KOLAR Document ID: 1526453

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 Description:
Address 1:	Sec Twp S. R East West
Address 2:	Feet from North / South Line of Section
City: State: Zip: +	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	NE NW SE SW
Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic Water Supply Well Other: SWD Permit #: SWD Permit #: SWD Permit #: ENHR Permit #: Gas Storage Permit #: Is ACO-1 filed? Yes No If not, is well log attached? Yes No	County: Well #: Lease Name: Well #: Date Well Completed: The plugging proposal was approved on: (Date)
Producing Formation(s): List All (If needed attach another sheet)	by: (KCC District Agent's Name)
Depth to Top: Bottom: T.D. Depth to Top: Bottom: T.D. Depth to Top: Bottom: T.D.	Plugging Commenced:Plugging Completed:

Show depth and thickness of all water, oil and gas formations.

Oil, Gas or Water	r 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



						0.0							
Customer	DAVIS PETROLE	UM		AUSER 1	HAUS	SER A-2 S	WD			Date	8	/11/2020	
Service District	MLK		Co	unty & State	GRA	IM KS	Legals S/T/R	22-6	-23	Job #			
Job Type	PLUG TO ABAN			U	⊠ SW	D	New Well?	I YES	☑ No	Ticket #	1	CT3945	
Equipment #	Driver				Jo	ob Safety	Analysis - A Discus	sion of Hazards	& Safety Pro	ocedures			
912	MATTAL	🛛 Hard ha	t		🗵 Glo	ves		Lockout/Tag	out	Warning Sign:	s & Flagging		
526/521	MCGRAW	☑ H2S Mo	nitor		⊠ Eye	Protectio	n	Required Per	rmits	□ Fall Protection	1		
181/532	MCGRAW	Safety F	ootwear		C Res	piratory P	rotection	□ Slip/Trip/Fall	Hazards	Specific Job Security 2018	equence/Expe	ectations	
			tective Cloth	ing			nemical/Acid PPE	□ Overhead Ha	azards	Muster Point/	Medical Loca	tions	
0.00		Hearing	Protection		□ Fire	Extinguis	the second s		oncerns or iss	ues noted below			
							Cor	nments					
Product/ Service Code			Descriptio	n			Unit of Measure	e Quantity				Net An	noun
P055	H-Plug		500	. soonieee			sack	255.00	0			\$2	,486
P165	Cottonseed Hulls						lb	200.00				\$	\$150
			-										
015	Linht Faulanant N	Alle e					1940 a					-	185.000
010	Light Equipment N Heavy Equipment						mi	45.00				-	\$67.
020	Ton Mileage	willeage					mi tm	45.00				1	6135
	1 off Minougo							495.00				4	556.
011	Cement Pump Ser	rvice					ea	1.00				¢	825.
													020.
							-				Second		
			7 av									1007010	
Custe	omer Section: On t	the following	scale how we	ould you rate	Hurrica	ne Servic	es Inc.?		I		Net:	\$4	220.
								Total Taxable	\$ -	Tax Rate:	net.	\$4, \$	<
	ased on this job, he					a colleag	jue?	used on new well Hurricane Service	em certain pro s to be sales ta es relies on the	ducts and services	Sale Tax:	\$	
	Unlikely 1 2	3 4	5 6	7 8	9	10	Extremely Likely	services and/or p			Total:	\$4,	220.
								HSI Represe	entative:	Mike Matta	e		

TERMS: Cash in advance unless Hurricane Services Inc. (HSI) has approved credit prior to sale. Credit terms of sale for approved accounts are total invoice due on or before the 30th day from the date of invoice. Past due accounts shall pay interest on the balance past due at the rate of 1 ½% per month or the maximum allowable by applicable state or federal laws. In the event it is necessary to employ an agency and/or attorney to affect the collection, Customer hereby agrees to pay all fees directly or indirectly incurred for such collection. In the event that Customer's account with HSI becomes delinquent, HSI has the right to revoke any discounts previously applied in arriving at net invoice price. Upon revocation, the full invoice price without discount is immediately due and subject to collection. Prices quoted are estimates only and are good for 30 days from the date of issue. Pricing does not include federal, state, or local laxes, or royatlies and stated price adjustments. Actual charges may vary depending upon time, equipment, and material ultimately required to perform these services. Any discount is based on 30 days net payment terms or cash. <u>DISCLAIMER NOTICE</u>: Technical data is presented in good faith, but no warranty is stated or implied. HSI assumes no liability for advice or recommendations made concerning the results from the use of any product or service. The information presented is a best estimate of the actual results that may be achieved and should be used for comparison purposes and HSI makes no guarantee of future production performance. Customer represents and warrants that well and all associated equipment in acceptable condition to receive services by HSI. Likewise, the customer suprove operational care of all customer owned equipment and property while HSI is on location performing services. The authorization below acknowledges the receipt and acceptance of all terms/conditions stated above, and Hurricane has been provided accurate well information in determining taxable services.

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CUSTOMER AUTHORIZATION SIGNATURE



EMENT	TRE	ATMEN	IT REP	ORT							
Cust	omer:	DAVIS F	PETROL	EUM	Well:		HAUSER A-2 SWI) Ticket:	ICT3945		
City, State: HILL CITY KS					County:	1. B.D.		100 100			
Field Rep: RICK POPP							GRAHM KS	Date: Service:	8/11/2020		
HERE REP RICK FUPP					S-T-R:	S-T-R: 22-6-23			PLUG TO ABAN		
Down	nhole l	nformatio	on		Calculated SI	urry - Lea	ad	Calc	ulated Slurry - Tail		
Hole Size: in					Blend:	H-F	Blend:				
Hole I	and the second		ft		Weight:	13.8	B ppg	Weight:	ppg		
Casing			in		Water / Sx: 6,	92	gal / sx	Water / Sx:	gal / sx		
Casing L			ft		Yield:	1.43	ift ³ /sx	Yield:	ft ³ / sx		
Tubing /			in		Annular Bbls / Ft.:		bbs / ft.	Annular Bbls / Ft.:	bbs / ft.		
	epth:		ft		Depth:		ft	Depth:	ft		
Tool / Pa					Annular Volume:	0.0	bbls	Annular Volume:	0 bbis		
Tool I			ft		Excess:			Excess:			
Displacement: bbls				Total Slurry:	65.0	bbls	Total Slurry:	0.0 bbls			
TIME	RATE	PSI	STAGE BBLs	TOTAL	Total Sacks:	255	sx	Total Sacks:	#DIV/0! sx		
Second Charles	RATE	PSI		BBLs	REMARKS						
11;40		****	· ·	•	ON LOCATION, SAFTEY	MEETING	1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.				
12:14 PM	4.4	400.0		-	1ST PLUG AT 1700'						
12:14 PM	3.0	100.0 75.0	20.0	20.0	PUMP 20 BBL WATER AI						
12,20	3.0	75.0	13.0 45.0	33.0	MIX 50 SKS H-PLUGWITH	1 200 LBS	COTTON SEED HULLS				
12;32	3.0	300.0	45.0	78.0	MIX 175 SKS H-PLUG			a construction of the second second second			
12;53	1.0	150.0	2.0	78.0 80.0	PRESSURED UP TO 300						
12;57	1.0	150.0	5.0	80.0	MIX 10 SKS H-PLUG PUN		and the second se		and the second se		
12,07	1.0		5.0	85.0	MIX 20 SKS H-PLUG TO	IOP OFF	CASING				
				85.0							
	-			85.0							
				85.0		XOUI					
				85.0	JOB COMPLETE, THANK YOU! MIKE MATTAL						
	85.0 MIKE & E.J.										
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				85.0							
		CREW			UNIT			SUMMARY			
Cementer: MATTAL				912		Average Rate	Average Pressure	Total Fluid			
Pump Operator: MCGRAW					526/521		2.5 bpm	140 psi	85 bbls		
	lk #1:	MCG	RAW		181/532						
Bu	lk #2:										