KOLAR Document ID: 1530456

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 -				
				Spot Description:				
Address 1:			I .	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				
City:	State:	Zip: +						
Contact Person:			Footage					
Phone: ()								
Water Supply Well ENHR Permit #: Is ACO-1 filed? Yes Producing Formation(s):	Other: Ga S No If not, i	SWD Permit #: as Storage Permit #: swell log attached? Yes [nother sheet) Bottom: T.D.	Lease N Date We The plug	County: Lease Name: Well #: Date Well Completed: (Date) by: (KCC District Agent's Name)				
De	pth to Top:	Bottom: T.D	""					
De	pth to Top:	Bottom:T.D	——— Plugging	g Completed:				
Show depth and thickness	ss of all water, oil and gas	formations.						
Oil, Gas or V	Water Records		Casing Record (Surface, Conductor & Production)					
Formation	Content	Casing	Size	Setting Depth	Pulled Out			
		plugged, indicating where the muter of same depth placed from (but it is a first from the muter of same depth placed from (but it is a first from the muter of same depth placed from the same depth placed from the muter of same depth placed from the same depth placed from t	·		ods used in introducing it into the hole. If			
Plugging Contractor Lice	ense #:		_ Name:					
Address 1:			_ Address 2:	s 2:				
City:			State:					
Phone: ()								
Name of Party Responsil	ble for Plugging Fees:							
State of	Cou	unty,	, SS.					
(Print Name)			E	mployee 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.



Customer	N-10 EXPLORATI	ION	Lease & Well	# MEDICINE RIV	ER B# 11			Date		8/10/2020
Service District	MEDICINE LODG	E KS	County & Stat	14	Legals S/T/R	15-3/	S-11W	Job#	<u> </u>	0/10/2020
Job Type	P.T.A.	☑ PROD	ואו	SWD	New Well?	☐ YES	☑ No	Ticket#	ĝ-	2022
Equipment#	Driver				Analysis - A Discus	The second second			<u> </u>	3933
VAP	SCOTTY	☑ Hard hat		☑ Gloves	,	☐ Lockout/T			0.51 .	
266	KEVEN	☑ H2S Monitor		☑ Eye Protection	n			☐ Warning Signs & Flagging ☐ Fall Protection		
182-256	RON	☑ Safety Footwe	ear .	Respiratory F		☐ Required Permits ☐ Fall Protection ☐ Slip/Trip/Fall Hazards ☐ Specific Job Sequence/Expectations				
		☑ FRC/Protective			nemical/Acid PPE	Overhead				
		☑ Hearing Prote	-	☐ Fire Extinguis				☐ Muster Point/Medical Locations ssues noted below		
						mments	concerns or i	iues noted below		
Product/ Service	0.000									
Code		Desci	ription		Unit of Measure	e Quantity				Not Amount
CP055	H-Plug				sack	185.00				Net Amount
M015	Light Equipment Mi	leage			mi	15.00			 	\$1,683.50
M010	Heavy Equipment N	Mileage			mí	15.00				\$21.00 \$42.00
M025	Ton Mileage - Minin				each					\$210.00
C011	Cement Pump Serv	rice			ea	1.00				\$770.00
CP096	Cement Gel				lb	1,000.00				\$315.00
										72.000
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Custon	ner Section: On the	following scale ho	w would you cate I	Hurriagna Saminas						
		Tollowing Scale 110	would you tale I	numcane Services	inc.?	T-4-1-T	T-		Net:	\$3,041.50
Base	ed on this job, how	likely is it you wo	ould recommend	HSI to a colleagu	ie?	Total Taxable	\$ -	Tax Rate:		\sim
	cty 1 2 3		0 0 0 6 7 8		Extremely Likely	State tax laws deem certain products and services used on new wells to be sales tax exempt. Hurricane Services relies on the customer provided well information above to make a determination if services and/or products are tax exempt. Total: \$ 3,041.50				
ERMS: Cash in advance unless Humcane Services Inc. (HSI) has approved credit prior to sale. Credit lerms of sale for appro-						HSI Representative: D & SCO77				
a Casti ili duvano	со описъз питсяле Se	TVICES INC (HSI) has	appropriate conditioning	or to pale Credit larm	a al ania factoria a il				The second liverage of the second	

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 not 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 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 guarantees proper operational care of all customer owned equipment and property white HSI is on location performing services. The authorization below acknowledges the receipt and acceptance of all terms of the customer of the customer represents and warrants that bell and all associated equipment in acceptable

JEFFCAPPS BY D L SCOTT

CUSTOMER AUTHORIZATION SIGNATURE

ftv: 5-2020/08/05 mplv: 10-2020/08/05



Country SARBER Date Strict St	CEMENT	TR	EATME	NT REF	ORT	The open of the contract of				
County Field Rep Service Ser	Cust	tomer:	N-10 E	XPLOR/	ATION		MEDICINE RIVE	-D D !! 44	3022	
Field Rep JEFF CAPPS	City,	State:	e:			County				
Downhole Information Hole Sizes 7.875 in Hole Depth 11	Fiel	d Rep	JEFF C	APPS						
Calculated Slury - Tail Blonds Size Tail File Slury Scaling Size Tail Slury Scaling Size Tail Slury Scaling Size Tail Slury Tail Slury Tail Slury Tail Tail Slury Tail Tail Slury Tail Tail Slury Tail Sl							10-040-11	VV Service	e: P.I.A.	
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Casing Size 5 1/2 in]				The second secon	
Casing Street 5 12 in Casing Depth ft Tubing / Liner in Depth ft Tubing / Liner in Depth ft ft Tubing / Liner in Depth ft ft Depth ft Tubing / Liner Tool / Packers Tool Depth ft Tubing / Liner Tool / Packers Tool Depth ft Annular Volume 0.0 bbis ft Depth ft Annular Volume 0.0 bbis Total Store						Weight: 13.7 ppg				
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Normal	MANUFACTOR OF LAND	ON NOTE OF			1	Yield:	1.44 ft ³ / sx			
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Second				£4			0.0 bbls	Annular Volume	e: 0 bbls	
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TIME RATE PSI BBLS BBLS REMARKS 5.00 AM	war		Contract of		TOTAL	the life over made the second with lands proceeding		Contract of the last of the la		
5:00 AM	TIME	RATE	PSI				185 SX	Total Sacks	#DIV/0! sx	
- ON LOCATION WITRUCKS SAFETY MTG - 1 ST PLUG 5 1/2 CASING PERF @ 600 PT 160 SKS CEMENT 8:10 AM 3.0 200.0 8.0 8.0 8.0 EST GOOD CIRCULATION WIHZO 8:20 AM 3.0 150.0 40.0 68.0 ST MIXING GEL 1000 LBS 8:20 AM 5.0 150.0 40.0 68.0 CEMENT @ SUFFACE SHUTDOWN 68.0 CEMENT @ SURFACE SHUTDOWN 68.0 T4.4 PUMPED TOTAL 185 SKS CMT 60-40 POZ 4% TOTAL GEL 74.4 PUMPED TOTAL 185 SKS CMT 60-40 POZ 4% TOTAL GEL 74.4 JOB COMPLETE THANK YOU HSI CREW 74.4 JOB COMPLETE THANK YOU HSI CREW 74.4 T4.4 T4.4 T4.4 T4.4 T4.4 T4.4 T4.4	6:00 AM				-				· 图图 · · · · · · · · · · · · · · · · ·	
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74.4 CREW	-	+	\rightarrow	-+						
CREW UNIT SUMMARY Cementer: SCOTTY VAP Average Rate Average Pressure Total Fluid Pump Operator: KEVEN 266 2.5 bpm 183 psi 74 bbls		+	\rightarrow							
Cementer: SCOTTY VAP Average Rate Average Pressure Total Fluid Pump Operator: KEVEN 266 2.5 bpm 183 psi 74 bbls			CREW		74.4					
Pump Operator: KEVEN 266 Average Rate Average Pressure Total Fluid 2.5 bpm 183 psi 74 bbls	Cemer	nter		TY					RY	
2.5 bpm 183 psi 74 bbls									Total Fluid	
					$\overline{}$		2.5 bpm	183 psi	74 bbls	
Bulk #2:						102-230				

ftv: 5-2020/08/05 mplv: 10-2020/08/05