KOLAR Document ID: 1530454

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 #	ŧ		AP	l No. 15				
Name:				ot Description:				
Address 1:				Sec				
				Feet fron				
City:	State	:	_	Feet fron				
Contact Person:			Foo	otages Calculated from Nea	rest Outside Section Corner:			
Phone: ()				NE NW	SE SW			
Water Supply Well	Other: G	OG D&A Care SWD Permit #: as Storage Permit #: is well log attached? Yes	Lea Dat	ase Name:	Well #: (Date)			
Producing Formation(s)	: List All (If needed attach a	nother sheet)	by:		(KCC District Agent's Name)			
Do	epth to Top:	Bottom: T.D	_{Plu}	aaina Commenced:				
De	epth to Top:	Bottom: T.D						
De	epth to Top:	Bottom:T.D						
Show denth and thickne	ess of all water, oil and gas	e formations						
·	Water Records	iornations.	Casing Recor	g Record (Surface, Conductor & Production)				
Formation	Content	Casing	Size	Setting Depth	Pulled Out			
				3 2 2 2				
		cter of same depth placed from			nods used in introducing it into the hole. If			
Plugging Contractor Lic	ense #:		Name:					
Address 1:			Address 2:					
City:			Sta	te:				
Phone: ()								
Name of Party Respons	sible for Plugging Fees:							
State of	Co	unty,	, S	S.				
				Employee of Operator of	or Operator on above-described well,			
	(Print Na				operate. 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.

Hurricane Services, Inc. 250 N. Water St., Suite #200 Wichita, KS 67202



Customer	N-10 Exploration		Lease & Well #	Medicine River	Ranch R-4			3 14 1		
Service District	Medicine Lodge,	Kansas	County & State	(3)	PROMOTE TO SERVICE			Date	3	8/6/2020
Job Type	PTA	☑ PROD	☐ INJ		Legals S/T/R New Well?	7	ls-11w	Job#	8	
Equipment#	Driver	E TROD	□ 11 0	SWD	A STATE OF THE PARTY OF THE PAR	☐ YES	☑ No	Ticket#	3	ICT3917
913	Kevin Brungardt	☑ Hard hat			Analysis - A Discus					
526-521	Mike McGraw	☐ Hard nat ☐ H25 Monitor		☑ Gloves		Lockout/Ta		☐ Warning Sig		9
176-260	Daryl Martinez			☑ Eye Protection		Required P		☐ Fall Protection		
170-200	Daryi Wartinez	☑ Safety Footwe		Respiratory P		☑ Slip/Trip/Fa		☐ Specific Job		
	 	-		Additional Ch		☑ Overhead I		☐ Muster Poin		ations:
	-	☑ Hearing Prote	ction	☐ Fire Extinguish			concerns or i	ssues noted below	ı	
		 			Coi	mments				
		<u> </u>								
Product/ Service		distribution of the	ON NAME OF THE PARTY.	V 166 (6 / 16 / 16)					All control of the same	
Code	建工业	Desc	ription		Unit of Measure	Quantity				Net Amount
CP055	H-Plug				sack	165.00				\$1,501.50
CP096	Cement Gel				lb	1,000.00				\$315.00
M025	Tog Mileses Mist					-	-			
111023	Ton Mileage - Minin	ium			each	1.00	-	<u> </u>	-	\$210.00
C011	Cement Pump Serv	ice			ea	1.00	 		 	\$770.00
										\$770.00
							,,,,,			
Vector Production										
Custor	mer Section: On the	following scale ho	w would you rate I-	lurricane Services	Inc.?				Net:	\$2,796.50
Rae	ed on this job, how	likalır in it	[4]			Total Taxable	\$ -	Tax Rate:		$\geq <$
Dust			oula recommend	HSI to a colleagu	e?	State tax laws des used on new wells		lucts and services	Sale Tax:	\$ -
						Hurricane Service	s relies on the	customer provided		
Unta	uly 1 2 3	4 5	6 7 8	9 10	Extremely Likely	well information at services and/or pr			Total:	\$ 2,796.50
						HSI Represe			i otali.	¥ 2,190.50
ERMS: Cash in advan	ce unless Hurricane Se	rvices Inc. (HSI) has	approved credit prior	to sale Credit terms	of sale for approved	Treating are latel				

TERMS: Cash in advance unless Humicane 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 15% 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 definquent, 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 taxes, or royalties and stated price adjustments. Actual charges may vary depending upon time, equipment, and material utilimately required to perform these services. Any discount is based on 30 days from the target payment the mass 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 guarantees proper 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.



Cus	stomer	N-10 E	xploratio	п	Well:	Medicine River Ra	ach P.4	IOT2047
		tate: Attica, Kansas						ICT3917
					County:	Barber, Kans	A TOTAL OF THE PARTY OF THE PAR	8/6/2020
Fie	ю кер:	Jeff Ca	ipps		S-T-R:	15-34s-11w	Service:	РТА
		Informat	ion		Calculated Siur	ry - Lead	Calc	ulated Slurry - Tail
	le Size:				Blend:		Blend:	H-Plug
	Depth:		0 ft		Weight:	ppg	Weight:	13.78 ppg
Casing Size: 5 1/2 in			Water / Sx:	gal / sx	Water / Sx:	6.9 gal / sx		
Casing Depth:			Yield:	ft ³ / sx	Yield:	1.43 ft ³ / sx		
Tubing / Liner: in			Annular Bbls / Ft.:	bbs / ft.	Annular Bbls / Ft.:	bbs / ft.		
Tool / P	Depth:		ft		Depth:	ft	Depth:	ft
	Depth:		ft		Annular Volume:	0.0 bbls	Annular Volume:	0 bbls
Displace			bbls		Excess:		Excess:	
			STAGE	TOTAL	. Total Slurry:	0.0 bbls	Total Slurry:	42.0 bbls
TIME	RATE	PSI	BBLs	BBLs	Total Sacks:	#DIV/0! sx	Total Sacks:	165 sx
			-	-	On Location - Spot Equipm	ent - Job & Safety Meeting		
				7.				
					Rig up to 5 1/2" casing			
	2.0				Start fresh water		, , , , , , , , , , , , , , , , , , ,	
	2.0		2.0	2.0	Hole loads & circulates			
	2.0		2.0	4.0	Stop pump - wait on bulk tr	uck		
			-	4.0				
1:20 AM				4.0	Start gel at 9.0 ppg via 5 1/2	" casing		
	3.0		27.0	31.0	Gel in - start H-Plug at 13.8			
1.4E A.	3.0		39.5	70.5	Cement circulates to surfac			
1:45 AM	3.0		2.5	73.0	Cement in - Stop pump - rig	down from well head. Used	165 sacks	
				73.0 73.0	lob Complete Time			
				73.0	Job Complete - Thank you!			
				73.0				
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1.00	Senten	0050		73.0		The same of the sa		
-		CREW	D-	Miles and	UNIT		SUMMARY	公司 图图15 年展 1
mp Ope	enter:				913	Average Rate	Average Pressure	Total Fluid
	lk #1:				526-521	2.5 bpm	#DIV/0! psi	73 bbls
	lk #2:	Daryl	Martinez		176-260			