

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

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



Cement or Acid Field Report
 Ticket No. **5749**
 Foreman Steve Mead
 Camp Eureka

API 15-035-24653

Date	Cust. ID #	Lease & Well Number		Section	Township	Range	County	State
7-15-21	1097	Ralph #1		20	33	4	Cowley	Ks
Customer			Safety Meeting	Unit #	Driver		Unit #	Driver
ALTON OIL				104	ALAN M.			
Mailing Address				114	SHANNON			
P.O. Box 117								
City		State	Zip Code					
Winfield		Ks	67156					

Job Type P.T.A. old well Hole Depth _____ Slurry Vol. 31 bbls Tubing 325' 2 3/4
 Casing Depth _____ Hole Size _____ Slurry Wt. _____ Drill Pipe _____
 Casing Size & Wt. _____ Cement Left in Casing _____ Water Gal/SK _____ Other _____
 Displacement _____ Displacement PSI _____ Bump Plug to _____ BPM _____

Remarks: Softy Meeting: Pull out 834' 5 1/2 casing. Run 325' 2 3/4
Tubing. Break Circulation w/ Fresh Water Mix 1255Lbs 60/40
Pozmix Cement 4% Gels. Good Cement Returns To Surface.

Thank You

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C-105	1	Pump Charge	785.00	785.00
C-107	40	Mileage	4.20	168.00
C-203	126 SK	60/40 Pozmix	14.25	1843.75
C-206	430 ⁵	Gel 4%	.28	120.40
C-108B		Tax Mileage	M/C	365.00
			-5%	3282.15
			Sales Tax	164.10
			6.5% Sol. Tax	202.67
			50701	3320.72
Authorization <u>[Signature]</u> Title _____				

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.



2150

1013 240th AVENUE • HAYS, KANSAS 67601 • 785-621-2135

Date 7-15-2021

CHARGE TO: Alton Oil, LLC.
 ADDRESS _____
 R/A SOURCE NO. _____ CUSTOMER ORDER NO. OW
 LEASE AND WELL NO. Ralph #1 FIELD Posey NE
 NEAREST TOWN Winfield COUNTY Cowley STATE Kansas
 SPOT LOCATION 330 FSL + 330 FWL SEC. 10 TWP. 33S RANGE 4E
 ZERO KB 9' AGL CASING SIZE 5 1/2 WEIGHT _____
 CUSTOMER'S T.D. 3493 LOG-TECH TD _____ FLUID LEVEL 720
 ENGINEER S. Chesney OPERATOR R. Bollig

PERFORATING				
Description	No. Shots	Depth		Amount
		From	To	
992.7			824.8	
9.3			9.2	
1002			834	

DEPTH AND OPERATIONS CHARGES					
Description	Depth		Total No. Pt	Price Per Pt	Amount
	From	To			
Setting Charge	0	3130			1500.00
5 1/2 CIBP	3130				1050.00
2sx Cement Bailer	0	3130			1000.00
5 1/2 Casing Cut Bongo	0	1002			2500.00
5 1/2 Casing Cut Bongo	0	834			2500.00
Paid on location Check # 3146					

MISCELLANEOUS			
Description	Quantity	Amount	
Service Charge T904		1500.00	
T.J.			
A.O.L.		35.50	
S.J.		5%	
F.J. T.W.T.			

PRICES SUBJECT TO CORRECTION BY BILLING DEPARTMENT

RECEIVED THE ABOVE SERVICES ACCORDING TO THE TERMS AND CONDITIONS SPECIFIED ON THE REVERSE SIDE TO WHICH WE HEREBY AGREE.

Customer Signature _____ Date _____

..... Sub Total	3771.00	500.00
..... Tax	3372.00	00
.....	6.5%	
Total	3591	18