KOLAR Document ID: 1565863

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

Address 1:	OPERATOR: License #:	API No. 15
Address 2:	Name:	Spot Description:
Address 2:	Address 1:	Sec Twp S. R East West
Contact Person:		Feet from North / South Line of Section
Phone: ()	City: State: Zip: +	Feet from East / West Line of Section
Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic Water Supply Well Other: SWD Permit #: County: Lease Name: Well #: ENHR Permit #: Gas Storage Permit #: Date Well Completed: The plugging proposal was approved on: Date Well Completed: 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. Plugging Commenced: Plugging Completed: Plugging Completed: Plugging Completed: Plugging Completed: Plugging Completed:	Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Water Supply Well Other: SWD Permit #: County. ENHR Permit #: Gas Storage Permit #: Lease Name: Well #: Is ACO-1 filed? Yes No If not, is well log attached? Yes No Producing Formation(s): List All (<i>If needed attach another sheet</i>)	Phone: ()	NE NW SE SW
	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.	Lease Name: Well #: Date Well Completed: (Date) The plugging proposal was approved on: (Date) by: (KCC District Agent's Name) Plugging Commenced: (KCC District Agent's Name)
		Plugging Completed:

Show depth and thickness of all water, oil and gas formations.

Oil, Gas or Water	r 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.
(Print Name)	Employee 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.

Submitted Electronically

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EEMENT	TRE	ATMEN'	T REPO	DRT						
		McCoy F			Well: V	Vhitaker Trust 'B' 1-27 OWW0) Ticket:	wp1200		
City, State: Copeland Kansas Coun					County:					
Field Rep: Dave Oller S-T-						27-29s-31w	Service:	0hp		
Dow	nhole	nformatio	n		Calculated Slu	rrv - Lead	Galcu	ılated Slurry - Tail		
Hole	e Size:	7 7/8	in		Blend:	H plug	Blend:			
Hole I	Depth:	1995	ft		Weight:	13.7 ppg	Weight:	PPg		
Casing	g Size:	5 1/2	in		Water / Sx:	6.9 gal / sx	Water / Sx:	gal / sx		
Casing I	Depth:		ft		Yield:	1.43 ft ³ / sx	Yield:	ft ³ /sx		
Tubing /	Liner:		in		Annular Bbls / Ft.:	bbs / ft.	Annular Bbls / Ft.:	bbs / ft.		
	Depth:		ft		Depth:	ft	Depth:	ft		
Tool / P:					Annular Volume:	0.0 bbis	Annular Volume:	0 bbls		
	Depth:		ft		Excess:		Excess:			
Displace	ement:		S'AN O'L		Total Slurry:	0.0 bbis	Total Slurry:	0.0 bbls		
TIME	RATE		STAGE BBLs	TOTAL BBLs	Total Sacks:	0 sx	Total Sacks:	0 sx		
7:40 AM		PSI	T	BBLS				وتعليلهم فتعطيها كالتبا		
7:40 AM	1		•		on location job and safet rig up to casing	y				
8:15 AM		100.0	13.0	13.0	load hole with gel and wa	ater				
8:20 AM	-	100.0	10.0	13.0	mix 50 sack cement		<u>6</u>			
	-			13.0	cement in					
				13.0	start displacement					
8:25 AM	4.0	50.0	44.0	57.0	displacement in					
2nd plug										
10:12 AM	3.0		7.0	7.0	load hole with gel and w	ater				
10:15 AM	4.D	100.0	10.0	17.0	MIX 40 SACKS CEMENT					
10:20 AM	3.0	30	12.5	29.5	DISPLACE 12.5 BBLS					
3RD PLUG										
11:22 AM	1		5.0		load the hole					
11:25 AM	2.0		5.0		mix 20 sacks cement and	d circulate to surface				
	-									
	-									
		CREW			UNIT		SUMMAR	V		
Cer	nenter:		ungardt		916	Average Rate	Average Pressure	Total Fluid		
Pump Op			lamore		176/521	3.3 bpm	50 psi	97 bbls		
	Bulk #1:	K Les			181/532	ore shull	1 00 por			
	Bulk #2:									

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Customer	McCoy Petroleum		Lease & Well #	ease & Well # Whitaker Trust 'B' 1-27 OWV			WO		3/9	/2021	
Service District	Pratt Kansas		County & State haskell Kansas		Legals S/T/R			Date			
Job Type	Ohp	PROD			New Well?		√ No	Ticket #	w	o1200	
Equipment #	Driver		_	Job Safety A	alysis - A Discuss	ion of Hazards &	Safety Pro	cedures			
916	M Brungardt	✓ Hard hat		Gloves		Lockout/Tag		Warning Sign	s & Flagging		
176/521	G Mclamore	H2S Monitor		🕑 Eye Protection	ı	Required Pe	rmits	Fall Protectio	n		
181/532	K Lesely	Safety Footw	ear	Respiratory P	otection	Slip/Trip/Fal	l Hazards	Specific Job S	equence/Exp	ectations	
		FRC/Protectiv	ve Clothing	🗌 Additional Ch	emical/Acid PPE	✓ Overhead H	azards	🗌 Muster Point	/Medical Loca	tions	
		Hearing Prot	ection	Fire Extinguis	ner	Additional concerns or issues noted below					
					Com	mments					
Product/ Service Code		Desc	ription		Unit of Measure	Quantity				Net Amount	
cp055	H-Plug				sack	110.00				\$1,215.50	
cp120	Cello-flake				lb	28.00				\$41.65	
cp096	Cement Gel				lb	1,000.00				\$382.50	
m015	Light Equipment Mi	leage			mi	\$0.00				\$85.00	
m010	Heavy Equipment N	Vileage			mi	50.00				\$170.00	
in020	Ton Mileage				tm	238.00				\$303,45	
c011	Cement Pump Serv	vice			ea	1.00				\$935.00	
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				+)							
Cust	omer Section: On II	ne foliowing scale	how would you rate	Hurricano Service	s Inc ?				Net	\$3,133.10	
						Total Taxable	S -	Tax Rate:		\geq	
	uneey 1 2	ow likely is it you	would recommend		18? Extremely Ukety	used on new well Hurricane Service	s to be sales t is relies on the bove to make	e customer provided a determination T	Sale Tax: Total:	\$	
						HSI Represe	entative:				

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 %% per month or the maximum allowable by applicable state or federal laws. In the event it is necessary to employ an agency and/or altorney to affect the collection. Customer hareby agrees to pay all fees directly incurred for such collection. In the event that Customer's account with HSI becomes delimpuent, 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 royables and stated price adjustments. Actual charges may vary depending upon time, equipment, and material utimately 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 werranty is stated or implied. HSI assumes no itability for advice or recommendations made concerning the results form 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 proger operational care of all customer owned equipment and property while HSI is no local care of all customer towate equipment and property while HSI is no location performings. The authorization below acknowledges the receipt and acceptance of all terms conditions stated above, and Hurricane has been provided accurate well information in determining taxable services.

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CUSTOMER AUTHORIZATION SIGNATURE

