

**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.

\_\_\_\_\_  
(Print Name) ☐ Employee 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.

Submitted Electronically

# ES

SURE PUMPING LLC  
884, Chanute, KS 66720  
431-9210 or 800-467-8676

## FIELD TICKET & TREATMENT REPORT CEMENT

TICKET NUMBER 55474

LOCATION Ottawa, KS

FOREMAN Casey Kennedy

Invoice #814285

DATE <u>01/31/18</u>	CUSTOMER # <u>5954</u>	WELL NAME & NUMBER <u>Finnerty # BH-1</u>	SECTION <u>SE 11</u>	TOWNSHIP <u>15</u>	RANGE <u>20</u>	COUNTY <u>DG</u>
CUSTOMER <u>Oienroc Energy LLC</u>						
MAILING ADDRESS <u>120 Shoreline Dr</u>						
CITY <u>Louisburg</u>	STATE <u>KS</u>	ZIP CODE <u>66053</u>				

TRUCK #	DRIVER	TRUCK #	DRIVER
<u>729</u>	<u>Cosken</u>	<u>✓</u>	<u>Safety Meeting</u>
<u>467</u>	<u>Keilar</u>	<u>✓</u>	
<u>SSR</u>	<u>HarBec</u>	<u>✓</u>	
<u>675</u>	<u>Kei Det</u>	<u>✓</u>	

JOB TYPE plug HOLE SIZE 12"? HOLE DEPTH 6603' CASING SIZE & WEIGHT \_\_\_\_\_

CASING DEPTH \_\_\_\_\_ DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_

SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING \_\_\_\_\_

DISPLACEMENT \_\_\_\_\_ DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 4 bpm

REMARKS: held safety meeting, established circulation through drill steel at hole TD, mixed & pumped 160 sks Pozblend 1A cement w/ 6% gal per sk, w/ 20 # Cottonseed Hulls, cement to surface, pulled drill steel from hole, topped hole off w/ 32 sks cement, washed up drill steel & equipment.

*[Handwritten signature]*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CE0450	1	PUMP CHARGE	1500.00	
CE0002	20 mi	MILEAGE	143.00	
CE0711	min	ten mileage	660.00	
WE0853	3 hrs	80 Vac	300.00	
		trucks	2003.00	
		-55%	1431.65	
		subtotal		1171.35
CC5840	192 sks	Pozblend 1A cement	2592.00	
CC5965	968 #	Gal	290.40	
CC6080	20 #	Cottonseed Hulls	20.00	
		materials	2902.40	
		-55%	1596.32	
		subtotal		1306.08
SCANNED				
		7.5%	SALES TAX	97.96
			ESTIMATED TOTAL	2575.39
				(5723.08)

Ravin 3737

AUTHORIZATION *[Signature]*

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.