

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

Elite Cementing & Acidizing of KS, LLC
 PO Box 92
 Eureka, KS 67045



Date	Invoice #
11/9/2020	5337

Bill To	
MWK Petroleum Co. 508 Stone Lake Court Augusta, KS 67010	
Customer ID#	1313

Job Date	11/6/2020
Lease Information	
Means #1	
County	Sedgwick
Foreman	RM

Item	Description	Qty	Terms	Net 15
			Rate	Amount
C105	Cement Pump-Plug (old well)	1	785.00	785.00T
C107T	Pump Truck Mileage-taxable	45	4.20	189.00T
C203	Pozmix Cement 60/40	100	13.40	1,340.00T
C206	Gel Bentonite	340	0.21	71.40T
C205	Calcium Chloride	85	0.63	53.55T
C108AT	Ton Mileage (min. charge)-taxable	1	365.00	365.00T
D101T	Discounts on Services		-66.95	-66.95T
D102	Discount on Materials		-73.23	-73.23T

We appreciate your business!

Phone #	Fax #	E-mail
620-583-5561	620-583-5524	rene@elitecementing.com

Send payment to:
 Elite Cementing & Acidizing of KS, LLC
 PO Box 92
 Eureka, KS 67045

Subtotal	\$2,663.77
Sales Tax (7.5%)	\$199.78
Total	\$2,863.55
Payments/Credits	\$0.00
Balance Due	\$2,863.55

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



Cement or Acid Field Report
 Ticket No. **5337**
 Foreman Russell McCoy
 Camp Eureka

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State
10-6-20	1313	Means # 1				Sedawick	KS
Customer			Safety Meeting	Unit #	Driver	Unit #	Driver
MwK Petroleum Co.			Rm	105	Jasen		
Mailing Address			JASU	113	Zevi		
508 Stone Lake Court			Zevi	120	Russell		
City	State	Zip Code					
Augusta	Ks	67010					

Job Type P.T.A. Oilwell Hole Depth _____ Slurry Vol. 25 861 Tubing 2 3/8
 Casing Depth R.R. set 1920 Hole Size _____ Slurry Wt. _____ Drill Pipe _____
 Casing Size & Wt. 4 1/2 Cement Left in Casing _____ Water Gal/SK _____ Other _____
 Displacement _____ Displacement PSI _____ Bump Plug to _____ BPM 4

Remarks: Safety meeting, Plug well as follows
35 SK's @ 1744 10-9-20 by Dave
65 SK's @ 275 to surface 10-6-20 by Russell
100 SK's TOTAL
 NOTE Dynolog perfed @ 255'

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C-105	1	Pump Charge	785.00	785.00
C-107	45	Mileage	4.20	189.00
C-203	100	SK's 60/40 Puzmix	13.40	1340.00
C-206	340 #	Gel = 4%	.21	71.40
C-205	85 #	CaCl2 = 1%	.63	53.55
C-108A	4.3	Tow Tow Mileage Bulk Truck x 45	1.40/mile	365.00
				2,803.95
			- 5%	<150.70>
			7.5 % Sales Tax	210.30
				2763.55

Authorization by Tyrrell Phillips Title CO/REP Total _____

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.