota	ages Calculated from Nea	rest Outside Section Corner:
Phone: ()				NE NW	SE SW
Water Supply Well	Other:	ell OG D&A Ca SWD Permit #: as Storage Permit #: is well log attached? Yes	Lease Date	e Name:	Well #: (Date)
Producing Formation(s):	List All (If needed attach a	another sheet)	by:		(KCC District Agent's Name)
De	epth to Top:	Bottom: T.D	Pluge	ring Commenced:	
De	epth to Top:	Bottom: T.D		, ,	
De	epth to Top:	Bottom:T.D		,g • •p. • . • . • . • . • . • . • .	
	ss of all water, oil and gas	s formations.			
	Water Records			(Surface, Conductor & Prod	
Formation	Content	Casing	Size	Setting Depth	Pulled Out
		plugged, indicating where the	•		ods used in introducing it into the hole. If
Plugging Contractor Lice	ense #:		Name:		
Address 1:			Address 2:		
City:			State:	:	
Name of Party Responsi	ible for Plugging Fees:				
State of	Co	unty,	, , SS.		
				Employee of Operator of	r Operator on above-described well,
	(Print Na			=mpio, so oi operator o	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.



P. O. Box 466

Ness City, KS 67560

Off: 785-798-2300

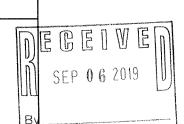


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DATE	INVOICE #
8/31/2019	32447

BILL TO

Presley Operating LLC 101 Park Ave, Ste 670 Oklahoma City, OK 73102



- Acidizing
- Cement
- Tool Rental

TERMS	Well N	10.	Lease	County	Contractor	Wel	I Туре	W	ell Category	Job Purpose	Operator
Net 30	#1-3		S.V.T.	Haskell	Murfin Rig #21		Oil	D	evelopment	РТА	Blaine
PRICE	REF.			DESCRIPT	ION		QT	Y	UM	UNIT PRICE	AMOUNT
575D 576D-P 328-4 290 581D 583D		Pump 60/40 D-Aii Servic Draya Subto Sales	ce Charge Cemage otal Tax Haskell Co	Gel) ent ounty	Date Paid	many constant	73	110 1 160 1	Miles Job Sacks Gallon(s) Sacks	5.00 925.00 11.00 42.00 1.85 0.95	550.00 925.00 1,760.00T 42.00T 296.00 699.73 4,272.73 126.14
We A	nnre	L ·cia	te Your	Busines	is i				Tota	1	

Lotal

\$4,398.87

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CHARGE TO:	Presley	Operation	
ADDRESS	Ć	,	
CITY STATE ZIP CODE	CODE		

Services, Inc.		() () () () () () () () () () () () () ()			1
SERVICE LOCATIONS LAY KS	WELL/PROJECT NO. 7	LEASE S.V.T.	COUNTY/PARISH	STATE CITY S. blette	31 AUG-19 OWNER
2	TICKET TYPE CONTRACTOR SERVICE SALES	אני בייא אניביאל	RIG NAME/NO.	SHIPPED DELIVERED TO	ORDER NO.
Çω	WELL TYPE	WELL CATEGORY	JOB POGABUA BOL	WELL PERMIT NO.	WELL LOCATION
4.	oil	PTA	Plug to Albandon		3-28-32
REFERRAL LOCATION	INVOICE INSTRUCTIONS		٠		
PRICE SECONDARY REFERENCE/	REFERENCE/ ACCOUNTING		DESCRIPTION	WILL ALO	TNUOMT AMOUNT

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include.				683	2501	240	1-282	576P	575	PRICE SECO	
LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include.										SECONDARY REFERENCE/ PART NUMBER	
s and agrees to of which include.							_e conspir		-	ACCOUNTING LOC ACCT DF	
REMIT PAYMENT TO:			. 00	Drazage	SURVICE Change	ひきた	60/40 20 xmx (106 gel)	RUMO Charge	MILEAGE TOX 114	DESCRIPTION	
SURVEY AGREE OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				13392 16	160-8) ea	160 15	104	5	QTY. U/M	
REE UNDECIDED DISAGREE				73656 m		***************************************	and it is a second of the seco		mandal and a state of the state	QTY. U/M	
PAGE TOTAL			 	095	185	4200	98	925/00	2 8	UNIT	
E 1824					296/60	4200	1760,00	935 00	29 299	AMOUNT	

the terms and conditions on the reverse side hereof which include, but are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions. LEGAL IEDMS: Custoffiel fieleby acknowledges and agrees to

START OF WORK OR DELIVERY OF GOODS. MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO

DATE SIGNED

TIME SIGNED

□ <u>A</u> P.M. M.

SWIFT OPERATOR

REMIT PAYMENT TO:

OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?

SWIFT SERVICES, INC. NESS CITY, KS 67560 P.O. BOX 466 785-798-2300

WE UNDERSTOOD AND
MET YOUR NEEDS?
OUR SERVICE WAS
PERFORMED WITHOUT DELAY? CALCULATIONS SATISFACTORILY? ARE YOU SATISFIED WITH OUR SERVICE? WE OPERATED THE EQUIPMENT AND PERFORMED JOB ☐ CUSTOMER DID NOT WISH TO RESPOND

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

APPROVALL) M

□ 8

TOTAL

Thank You!

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CUS	STOME	Prestey DG	anating	WELL NO.	1-3	LEASE	5.V.T.	PLY D Atlandon	TICKET NO. 32 447
CH	HART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS T C	PRESSU TUBING	IRE (PSI) CASING	DESCRIPTION OF OPERA	
								160sk 60/40poznix 42drill pipe	(40/ogel)
								Havil pipe	
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									20 - 60
									PH 30 - MH 20
		0530						on la tex	ut
Artist Wales								wat on comeit	- circulate well
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<u> </u>		0955		il				7.0	4052
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				-/-				Donase	
		1010						pull to 60'	
3								•	
		10115							755
		1040		6				Ang 30 plane	
								Ply RHzob W	
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