

**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**



**EDISON OPERATING COMPANY<sub>LLC</sub>**

**Sooter B1-2 Plug Job**

9-23-20 Alliance Well Service, ELI Wireline, Hurricane Services, Elk Transport on location, Load Csg & pressure test, held good, RIH to perforate @ 650' RU Hurricane to establish circulation, start Cmt, pump 225 sks, good Cmt to surface, Shut down, Top off Csg w/Cmt, RDMO Hurricane & Alliance Well Service



# INVOICE

DATE September 28, 2020  
INVOICE # 1387

470 Yucca Ln Pratt, KS 67124  
Office Phone (620)672-9100 Fax (620)672-5020

Bill To: EDISON OPERATING COMPANY LLC

Lease Name Sooter  
Well Number B 1-12  
County Barber  
State KS

QUANTITY	DESCRIPTION	UNIT PRICE	AMOUNT
3.5	9/22/20 Work Ticket #27095 Rig #25 Operator & 2 men	190.00	665.00
10.0	9/23/20 Work Ticket #27096 Rig #25 Operator & 2 men	190.00	1,900.00
6.0	9/21/20 Work Ticket #078 Sx Portland Cement	15.00	90.00
110.0	Mileage	1.50	165.00
SUBTOTAL			2,820.00
TAX RATE			7.50%
SALES TAX			211.50
TOTAL			\$ 3,031.50

*Rig to Pump well  
9090*

# ALLIANCE WELL SERVICE, INC.

Nº 27095

470 Yucca Lane • Pratt, KS 67124

24 Hour Phone: 620-672-9100 • Fax: 620-672-5020

WORK TICKET

NEW WELL

OLD WELL

RIG # 25

DATE 9-22-20

COMPLETE

INCOMPLETE

JOB TYPE plug job

LEASE sooter

WELL # B 1-12

SEC \_\_\_\_\_ TWP \_\_\_\_\_

ANG \_\_\_\_\_

COMPANY Edison operation

ADDRESS \_\_\_\_\_

CITY / STATE \_\_\_\_\_

ZIP CODE \_\_\_\_\_

COUNTY Barber

STATE KS

POSITION	NAME	HRS REVENUE	TRAVEL	NON REVENUE	TOTAL HRS WKD
OPERATOR	<u>Salvador</u>				<u>3 1/2</u>
DERRICK HAND	<u>Felipe</u>				<u>3 1/2</u>
FLOOR HAND	<u>Albino</u>				<u>3 1/2</u>

JTS	PULLED	WELL EQUIPMENT	JTS	RRN
		RODS		
		RODS		
		PONY RODS		
		POLISHED RODS		
		PUMP / VALVES		
		TUBING		
		PUPS		
		SN / BBL		
		ANCHOR / PACKER		
		OTHER		

DESCRIPTION OF WORK BEING PERFORMED

To location with rig spot in dty

Double Drum Rig w/2 Men _____	Hrs @ _____	Per Hour _____	Total _____
Travel Time _____	Hrs @ _____	Per Hour _____	Total _____
Swab Cups No. _____ Size _____	Type _____	Per Each _____	Total _____
Swab Cups No. _____ Size _____	Type _____	Per Each _____	Total _____
Misc _____			Total _____
Misc _____			Total _____
Misc _____			Total _____
Misc _____			Total _____
Misc _____			Total _____
Misc _____			Total _____
x _____			Total _____

**TOTAL** \_\_\_\_\_

Company Representative \_\_\_\_\_

Date \_\_\_\_\_

# ALLIANCE WELL SERVICE, INC.

No 27096

470 Yucca Lane • Pratt, KS 67124

24 Hour Phone: 620-672-9100 • Fax: 620-672-5020

WORK TICKET

NEW WELL

OLD WELL

RIG # 25

DATE 9-23-20

COMPLETE

INCOMPLETE

JOB TYPE plug job

LEASE 50266

WELL # B 1-12

SEC \_\_\_\_\_ TWP \_\_\_\_\_

ANG \_\_\_\_\_

COUNTY Barber

STATE KS

COMPANY edison operation

ADDRESS \_\_\_\_\_

CITY / STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

POSITION	NAME	HRS REVENUE	TRAVEL	NON REVENUE	TOTAL HRS WKD
OPERATOR	<u>Salvador</u>				<u>10</u>
DEARRICK HAND	<u>Felipe</u>				<u>10</u>
FLOOR HAND	<u>Albino</u>				<u>10</u>

JTS	PULLED	WELL EQUIPMENT	JTS	RRN
		RODS		
		RODS		
		PONY RODS		
		POLISHED RODS		
		PUMP / VALVES		
		TUBING		
		PUPS		
		SN / BBL		
		ANCHOR / PACKER		
		OTHER		

DESCRIPTION OF WORK BEING PERFORMED

To location safety meeting rig up check well pressure 0 psi hook up water truck load well with 60 bbls then hook up cementing pressure it up to 300 psi it hold then rig up loggers went down shoot pills at 650' from surface rig down logger and rig up cementing wait on water till 11:35 hook it up then put 250 sucks then rig down cementing clean up equipment clean up location rig down drive rig to yard

Double Drum Rig w/2 Men _____	Hrs @ _____	Per Hour _____	Total _____
Travel Time _____	Hrs @ _____	Per Hour _____	Total _____
Swab Cups No. _____ Size _____ Type _____	Per Each _____	Total _____	Total _____
Swab Cups No. _____ Size _____ Type _____	Per Each _____	Total _____	Total _____
Misc _____	Total _____	Total _____	Total _____
Misc _____	Total _____	Total _____	Total _____
Misc _____	Total _____	Total _____	Total _____
Misc _____	Total _____	Total _____	Total _____
Misc _____	Total _____	Total _____	Total _____
Misc _____	Total _____	Total _____	Total _____
x _____	Total _____	Total _____	TOTAL _____

Company Representative \_\_\_\_\_ Date \_\_\_\_\_





**HURRICANE SERVICES INC**

Remit To: Hurricane Services, Inc.  
250 N. Water, Suite 200  
Wichita, KS 67202  
316-303-9515

Customer:  
EDISON OPERATING CO LLC  
8100 E 22ND ST N  
BUILDING 1900  
WICHITA, KS 67226

Invoice Date: 9/23/2020  
Invoice #: 0349469  
Lease Name: Sooter 'B'  
Well #: 1  
County: Barber, Ks  
Job Number: ICT4183  
District: Medicine Lodge

Date/Description	HRS/QTY	Rate	Total
PTA	0.000	0.000	0.00
H-Plug	225.000	10.400	2,340.00
Light Eq Mileage	20.000	1.600	32.00
Heavy Eq Mileage	20.000	3.200	64.00
Ton Mileage Minimum	1.000	240.000	240.00
Cement Pump Service	1.000	600.000	600.00

*CEMENT TO Plug WELL  
9080*

Net Invoice	3,276.00
Sales Tax:	156.20
<b>Total</b>	<b>3,432.20</b>

**TERMS:** Net 30 days. Interest may be charged on past due invoice at rate of 1 ½% per month or maximum allowed by applicable state or federal laws. HSI has right to revoke any discounts applied in arriving at net invoice price if invoice is past due. If revoked, full invoice price without discount plus additional sales tax, as applicable, is due immediately and subject to interest charges. Customer agrees to pay all collection costs directly or indirectly incurred by HSI in the event HSI engages a third party to pursue collection of past due invoice.

**SALES TAX:** Services performed on oil, gas and water wells in Kansas are subject to sales tax, with certain exceptions. HSI relies on the well information provided by the customer in identifying whether the services performed on wells qualify for exemption.

**WE APPRECIATE YOUR BUSINESS!**









**ELI**  
**WIRELINE SERVICES**  
 PO BOX 549  
 HAYS, KS 67601

# Invoice

Date	Invoice #
9/23/2020	6329

<b>Bill To</b>
EDISON OPERATING CO LLC 8100E 22ND STREET NORTH BLDG 1900 WICHITA, KS 67226

<b>Job Info</b>
Sooter B #1-2 Barber County, KS Field Ticket #5276

P.O. No.	Terms
	Net 30

Quantity	Description	Amount
1	Service Charge	500.00
1	Min Charge 3-1/8 Slick 10 Jets - per job	1,450.00
	Total Charges for Service	1,950.00
	Cased Hole - Discount	-390.00

*PERF Cas For Perm*  
9080

Please remit to above address.	<b>Total</b>	<b>\$1,560.00</b>
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