

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

RECEIVED NOV 19 2019



PAGE 1 of 1	CUST NO 1002661	YARD # 1718	INVOICE DATE 11/13/2019
INVOICE NUMBER 93087321			

Pratt (620) 672-1201
 B MC COY PETROLEUM CORP
 L PO Box: 39
 L SPIVEY
 T KS US 67142
 O ATTN: ACCOUNTS PAYABLE

J LEASE NAME Koehn F 1-29
 O LOCATION
 B COUNTY Haskell
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 T JOB CONTACT
 E

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
41195322	19572		Net - 30 days	12/13/2019

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
For Service Dates: 11/12/2019 to 11/12/2019				
0041195322				
171819795L Cement-New Well Casing/Pi 11/12/2019				
<i>PJA</i>				
60/40 Poz	180.00	SK		
Cement Gel	300.00	LB		
Heavy Equipment Mileage	80.00	MI		
Blending & Mixing Service Charge	180.00	SK		
Ton Mileage	310.00	MI		
Depth Charge, 1001'-2000'	1.00	HR		
Light Vehicle Mileage	40.00	MI		
Service Supervisor Charge	1.00	EA		
Driver Charge	2.00	EA		

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOT.	0
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	T.	9
PO BOX 841903	801 CHERRY ST, STE 2100	INVOICE TOT.	9
DALLAS, TX 75284-1903	FORT WORTH, TX 76102		

DC



Liberal Yard #1717 - Phone 620-624-2277 - 1700 S. Country Estates Road, Liberal KS 67901

PRESSURE PUMPING Job Log

Customer:	McCoy Petroleum Corporation	Cement Pump No.:	37223 19572 12HRS	Operator TRK No.:	86531
Address:	9342 E. Cemtral	Ticket #:	1718 19795 L	Bulk TRK No.:	30463 14284 Oscar
City, State, Zip:	Wichita, Kansas 67206	Job Type:	Z-42 Cement Plug to Abandon		
Service District:	1718-Liberal KS	Well Type:	NEW		
Well Name and No.:	Koehn "F" 1-29	Well Location:	29,29,31	County:	Haskell
				State:	Kansas

Type of Cmt	Sacks	Additives	Truck Loaded On		
60/40 Poz	180	4% Gel	30463 14284 Oscar	Front	Back
				Front	Back
				Front	Back

Lead/Tail:	Weight #1 Gal.	Cu/Ft/sk	Water Requirements	CU. FT.	Man Hours / Personnel	
Lead:	13.5	1.5	7.5	270	TT Man Hours:	38
Tail:					# of Men on Job:	3

Time (am/pm)	BPM	Volume (BBLs)	Pumps		Pressure (PSI)		Description of Operation and Materials
			T	C	Tubing	Casing	
4:30am							Arrived at location
4:45am							Spot trucks/Rig up
8:30am							Safety meeting
9:00am	2	10				200	Pump 10bbls ahead of water
9:05am	3	13.3				200	Pump 13.3bbls of cement from 50sks at 13.5lbs
9:09am	3	22.9				200	Pump 22.9bbls of displacement
9:15am							Rig crew pulling drill pipe
9:55am	2	30				50	Pump 30bbls to circulate well
10:07am	4	10.6				150	Pump 10.6bbls of cement from 40sks at 13.5lbs
10:12am	4	7.4				120	Pump 7.4bbls of displacement
10:20am							Rig crew pulling drill pipe
10:53am		10.6					Pump 10.6bbls of cement from 40sks at 13.5lbs
							Cement to surface
11:19am		13.3					Pump Rat and Mouse hole with 13.3bbls from 50sks at 13.5lbs
							Rig down
							Job Completed
							Thanked company man and rig crew

Size Hole	7 7/8	Depth		TYPE		
Size & Wt. Csg.	8 5/8 24#	Depth	New / Used	1st Plug	1860	Depth
Drill Pipe	4 1/2 16.6#	Depth		2nd Plug	720	Depth
Max Psi	500	Type		3rd Plug	60	CIBP

Customer Signature: <i>[Signature]</i>	Basic Representative:	Victor A. Corona
	Basic Signature:	<i>[Signature]</i>
	Date of Service:	11/12/2019