

**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.

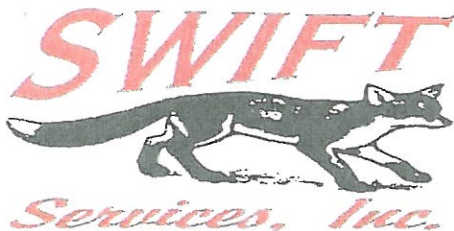
Oil, Gas or Water Records		Casing Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size	Setting Depth	Pulled Out

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**



P. O. Box 466  
 Ness City, KS 67560  
 Off: 785-798-2300



# Invoice

DATE	INVOICE #
7/15/2021	35122

BILL TO
Citation Oil & Gas 1016 Hwy 40 Bypass Hays, KS 67601

- Acidizing
- Cement
- Tool Rental

TERMS	Well No.	Lease	County	Contractor	Well Type	Well Category	Job Purpose	Operator
Net 30	B #1	Herbert	Ellis	Express Well	Oil	Workover	PTA	David E
PRICE REF.	DESCRIPTION				QTY	UM	UNIT PRICE	AMOUNT
575W	Mileage - 1 Way				20	Miles	5.00	100.00T
576W-P	Pump Charge - PTA				1	Job	925.00	925.00T
290	D-Air				4	Gallon(s)	42.00	168.00T
275	Cotton Seed Hulls				6	Sack(s)	35.00	210.00T
328-4	60/40 Pozmix (4% Gel)				360	Sacks	11.00	3,960.00T
278	Calcium Chloride				5	Sack(s)	40.00	200.00T
581W	Service Charge Cement				600	Sacks	1.85	1,110.00T
583W	Drayage				965	Ton Miles	0.95	916.75T
	Subtotal							7,589.75
Customer Disc...	Customer Discount Per Ted						-5.00%	-379.49
	Subtotal							7,210.26
	Sales Tax Ellis County						7.00%	504.72
<b>We Appreciate Your Business!</b>						<b>Total</b>		\$7,714.98



Services, Inc.

CHARGE TO: **Citation Oil & Gas**  
 ADDRESS  
 CITY, STATE, ZIP CODE

TICKET **35122**

PAGE 1 OF

1. <b>Hays Ks</b>	WELL/PROJECT NO. <b>B # 1</b>	LEASE <b>Herbert</b>	COUNTY/PARISH <b>Ellis</b>	STATE <b>Ks</b>	CITY	DATE <b>7-15-21</b>	OWNER
2. <b>Ness City Ks</b>	TICKET TYPE <input type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <b>Express</b>	RIG NAME/NO.	SHIPPED VIA <b>AS</b>	DELIVERED TO <b>location</b>	ORDER NO.	
3.	WELL TYPE <b>oil</b>	WELL CATEGORY <b>ASABOURED</b>	JOB PURPOSE <b>PTA</b>	WELL PERMIT NO.		WELL LOCATION	
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS <b>AFE # 210 328</b>						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	MILEAGE	QTY.	U/M	UNIT PRICE	AMOUNT
		LOC	ACCT	DF						
535					TRK # 111	20	mi	5.00	100.00	
536 P					Pump charge - PTA	1	EA	925.00	925.00	
290					D-Air	4	GR	42.00	168.00	
275					Cotton seed hulls	6	bx	35.00	210.00	
328-4					60/40 pozmix 4 1/2 gal	300	sx	11.00	3300.00	
278					Calcium chloride	5	bx	40.00	200.00	
					Service charge cement	600	bx	85.00	51000.00	
					Drayage	915	tm	95.00	86925.00	

**LEGAL TERMS:** Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS.

**X**

DATE SIGNED \_\_\_\_\_ TIME SIGNED \_\_\_\_\_  A.M.  P.M.

**REMIT PAYMENT TO:**  
**SWIFT SERVICES, INC.**  
 P.O. BOX 466  
 NESS CITY, KS 67560  
 785-798-2300

**SURVEY**  
 OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?  YES  NO  
 WE UNDERSTOOD AND MET YOUR NEEDS?  YES  NO  
 OUR SERVICE WAS PERFORMED WITHOUT DELAY?  YES  NO  
 WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?  YES  NO  
 ARE YOU SATISFIED WITH OUR SERVICE?  YES  NO  
 CUSTOMER DID NOT WISH TO RESPOND

PAGE TOTAL **7589.75**  
 TOTAL **9914.98**

SWIFT OPERATOR **David Eggerton** APPROVAL \_\_\_\_\_

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE 7-15-21 PAGE NO.

CUSTOMER		WELL NO.		LEASE		JOB TYPE		TICKET NO.	
CITATION OIL		B # 1		HERBERT		PTA		35122	
CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS	
				T	C	TUBING	CASING		
	800								ON LOCATION
									2 3/8 x 5 1/2
									1st Plug @ 3892'
		5	10			400			Pump WTR TO BREAK CIRC.
		5	26			1200			Pump CMT - 100 SX 3% CL W/ 200 Hulls
		5	8			1200			Disp
									2nd Plug @ 2865'
		5	26			900			Pump CMT - 100 SX W/ 200 # hulls
		5	5			900			Disp -
									3rd plug - 1862
		5	26			500			pump cmt - 100 SX W/ 200 # hulls
		5	3			500			Disp
									3rd plug @ 810
									pump cmt to circ - 50 SX
									T.I.D.O. H W/ TB6
			0			200			Top off 8 5/8 - 0 SX
			3			200			Top off 5 1/2 - 10 SX
									JOB COMPLETE
									THANKS
									DAVID, ZACH, ISAAC & BLAINE