

**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**

810 E 7<sup>TH</sup>  
 PO Box 92  
 EUREKA, KS 67045  
 (620) 583-5561



**Cement or Acid Field Report**  
 Ticket No. **4975**  
 Foreman David Gardner  
 Camp Eureka

API# 15-073-23995

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State
2-6-20	1000	Schwab # 1A	9	24S.	10 E.	Greenwood	KS
Customer <u>Trimble + MacLaskey Oil LLC</u>			Safety Meeting DG JH JV SM	Unit #	Driver	Unit #	Driver
Mailing Address <u>P.O. Box 171</u>				<u>105</u>	<u>Jason</u>		
City <u>Gridley</u>				<u>114</u>	<u>Jash</u>		
State <u>KS</u>				<u>145</u>	<u>Steve</u>		
Zip Code <u>66852</u>							

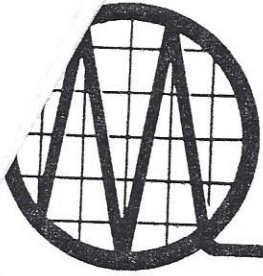
Job Type P.T.A. Oldwell Hole Depth 2823' Slurry Vol. \_\_\_\_\_ Tubing 2 3/8"  
 Casing Depth 2821' Hole Size \_\_\_\_\_ Slurry Wt. \_\_\_\_\_ Drill Pipe \_\_\_\_\_  
 Casing Size & Wt. 5 1/2" Cement Left in Casing \_\_\_\_\_ Water Gal/SK \_\_\_\_\_ Other \_\_\_\_\_  
 Displacement \_\_\_\_\_ Displacement PSI \_\_\_\_\_ Bump Plug to \_\_\_\_\_ BPM \_\_\_\_\_

Remarks: Safety Meeting. Rig up to 2 3/8" Tubing. Plug well as follows:

20 SKS @ 2784'  
Gel + Hulls Spacer  
20 SKS @ 1092'  
Gel + Hulls Spacer  
100 SKS @ 250' to Surface.  
140 SKS Total

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C105	1	Pump Charge	785.00	785.00
C107	15	Mileage	4.20	63.00
C203	140 SKS	60/40 Pozmix Cement	13.40	1876.00
C206	480#	Gel 4%	.21	100.80
C108A	6.02 Tons	Ton Mileage - Bulk Truck	m/c	365.00
C206	300#	Gel Spacer	.21	63.00
C214	45#	Hulls	.50	22.50
C113	3 HRS	80 Bkl Vac Truck	90.00 / HR	270.00
<u>Thank you</u>				
			Sub Total	3,545.30
			Less 5%	191.45
			8.8 % Sales Tax	283.62
Authorization _____	Title _____	Total	<u>3,637.47</u>	

I agree to the payment terms and conditions of services provided on the back of this job ticket. Any amendments to payment terms must be in writing on the front of this job ticket or in the Customer's records at ELITE's office.



Service Order and Delivery Receipt

OUR NO.  
37546

**MIDWEST SURVEYS**  
LOGGING • PERFORATING • M.I.T. SERVICES

P. O. Box 68  
Osawatomie, KS 66064  
913/755-2128

Date 9/17/19

TERMS AND CONDITIONS: Midwest Surveys is hereby instructed to deliver the equipment or perform the services ordered hereon or as verbally directed, under the terms and conditions printed on the reverse side of this order, which I have read and understand and which I accept as Customer or as Customer's Authorized Agent.

Service and/or Equipment Ordered Perforate for Plugging

SIGN BEFORE COMMENCEMENT OF WORK

Customer's Name Trimble & Machaskey Oil LLC By \_\_\_\_\_  
Customer's Authorized Representative

Charge to Trimble & Machaskey Oil LLC Customer's Order No. Tim Thwaitt

Mailing Address \_\_\_\_\_

Well or Job Name and Number Schwab Lease County Greenwood State KANSAS

QUANTITY	DESCRIPTION OF SERVICE OR MATERIAL	PRICE
<u>3</u>	<u>Perforated Wells at Two (2) Different Intervals in each well</u>	<u>3600.00</u>
	<u>Perforated each well at the Depth of 250.0 and 1100.0</u>	
	<u>Wells Perforated Schwab Lease: #1-A, #2, #6</u>	

Total 3600.00

The above described service and/or material has been received and are hereby accepted and approved for payment.

Customer's Name Trimble & Machaskey Oil LLC

By \_\_\_\_\_ Date 9/17/19  
Customer's Authorized Representative

Serviced by: Amy Winkler