## KOLAR Document ID: 1569291

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

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.
(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





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

Customer: VESS OIL CORP. 1700 N WATERFRONT PKWY BLDG 500 WICHITA, KS 67206	Invoice Lease Nam Well Count Job Numbe	Invoice Date: Invoice #: Lease Name: Well #: County: Job Number: District:		
Date/Description	HRS/QTY	Rate	Total	
РТА	0.000	0.000	0.00	
H-Plug	297.000	11.050	3,281.85	
Hulls	12.000	42.500	510.00	
Light Eq Mileage	55.000	1.700	93.50	
Heavy Eq Mileage	55.000	3.400	187.00	
Ton Mileage	726.900	1.275	926.80	

4,999.15
260.55
5,259.70

**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!



Customer	Vess Oil Corp		Lease & Well #	Werth #2				Date	4	/1/2021
Service District	Oakley		County & State	Sheridan KS	Legals S/T/R	2-10s	-26w	Job #		
Job Type	PTA	PROD	LI INJ	SWD	New Well?	YES	V No	Ticket #	Ŵ	VP 1259
Equipment #	Driver			Job Safety Ar	- nalysis - A Discus	sion of Hazards	& Safety Pre	ocedures		
78	Fennis	Hard hat		Gloves		Lockout/Ta	gout	Warning Sig	ns & Flagging	1
230	Mike	H2S Monitor		🔽 Eye Protection	1	Required P	ermits	Fall Protectio	01 0	
194/204	Jimmie	Safety Footw	ear	Respiratory Pr	otection	Slip/Trip/Fa	all Hazards	Specific Job	Sequence/Exp	pectations
		FRC/Protectiv	/e Clothing	Additional Che	emical/Acid PPE	🕖 Overhead H	Hazards	🕗 Muster Poin	t/Medical Loc	ations
		Hearing Prote	ection	🖂 Fire Extinguish	ier	Additional	concerns or i	ssues noted below	J	
						nments				
		3rd party riç	j crew- comn	nunicate, dum	ping cottons	eed hulls -	don't get	bag stuck i	n paddles	, uneven
		walking sur	faces - 2 pers	son lift / watcl	n footing, lay	ing down tu	ibing - do	on't stand un	ider tubin	g. Nearest
		hospital Go	ve KS phone	# 785-754-33	41 muster po	int entrance	e to locat	ion head co	unt Fenni	s G
Product/ Service Code		Desc	ription		Unit of Measure	Quantity				Net Amount
CP055	H-Plug				sack	397.00	1			\$3,281.85
CP165	Cotionseed Hulls				lb	650.00	1			\$510.00
2015	Light Equipment Mil	eage			mi	55.00				\$93.50
M030	Heavy Equipment N	lileage			mi	\$5.05				\$187.00
M020	Ton Mileage				tm	726.90				\$926.80
							L			
_										
Custo	mer Section: On the	following scale ht	ow would you rate )	Hurricane Services	inc.?				Net:	\$4,999.15
						Total Taxable	\$ .	Tax Rate:	1466	\$4,000.10
Bas	sed on this job, how	v likely is it you w	ould recommend	HSI to a colleague	?	Slate lax laws dec	em certain proc	lucts and services	Sale Tax:	\$ -
							s relies on the	customer provided		
Ur	Nikoly 1 2 3	3 4 5	6 7 8	9 10 Esit	remely Likely	well information a services and/or pr	bove to make a	a determination if	Tak	
									Total:	\$ 4,999.15
						HSI Represe	entative:	Fennis Gard	una	

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 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 net invoice price. Upon revocation, the full invoice price withhuld discount is immediately due and subject to collection. Prices quoted are estimates only and are good for 30 days from the date of issues. Pricing does not include federal, state, or local taxes, or royaities 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 warrantly is stated or implied. HSI assumes no liability 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 no guarantees for future production performance. Customer represents and HSI makes no guarantees for early and 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/conditions stated above, and Hurricane has been provided accurate well information in determining texable services.

Bres

#### CUSTOMER AUTHORIZATION SIGNATURE

HOI	

# CEMENT TREATMENT REPORT

CEMEN	TTR	EATMEN	IT REP	ORT			- Contractor	and the second se			
Cus	stomer:	Vess O	il Corp		Well:	Werth #	2 Ticket	WP 1259			
City,	, State:				County:	Sheridan I					
Fiel	ld Rep:	Fennis	Gardund	)	S-T-R:	2-10s-26					
						2.103.20	N Service	ΡΤΑ			
Dow	vnhole	Informati	on		Calculated Siu	rry - Lead	Ca	Iculated Slurry - Tail			
Hol	le Size:		in		Blend:	H Plug	Blend	a dana da ana ana ana ana ana ana ana an			
Hole	Depth:		ft		Weight:	13.8 ppg	Weight				
	g Size:	4 1/2	in		Water / Sx:	6.9 gal/sx	PP5				
Casing		4099	ft		Yield:	1.42 ft <sup>3</sup> /sx	Yield				
Tubing /		2 3/8	in		Annular Bbis / Ft.:	bbs / ft.	Annular Bbls / Ft.	bbs / ft.			
	Depth:	3810	ft		Depth:	3810 ft	Depth	ft			
Tool / P					Annular Volume:	0.0 bbls	Annular Volume	0 bbls			
	Depth:		ft		Excess:		Excess	:			
Displace	ement:	14.8	bbls	-	Total Slurry:	75.0 bbls	Total Slurry	0.0 bbls			
TIME	DATE	noi	STAGE	TOTAL	Total Sacks:	297 sx	Total Sacks	0 sx			
9:45 AM	RATE	PSI	BBLs	BBLs	REMARKS			And the Party of the Party of the			
10:00 AM				~	Journey management mee	eting					
11:00 AM	1 1				Convoy to location						
11:05 AM					Arrive on location						
11:20 AM	1				Safety meeting						
11:45 AM					Spot in / rig up equiptment						
11:50 AM		300.0	12.0	12.0	Rig land casing @ 3828'						
11:59 AM		40.0	21.5	33.5		catch fluid , 12 bbls pump og with 300 lbs of cotton se					
12:10 PM		30.0	8.8	42.3		H2O HOC- 1387.09' TOC-					
12:15 PM				42.3	S/D TOOH to 2488'	H20 H00-1387.09 100-	2440.91				
12:49 PM	2.6	40.0	21.5	63.8		og with 200 lbs cotton seed	bulle				
12:59 PM	2.6	110.0	3.7			of H2O HOC - 1387.09' TOC					
					TOOH to 1244'		- 1100.01				
1:30 PM	3.0	350.0	24.5			a with 100lbs of cotton see	thulls till cement circulated to	zurfaco			
					ТООН		and an oonicht thrould be to				
2:30 PM	2.0	80.0	3.8		Top off 4.5" casing with 15	sx of H Plug @ 13.8 ppg					
2:38 PM	1.0	300.0	3.8				opg pressure up to 300 psi shut	in			
2:45 PM					Wash up pump, rig down e						
3:00 PM					Leave location						
					Total H Plug mixed = 297 s	x		and a linear state of the state			
	1										
		CREW		Constanting of the	UNIT		SUMMAR	Y			
	enter:	Fennis			78	Average Rate	Average Pressure	Total Fluid			
Pump Ope		Mike			230	2.4 bpm	156 psi	100 bbls			
	lk #1:	Jimmle	5	1	194/204						

