KOLAR Document ID: 1482565

**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 #:			,	API No.	15	
Name:				Spot De	scription:	
Address 1:			.		Sec Tw	p S. R East West
Address 2:					Feet from	
City:	State:	Zip: +	.		Feet from	East / West Line of Section
Contact Person:				Footage	s Calculated from Neares	st Outside Section Corner:
Phone: ( )					NE NW	SE SW
Type of Well: (Check one)		OG D&A Cathodi		,		
ENHR Permit #:	Gas Sto	rage Permit #:				
Is ACO-1 filed? Yes	No If not, is well	log attached? Yes				ved on: (Date)
Producing Formation(s): List A	ll (If needed attach another	sheet)				(KCC <b>District</b> Agent's Name)
Depth to	Top: Botto	m: T.D		Plugging	a Commenced:	
Depth to	Top: Botto	m: T.D		00 0		
Depth to	Top: Botto	m: T.D	'	. ragging	g completed.	
Show depth and thickness of a	all water, oil and gas forma	ations.				
Oil, Gas or Water	Records		Casing Re	cord (Su	urface, Conductor & Produc	tion)
Formation	Content	Casing	Size		Setting Depth	Pulled Out
Describe in detail the manner cement or other plugs were us		_				Is used in introducing it into the hole. If
Plugging Contractor License #	:		Name:			
Address 1:			Address 2:	:		
City:			\$	State:		Zip:+
Phone: ( )						
Name of Party Responsible for	r Plugging Fees:					
State of	County, _			, ss.		
	<i>3</i> , –			_	implayed of Onesates	Operator on obeyed deceribed
	(Print Name)			E	imployee 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.



#### INVOICE

DATE November 12, 2019

**INVOICE#** 

1195

470 Yucca Ln Pratt, KS 67124 Office Phone (620)672-9100 Fax (620)672-5020

**Bill To:** EDISON OPERATING COMPANY LLC

8100 E 22<sup>ND</sup> ST NORTH, BLDG 1900

WICHITA, KS 67226

**Lease Name** 

Ringwald

**Well Number** 

1-33

County

Rice

State

KS

QUANTITY	DESCRIPTION	UNIT PRICE	AMOUNT
1.0 140.0 6.0 140.0	10/23/2019 Work Ticket #6700 Service Man Charge Mileage Portload Mileage	500.00 1.50 15.00 1.50	500.00 210.00 90.00 210.00
		SUBTOTAL	1,010.00
		TAX RATE	7.50%
		SALES TAX	75.75
		TOTAL \$	1,085.75

Service & Rental, Inc.

SHIPPED FROM: (DISTRICT)

51-17-01

# SALES & SERVICE INVOICE

TR Service & Rental, Inc. • 470 Yucca Lane • Pratt, KS 67124 Remit To:

6700

NEW WELL OLDWELL [3]

Office Phone: 620-672-9100 Fax: 620-672-5020

**NET AMOUNT** 8 00 G STATE DISC UNIT CONTROL S 00 2 River LEASE 10 R166 COUNTY 5 Clour 000 Ů 10 0 7 10 Kg TAXE 5 ナイン 0.501 a Sanchan 306 Y. WELL NO. () 00/20 DESCRIPTION 3 OI-L HO 200 2 Y 10-23-1/0 0 ehingo 3100 1/0/2 11/14 7 11/18 170 174 0 9 たいい (1BP 755 m.VeelP 800 0/2 0,0 X Pruster Jusc Car C. erating ITEM QUANTITY COMMODITY NO. Pritot (Peerp Ed. son 3 J 140 5/ 0010 HO 60

Charges are subject to correction in accordance with latest price schedules and the addition of applicable State and Local sales / Use tax if not listed above. Checked By I certify that the above materials or services have been received on the terms and conditions set forth on the reverse eide hereof, which the undersigned has read and understood, that the basis for charges is correctly stated and that t am authorized to sign this memorandum as agent of owner or contractor AGENT OF OWNER OR CONTRACTOR:

Wy HEN

Taylor Printing, Inc. • 620-672-3656

TOTAL C

Ø €



#### INVOICE

DATE INVOICE #

October 29, 2019

1184

470 Yucca Ln Pratt, K\$ 67124 Office Phone (620)672-9100 Fax (620)672-5020

**Bill To: EDISON OPERATING COMPANY LLC** 

8100 E 22<sup>ND</sup> ST NORTH, BLDG 1900

WICHITA, KS 67226

Lease Name

Ringwald

Well Number

1-33

County

Rice

State

KS

QUANTITY	DESCRIPTION	UNIT PRICE	AMOUNT
	10/21/2019 Work Ticket #26112		
8.5	Rig #25 Operator & 2 men	240.00	2,040.00
1.0	Oil Saver Rubber	22.00	22.00
6.0	Gal Wash Gas	3.00	18.00
	10/22/2019 Work Ticket #26113		
9.0	Rig #25 Operator & 2 men	240.00	2,160.00
1.0	2 7/8" Wire Swab Cup	36.00	36.00
1.0	Tongs:	100.00	100.00
1.0	Oil Saver Rubber	22.00	22.00
8.0	Gal Wash Gas	3.00	24.00
	10/23/2019 Work Ticket #26114		
9.5	Rig #25 Operator & 2 men	240.00	2,280.00
1.0	Tongs	100.00	100.00
1.0	Thread Lube	50.00	50.00
8.0	Gal Wash Gas	3.00	24.00
1.0	Workover Head	300.00	300.00
	- 1	SUBTOTAL	7,176.00
		TAX RATE	7.50%
	2	SALES TAX	538.20
		TOTAL S	7,714.20

WORK TICKET

ALLIANCE WELL SERVICE, INC.

470 YUCCA LARR + PIRIL KS 67124  24 HOUR Phone 620-672-9100 + FAX 620-672-5020  AIG # 25  ORTE 10-2  COMPANY E 01550 OF 1011200 USEL FOR SERVE 10550 AIG # 25  AND TWE 11550 SEC USEL FOR SERVE 11550 AIG # 25  ORTE 10-2  COMPANY E 01550 OF 1011200 COMPANY INTERPOLATION OF AIR SERVENUE TARVEL MONARVENUE TOTAL HIS MUND  OPERATOR SALVE 10-1  OPERATOR SALVE 10-1  TIS PULLED USELL EQUIPMENT JTS AAN  27 1/3 JP 73 1/4 M/Hz 21 5 M/RQBS  SET 115 SALVE 10-1  OPERATOR SALVE 10-1  TOTAL SALVE 10-1  OPERATOR SALVE 10-1  OPERATOR SALVE 10-1  TOTAL SALVE 10-1  OPERATOR SALVE 10-1  OP			<b>.</b>						NEW U	ειι	l	
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Taylor Printing, Inc. • 620-672-3656

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ALLIANCE

COMPANY Edison  ADDRESS CITY / STATE  POSITION  OPERATOR Salvad  DERRICK HAND MIST  FLOOR HAND IS Fra  Colly  JTS  To location So  Soopsi make	24 Hour Phone: 62  OPT (A) OPT	HRS R6	JOB TYPE LEASE R. SEC SEC COUNTY A EVENUE TRAVEL ANCHOR / PACKER JOB TYPE LEASE R. SEC COUNTY A SEVENUE TRAVEL TRAVEL ANCHOR / PACKER LEASE R. SEC L	TWICE NON REVER	AIG# 25	DATE 10  COMPLETE INCOMPLET WELL # 1 - 3  ANGSTATE	1
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Aisc Solvent X	7				Total	24	
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PAGE	CUST NO	YARD #	INVOICE DATE
1 of 1	1007020	1718	10/28/2019
	INVOICE	NUMBER	
	930	76254	

Pratt

(620) 672-1201

B EDISON OPERATING COMPANY LLC

! 8100 E 22ND ST N

WICHITA

KS US

67226

O ATTN:

DAVID WITHROW

LEASE NAME

Ringwald 1-33

LOCATION

COUNTY

Rice

S STATE KS

Т

JOB DESCRIPTION Cement-Casing Seat-Prod W

JOB CONTACT

JOB #	EQUIPMENT #	PURCHASE	ORDER NO.		TERMS	DUE DATE
41193658	27463				Net - 30 days	11/27/2019
			QTY	U of	UNIT PRICE	INVOICE AMOUNT
or Service Date	es: 10/23/2019 to	10/23/2019				
)41193658						
171818482A Cen Cement PTA	nent-Casing Seat-Prod	W 10/23/2019				
Class A Cement			35.00	SK	14.88	520.
60/40 Poz			160.00		12.96	2,073.
Cement Gel Calcium Chloride			276.00 100.00		0.24 0.48	66. 48.
Light Vehicle Miles	age		70.00		2,40	168.
Heavy Equipment			140.00		3.84	537.
Depth Charge, 100			1.00	HR	720.00	720.
Blending & Mixing			195.00		0.67	131.
Service Supervisor Driver Charge	Charge		1.00 3.00		75.00 35.00	75. 105.
			0.00		33.33	100.
8-8-			,			
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SEND OTHER CORRESPONDENCE TO:

BASIC ENERGY SERVICES, LP BASIC ENERGY SERVICES, LP PO BOX 841903 DALLAS, TX 75284-1903

801 CHERRY ST, STE 2100 FORT WORTH, TX 76102

SUB TOTAL TAX 4,445.28

INVOICE TOTAL

0.00 4,445.28

## BASIC MERGY SERVICES

become a part of this contract without the written consent of an officer of Basic Energy Services LP.

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

#### FIELD SERVICE TICKET

1718 18482 A

wellen

		NEW OLD PROD INJ WDW CUSTO ORDE  DEFINITION ORDE  NEW WELL PROD INJ WDW CUSTO ORDE  LEASE RIGHT OF STATE KANS  STATE SERVICE CREW ALB TOTAL  JOB TYPE: PTA  ARRIVED AT JOB  START OPERATION  FINISH OPERATION	18482								
DATE OF D-23	2019 D	ISTRICT Praff, K	5,		N						
CUSTOMER Ed	Son	Operation	ec		LEASE Ringwald 1-33 WELL NO.						
ADDRESS					COUNTY Rice STATE Kansas						
CITY STATE					SERVICE CREW ALL B Ren 6 Jose D						
AUTHORIZED BY				JOB TYPE:	PTA	)	7-	41			
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQL	EQUIPMENT# HRS TRUCK CALL		TRUCK CALLE	ID 10-23-	PM PM	25	
21465	3.5						ARRIVED AT	JOB	AM: 7.	30	
33/00-13/00			-				START OPER	ATION	AM 9:3	0	
							FINISH OPER	ATION	AM / 4	5 /29	
							RELEASED		AM C		
							MILES FROM	STATION TO	WELL 70		
The undersigned is out		RACT CONDITIONS: (This							ontract for services mat	terials	

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

(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT) ITEM/PRICE REF. NO. \$ AMOUNT MATERIAL, EQUIPMENT AND SERVICES USED UNIT QUANTITY **UNIT PRICE** m. mi HE Pa SUB TOTAL CHEMICAL / ACID DATA: SERVICE & EQUIPMENT %TAX ON \$ MATERIALS %TAX ON \$

SERVICE REPRESENTATIVE (and Bullet)	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY	
	(WELL OWNER OPERATOR CONTRACTOR OR AGENT)	



#### FIELD SERVICE TICKET

1718 18482 A

PF	ENERGY RESSURE PUMPING		one 620-67	72-1201			DATE	TICKET NO.	182	
DATE OF JOB	2617 DI	STRICT !			NEW D	OLD O	PROD INJ	□ wow □ 8	USTOMER ORDER NO.:	
CUSTOMER		100000			LEASE )	1 11 11 11		158	WELL NO.	
ADDRESS		A DECEMBER OF THE			COUNTY STATE					
CITY		STATE			SERVICE CF	REW ]	173	1 7x		
AUTHORIZED BY				and the	JOB TYPE:	77		150 644	Lien	
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SERVICE REPRESENTATIVE	But I				IAL AND SER' OMER AND R		) BY			



#### TREATMENT REPORT

Customer		Obera-	/:	Lease No.				Date					
Lease	arson	gera	7	Well #	1-33			10-23-2019					
Field Order	# Statio	on Reli	Ve .	4	Casir	ng _ /	Depth	County [	).		State		
Type Job	PZA	1.1707-4	63			Form	ation		Legal	Description	185 - IDA		
PIP	E DATA	PF	RFORATI	NG DATA	FLU	ID USED		TRI	FATMENT	Γ RESUME			
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Volume	Volume	From		Го Г-	Pad		Min			10 Min.			
Max Press	Max Pres	From		Го Го	Frac		Avg			15 Min.			
Well Connecti	on Annulus			- - 0			HHP Use	d		Annulus F	ressure		
Plug Depth	Packer D			-o	Flush		Gas Volu	me		Total Load			
Customer Rep	presentative	121	33	Station	Manager Manager	lia Weste	nesh.	Treater	Dul K	abr. 1			
Service Units	27463	33.708	73%	W	103-	THE LUMBERTE	C. R. E. C.	1	10	A D. A			
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						-							



Please Remit To: P.O. Box 549 Hays, KS 67601

FIELD TICKET No.

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4	Ü	1	4

Phone: (785) 628-6395 Fax: (785) 628-3651

UNIT # \_05/1/

INVOICE NO.		P.O. NO.		AFE NO.							
CUSTOMER Edica	constitues.	LEASE	In he	WELL NO. /- 33							
ADDRESS	'	FIELD	1		STA	TE #S	COUNTY P				
		LOCATION	V								
CITY			CASING SIZE & WT. TBG. SIZE								
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ORDERED BY		TITLE					SERVICE SUPV.				
PART NO.	DESCRIPTION			REV.	QTY.	UNIT PRICE	AMOUNT				
20-210-1000	Service charge			1	1						
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CALLED OUT	ON LOCATION	COMPLETI	l ED	TOTAL	SERVICE	& MATERIALS					
Time	Time		Time	101712	OZ. (VIOZ.	DISCOUNT					
-		S									
Date	Date		Date			TAX					
*ACCIDENT REPORT MUST BE ATTA	CHED WHEN NOT SIGNED				TOT	AL CHARGES					
WITH MY INITIALS, I CONFIRM	THAT THE TIME SHOWN IN THE	_									
	ELY REFLECTS MY COMPENSABLE TIME.										
Employee Name (Print)	Hours	Initials									
Weeden											
Sergio											

ticket. If Customer disputes any item invoiced, Customer shall, within 20 days after receipt, notify the Company of the item(s) disputed, specifying the reason(s) therefor; payment of the disputed item(s) may be withheld until settlement of dispute, but payment of undisputed portion of invoice shall be made without delay. All payments shall be made at the address shown on the reverse side of this document. In the absence of a separate written contract, CUSTOMER REPRESENTATIVE REPRESENTS AND WARRANTS THAT HE/SHE IS AUTHORIZED TO ENTER INTO THIS AGREEMENT ON BEHALF OF CUSTOMER AND ACCEPTS ALL TERMS AND CONDITIONS AS PRINTED ON THE REVERSE SIDE OF THIS DOCUMENT (WHICH INCLUDES INDEMNITY LANGUAGE THAT ALLOCATES RISKS RELATED TO THE ABOVE DESCRIBED SERVICES). Pricing and extensions, if shown above, are subject to verification and correction at time of invoicing.



Please Remit To: , P.O. Box 549 Hays, KS 67601

Phone: (785) 628-6395 Fax: (785) 628-3651

#### FIELD TICKET No.

	107 - 1			
DATE	717 8	201	· ·	
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INVOICE NO.		P.O. NO.	AFE NO.				
CUSTOMER Follow	a government	LEASE	- 1.00 h	1		WELL NO.	3
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CITY		CASING SIZE 8	WT.			TBG. SIZE	
STATE	ZIP	TYPE OF JOB					
ORDERED BY		TITLE				SERVICE SUPV.	
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CALLED OUT	ON LOCATION	COMPLETED	TOTAL	L SERVICE	& MATERIALS		
Time	Time	Time	14		DISCOUNT	0	
Date	Date	Date	Cole color	A Charles	TAX	of the control of	i ba
AA GOUDEN'S DEDON'S BALLOT DE ATTAG	The state of the s	refusioners (to	Consideration	i marina	AL CHARGES	Acquisins large transaction	

CUSTOMER AGREES to pay (the "Company") on a net 45 day basis from date of invoice to avoid loss of discount. Invoices older then 45 days are subject to loss of discount on ticket. If Customer disputes any item invoiced, Customer shall, within 20 days after receipt, notify the Company of the item(s) disputed, specifying the reason(s) therefor; payment of the disputed item(s) may be withheld until settlement of dispute, but payment of undisputed portion of invoice shall be made without delay. All payments shall be made at the address shown on the reverse side of this document. In the absence of a separate written contract, CUSTOMER REPRESENTATIVE REPRESENTS AND WARRANTS THAT HE/SHE IS AUTHORIZED TO ENTER INTO THIS AGREEMENT ON BEHALF OF CUSTOMER AND ACCEPTS ALL TERMS AND CONDITIONS AS PRINTED ON THE REVERSE SIDE OF THIS DOCUMENT (WHICH INCLUDES INDEMNITY LANGUAGE THAT ALLOCATES RISKS RELATED TO THE ABOVE DESCRIBED SERVICES). Pricing and extensions, if shown above, are subject to verification and correction at time of invoicing.

Y	1341 mg	willen	
	CUST	OMER REPRESENTATIVE	



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

### FIELD SERVICE TICKET 1718 A

	PRESSURE PUMPING	Ø MIHELINE		S TOO I			DATE	TICKET NO.			- 3	
DATE OF JOB	DIS	STRICT	S.		NEW D	OLD OLD	PROD [] INJ	□ WDW	□ CL OF	ISTOMEF RDER NO	}	
CUSTOMER	500 Seve	alexal m			LEASE WELL NO.							
ADDRESS	COUNTY STATE											
CITY	4 / 15/2	STATE			SERVICE C	REW						
AUTHORIZED BY	y steredly u		JOB TYPE:	177			erike.					
EQUIPMENT		EQUIPMENT#	HRS	EQL	UIPMENT#	HRS	TRUCK CALL	ED	DATE	AM PM	TIME	
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53 105-10	16.0		12 5 13	10			START OPER	ATION		AM PM	4-113	
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SERVICE REPRESENTATIVE THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY:

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)



#### TREATMENT REPORT

Customer					Lea	Lease No.							Date // Z S - Z Z J J /					
Lease		1		137	We	11 #	13	3				1	1012		117			
Field Order #	Statio	n ,	4/	Jec -				Casing	Depth				County State					
Type Job						74		incorp.	For	mation				Legal De	scription	183-100		
PIPE	DATA	17	PER	FORA	TING D	ATA		FLUID	JSED	E Was		142	TREAT	MENT F	RESUME			
Casing Size	Tubing S	ize	Shots/F	ŧ			Acid				RATE PI			RESS ISIP				
Depth	Depth	4/8	From		То		Pre F	Pad			Max		nchip de		5 Min.			
Volume	Volume		From		То	Tass.	Pad	INCOME.	1) 2	10	Min	10 A	ing or		10 Min.			
Max Press	Max Pres	s	From	1.9.4	To		Frac		N. Committee		Avg	1			15 Min.			
Well Connection	Annulus \	/01	From	# Y	То			STEEL STEEL			HHP Use	ed			Annulus F	ressure		
Plug Depth	Packer D	epth	From		То		Flush	1	IJ.		Gas Volu	ıme		Total Load				
Customer Repre	sentative	12	1/20			Station	Manag	ger /	1844	lectes		Trea	ater	160	ET J			
Service Units	743	33	NA	3/37	020	100				8 54		7 15 3		r in Pi				
Driver Names	26	TZ6	44	Die	12					130								
Time	Casing Pressure	Pre	ubing essure	Bbls	. Pumpe	d	R	ate	fig.		3/38-11		Service					
			10.04	11/24					On	100	4/11	7	30	Are	100			
									120	1	ca.	31340	WS.	10 10 1	MUTTINE.			
hara area					1						- 70							
220	300				1	-		200	1660	do	200	61875		100	A S	(K) // 1		
								Sant All III	100	1011		- 0	SE PAL	19	1/1/2			
				e e	7.35		S pay	4		149	25	au sange	4 5000 C	7		7- Tarel 190s (s)		
District To	8				4	+	7	4	170	2/	2.57		C G 35	11-11	3			
			Shi al		- / -		ani a	1	ale	Sallar Mires	1000	2 16	7. 83. No. 11	6 1	kirin e	4.		
2000 P		3850	Sec.	E-Volt	22/00				199	SILVEN SA	my say	and the second	તું હોકુકા <u>ર</u>		ALLER BLOOM	STATE OF THE PARTY		
		1	- 17	V=X ch	A V	23 1	Y	Selection .		A Co	1	9/1	7 - 1			Language Marine or 1990		
240 12	100		1773		5	- 10-		2	Don		5 /	44.15	Low	1.11				
	400			5		116		3.54				and E	A a			S of species		
E E			-514		2		0		Ď.	the.	10	3751	15					
	18/11/2	1	ur is		Take.		XX		1		10	400						
		3							Kirs	War	7	5	11					
30 pm		7 E	3.72	- 3	2		3.	5	Pur	DVE	: 125	316		C 41	2			
	VALUE II								40	de	Eli.	PEVAL	a Ton	1	100			
				1								100	- 10	120 lb				
10		U K		200	3,5								de l			ar Ar Ar A		
10	9	3		11 11	Man							(3) 1-s				The live		
						30		3				- 1						