

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 #
6/17/2021	33717

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

HAYS KANSAS
RECEIVED BY [Signature]
APPROVED BY [Signature]
JUN 21 2021
LEASE Thompson
WELL# 3
LOE NRE AFE# 210079

- Acidizing
- Cement
- Tool Rental

TERMS	Well No.	Lease	County	Contractor	Well Type	Well Category	Job Purpose	Operator
Net 30	#3	Thompson	Ness	H-D Oilfield	Oil	Workover	PTA	Wayne
PRICE REF.	DESCRIPTION				QTY	UM	UNIT PRICE	AMOUNT
575W	Mileage - 1 Way				10	Miles	5.00	50.00T
576W-P	Pump Charge - PTA				1	Job	925.00	925.00T
275	Cotton Seed Hulls				2	Sack(s)	35.00	70.00T
328-4	60/40 Pozmix (4% Gel)				70	Sacks	11.00	770.00T
290	D-Air				1	Gallon(s)	42.00	42.00T
581W	Service Charge Cement				70	Sacks	1.85	129.50T
582W	Minimum Drayage Charge				1	Each	250.00	250.00T
	Subtotal							2,236.50
Customer Disc...	Customer Discount Per Ted						-10.00%	-223.65
	Subtotal							2,012.85
	Sales Tax Ness County						6.50%	130.84

We Appreciate Your Business!

Total

\$2,143.69



CHARGE TO: STATION OIL - GAS
 ADDRESS
 CITY, STATE, ZIP CODE

TICKET
33717

PAGE 1 OF 1

SERVICE LOCATIONS
 1. Ness, Co., KS

WELL/PROJECT NO. #2 LEASE THOMPSON COUNTY/PARISH Ness STATE KS CITY BOARDMAN DATE 6-17-2021 OWNER Same

TICKET TYPE
 SERVICE
 SALES CONTRACTOR H-D RIG NAME NO. W-1 ORDER NO.

WELL TYPE OIL WELL CATEGORY ABANDONED JOB PURPOSE PTA WELL PERMIT NO. W-1 WELL LOCATION NE / BECKER, KS

REFERRAL LOCATION INVOICE INSTRUCTIONS

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING		DESCRIPTION	QTY.	U/M	UNIT PRICE	AMOUNT
		LOC	ACCT DF					
575				MILEAGE # 114	1	DMT	500	500.00
576P				PUMP CHANGE - PTA	1	JOB	925.00	925.00
275				COTTAGESS HOURS	2	SHS	35.00	70.00
328-4				60/40 POTMAX (490 GAL)	70	SHS	11.00	770.00
290				D-ATA	1	GAL	42.00	42.00
581				SERVICE CHARGE COMMENT	70	SHS	1.85	129.50
582				MINIMUM DAMAGE CHARGE	58	191 TM	250.00	250.00

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 6-17-2021 TIME SIGNED 0800 A.M. P.M.

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

SURVEY	AGREE	UNDECIDED	DISAGREE	PAGE TOTAL
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				2236.50
WE UNDERSTOOD AND MET YOUR NEEDS?				223.65
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				2012.85
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				1301.84
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES	<input type="checkbox"/> NO		TAX
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				1301.84
				TOTAL
				2148.69

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

SWIFT OPERATOR Dwaine Whitson APPROVAL Dwaine Whitson

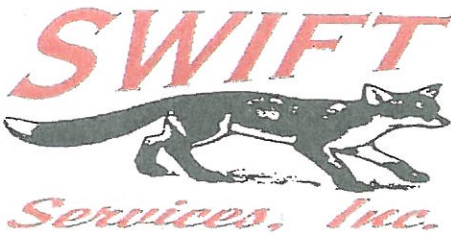
Thank You!

JOB LOG

SWIFT Services, Inc.

DATE	PAGE NO.
6-17-2021	1
TICKET NO.	
33717	

CUSTOMER		WELL NO.		LEASE		JOB TYPE		DESCRIPTION OF OPERATION AND MATERIALS	
CENTINON OIL & GAS		#3		THOMPSON		PTA			
CHART NO.	TIME	RATE (BPM)	VOLUME (BBL/GAL)	PUMPS		PRESSURE (PSI)			
				T	C	TUBING	CASING		
	0800								ON LOCATION
									2 7/8 x 6"
									TUBING = 1650' (FRESH)
	0815	4	15	✓		200			LOAD HOLE - FRESH WATER - CIRCULATION
	0830	4	18 1/2	✓		200			MIX 70 SBR CEMENT W/ 200# HULLS
			5 1/2	✓					DISPLACE CEMENT TO BALANCE
									WASH TRUCK
	0930								JOB COMPLETE
									THANK YOU WAYNE, BUENE, SHAGE



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



Invoice

DATE	INVOICE #
8/5/2021	33631

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	#3	Thompson	Ness	H-D Oilfield	Oil	Workover	PTA	Gideon
PRICE REF.	DESCRIPTION				QTY	UM	UNIT PRICE	AMOUNT
575W	Mileage - 1 Way				20	Miles	6.00	120.00T
576W-P	Pump Charge - PTA				1	Job	1,000.00	1,000.00T
328-4	60/40 Pozmix (4% Gel)				140	Sacks	11.50	1,610.00T
290	D-Air				2	Gallon(s)	42.00	84.00T
581W	Service Charge Cement				225	Sacks	2.00	450.00T
582W	Minimum Drayage Charge				1	Each	300.00	300.00T
	Subtotal							3,564.00
	Sales Tax Ness County						6.50%	231.66
We Appreciate Your Business!							Total	\$3,795.66



Services, Inc.

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

TICKET
 33631

PAGE 1 OF 1

1. SERVICE LOCATIONS <u>Ness City, KS</u>	WELL/PROJECT NO. <u>#3</u>	LEASE <u>Thompson</u>	COUNTY/PARISH <u>Ness</u>	STATE <u>KS</u>	CITY	DATE <u>8-5-2021</u>	OWNER
2. TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <u>H-D</u>	RIG NAME/NO.	SHIPPED VIA <u>CT</u>	DELIVERED TO	WELL PERMIT NO.	ORDER NO.	
3. WELL TYPE <u>Oil</u>	WELL CATEGORY <u>Workover</u>	JOB PURPOSE <u>Plug to Abandon</u>	LOCATION				
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	MILEAGE	QTY.		UNIT		AMOUNT
		LOC	ACCT	DF			QTY.	UM	QTY.	UM	
575					Job # 112						
576P					Pump Charge - PTA						
3334					6040 Pozmor 4% gel						
390					D-Air						
581					CMT Service Charge						
582					Minimum Drayage Charge						

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 8-5-2021 TIME SIGNED 1:00 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?	AGREE	UNDECIDED	DISAGREE
WE UNDERSTOOD AND MET YOUR NEEDS?			
OUR SERVICE WAS PERFORMED WITHOUT DELAY?			
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?			
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND			

PAGE TOTAL 1 TOTAL 3995

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

SWIFT OPERATOR Richard Fuchs APPROVAL

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE 8-5-2022 1" PAGE NO.

CUSTOMER		WELL NO.		LEASE		JOB TYPE		TICKET NO.	
Citation Oil & Gas		#3		Thompson		Plug to Abandon		33631	
CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS	
				T	C	TUBING	CASING		
	1115							ON LOCATION 2 7/8" x 6"	
								Plug Back: 1,100 TP: ~1,080	
	1130	3 1/2	33	✓		300		Mix 125 sks @ 1,080' * Circulate CMT to Surface - 10 sks to the Pit	
								TOH	
	1230	1	4	✓		0		Top off 6" Csg w/ 15 sks	
	1240							Wash up Trk #112	
	1310							Job Complete	
								140 sks of 60/40 Permox 4% gel @ 13.1 ppg used	
								Thanks!	
								Budean, Kuzly, Isaac	