

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

Form CP-4
March 2009

Type or Print on this Form
Form must be Signed
All blanks must be Filled

WELL PLUGGING RECORD
K.A.R. 82-3-117

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



1013 240th AVENUE • HAYS, KANSAS 67601 • 785-621-2135

Date 8-25-20

CHARGE TO: Altus Oil LLC
 ADDRESS _____
 R/A SOURCE NO. _____ CUSTOMER ORDER NO. Verhulow
 LEASE AND WELL NO. 200001 FIELD Duval
 NEAREST TOWN Winfield COUNTY Cowley STATE Kansas
 SPOT LOCATION _____ SEC. 15 TWP. 31S RANGE 4E
 ZERO SAGB CASING SIZE 5 1/2 WEIGHT _____
 CUSTOMER'S T.D. _____ LOG-TECH TD _____ FLUID LEVEL 11690'
 ENGINEER S. Clement OPERATOR S. Cluskey

PERFORATING

Description	No. Shots	Depth		Amount
		From	To	

DEPTH AND OPERATIONS CHARGES

Description	Depth		Total No. Pt	Price Per Pt	Amount
	From	To			
<u>5 1/2 Cast Iron Bridge Plug</u>		<u>3140</u>		<u>15</u>	<u>1050 00</u>
<u>Setting Charge</u>	<u>0</u>	<u>3140</u>	<u>3140</u>	<u>min</u>	<u>1500 00</u>
<u>5 1/2 Cast Iron Bridge Plug</u>		<u>2500</u>		<u>1</u>	<u>1050 00</u>
<u>Setting Charge</u>	<u>0</u>	<u>2500</u>	<u>2500</u>	<u>min</u>	<u>1500 00</u>
<u>Dump 2 sacks Cement</u>	<u>0</u>	<u>3140</u>			<u>753 60</u>
<u>Dump 2 sacks Cement</u>	<u>0</u>	<u>2500</u>	<u>2500</u>	<u>min</u>	<u>720 00</u>
<u>Cut casing @ 474'</u>		<u>474</u>			
<u>Depth Charge</u>	<u>0</u>	<u>474</u>			<u>2500 00</u>

MISCELLANEOUS

Description	Quantity	Amount
Service Charge <u>Track Rental 901</u>	<u>1</u>	<u>1500 00</u>
T.J.		
A.O.L.		
S.J.		
F.J. T.W.T.		

PRICES SUBJECT TO CORRECTION BY BILLING DEPARTMENT

RECEIVED THE ABOVE SERVICES ACCORDING TO THE TERMS AND CONDITIONS SPECIFIED ON THE REVERSE SIDE TO WHICH WE HEREBY AGREE.

..... Sub Total	<u>10573 60</u>
..... Tax	
..... Total	

Customer Signature

Date

[Handwritten Signature]

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



Cement or Acid Field Report
 Ticket No. **5179**
 Foreman Russell mcloy
 Camp Eureka

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State
8-25-20	1097	Jim # 1	15	31	4	Cowley	Ks
Customer ALTON OIL		Safety Meeting RM AB Greg	Unit #	Driver		Unit #	Driver
Mailing Address P.O. Box 117			105	JASON			
City Winfield			112	Russell			
State KS	Zip Code 67156		128	Greg			

Job Type P.T.A. old well Hole Depth _____ Slurry Vol. 34 Bbl Tubing 2 7/8
 Casing Depth _____ Hole Size _____ Slurry Wt. 14.1 Drill Pipe _____
 Casing Size & Wt. 7 7/8 Cement Left in Casing _____ Water Gal/SK _____ Other _____
 Displacement _____ Displacement PSI _____ Bump Plug to _____ BPM _____

Remarks: Safety meeting, Plug well 310' to surface w/ 130 SKs 60/40 4% Gel 2 Bbl cement to surface well stayed full. Job complete tear down.
THANK YOU
Russell mcloy

API 15-035-20307-00-01 witnessed by DWAYNE w/ KCC

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C-105	1	Pump Charge	785.00	785.00
C-107	40	Mileage	4.20	168.00
C-203	130	SKs 60/40 Pozmix	13.40	1742.00
C-206	450 [#]	Gel = 4%	.21	94.50
C-108 B	4.51 Ton	Ton mileage m/c	365.00	365.00
				3,154.50
			- 5%	167.98
			Sales Tax	205.04
Authorization <u>by Mike</u> Title <u>owner</u>			Total	3,191.56

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.