

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.

(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

Orr Enterprises, Inc.

P.O. Box 1706
 Duncan, OK 73534
 USA

INVOICE

Invoice Number: 13602
 Invoice Date: Jun 15, 2021
 Page: 1

Voice: 580-252-5120
 Fax: 580-255-3943

Duplicate

Bill To:
SCOUT ENERGY MANAGEMENT LLC 14400 MIDWAY ROAD DALLAS, TX 75244

Ship to:
PERRILL #1-7 DANNY WILSON

Customer ID	Customer PO	Payment Terms	
SCOUT		Net 30 Days	
Sales Rep ID	Shipping Method	Ship Date	Due Date
00ORRO	none		7/15/21

Quantity	Item	Description	Unit Price	Amount
1		TURNKEY PLUG & ABANDON: PERRILL #1-7	33,460.00	33,460.00
4,142		CREDIT FOR SALVAGE: FT 2 7/8 IPC TUBING	1.50	-6,213.00

Check/Credit Memo No:

Subtotal	27,247.00
Sales Tax	
Total Invoice Amount	27,247.00
Payment/Credit Applied	
TOTAL	27,247.00

SERVICE

ORR ENTERPRISES, INC.

P. O. BOX 1706 • DUNCAN, OK 73534

Shop Phone 580-251-9618

SERVICE ORDER

13602

DATE 6/15/21		CUSTOMER ORDER NO. Danny Wilson		SHIPPED VIA Rig 401	
LEASE & WELL NUMBER Perrill # 1-7			COUNTY Stevens		FIELD
CUSTOMER	Scout Energy Management, LLC			COMPANY REPRESENTATIVE Ronnie Orr	
ADDRESS 14400 Midway Road					
CITY & STATE Dallas, TX		ZIP CODE 75244			
Csg. Size				CUSTOMER	
Tbg. Size				By	

QUANTITY	UNIT	REMARKS	MATERIAL	UNIT PRICE	AMOUNT
1	ea	TurnKey Plug & Abandon			36,310 ⁰⁰
					33,460 ⁰⁰
1	ea	Credit Salvage			< 6213.00 >
		4142' - 2 ⁷ / ₈ IPC Tubing @ 1 ⁵⁰ / ₁ ' = 6213 ⁰⁰			
					\$ 27,247 ⁰⁰
				SALES TAX	
				TOTAL	\$ 27,247 ⁰⁰

