

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



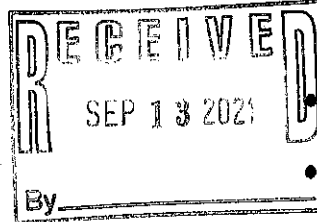
P. O. Box 466
 Ness City, KS 67560
 Off: 785-798-2300



Invoice

DATE	INVOICE #
9/7/2021	35232

BILL TO
Vess Oil Corporation 1700 Waterfront Parkway Building 500 Wichita, KS 67206



- Acidizing
- Cement
- Tool Rental

TERMS	Well No.	Lease	County	Contractor	Well Type	Well Category	Job Purpose	Operator
Net 30	#29-4	Wells	Rush	H-D Oilfield	Oil	Workover	PTA	David E
PRICE REF.	DESCRIPTION				QTY	UM	UNIT PRICE	AMOUNT
575W	Mileage - 1 Way				25	Miles	6.00	150.00T
576W-P	Pump Charge - PTA				1	Job	1,000.00	1,000.00T
290	D-Air				3	Gallon(s)	42.00	126.00T
275	Cotton Seed Hulls				4	Sack(s)	35.00	140.00T
328-4	60/40 Pozmix (4% Gel)				285	Sacks	11.50	3,277.50T
581W	Service Charge Cement				400	Sacks	2.00	800.00T
583W	Drayage				403	Ton Miles	1.00	403.00T
	Subtotal							5,896.50
	Sales Tax Rush County						6.50%	383.27
We Appreciate Your Business!							Total	\$6,279.77



CHARGE TO: Vess oil
 ADDRESS _____
 CITY, STATE, ZIP CODE _____

TICKET 35232

PAGE 1 OF

1. SERVICE LOCATIONS <u>Hays Ks</u>	WELL/PROJECT NO. <u>29-4</u>	LEASE <u>WELLS</u>	COUNTY/PARISH <u>Rush</u>	STATE <u>Ks</u>	CITY	DATE <u>9-7-21</u>	OWNER
2. <u>Ness City Ks</u>	TICKET TYPE <input type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <u>HD OILFIELD</u>	RIG NAME/NO.	SHIPPED VIA <u>CT</u>	DELIVERED TO <u>LOCATION</u>	ORDER NO.	
3.	WELL TYPE <u>oil</u>	WELL CATEGORY <u>ABANDONED</u>	JOB PURPOSE <u>PTA</u>	WELL PERMIT NO.	WELL LOCATION		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575		1			MILEAGE TRK # 111	25	mi			6.00	150.00
576 P		1			Pump Charge - PTA	1	EA			1000.00	1000.00
290		1			D-Air	3	Gal			42.00	126.00
275		1			COTTON SEED HULLS	4	bx			35.00	140.00
328-4		2			60/40 Pozmix 4% Gel	285	sx			11.50	3277.50
581		2			SERVICE CHARGE CNT	400	bx			2.00	800.00
583		2			DRAVAGE	403	TM			1.00	403.00

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	AGREE	UNDECIDED	DISAGREE	PAGE TOTAL	5896.50
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?					
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				TOTAL	6279.77

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

SWIFT OPERATOR _____ APPROVAL _____

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE 9-7-21 PAGE NO.

CUSTOMER		WELL NO.		LEASE		JOB TYPE		TICKET NO.	
Vess Oil		29-4		WELLS		PTA		35232	
CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS	
				T	C	TUBING	CASING		
	900								ON LOCATION
									2 7/8 x 5 1/2
	1100								1st Plug @ 4300
		5	13			0			pump 50 sx cmt w/ 300# HULLS
		3	18			200			Disp
									T.O.D. H W TBG
									PERF @ 1500
		2.75				700			TAKE INJECTION RATE
	1300								
		2.75	7			700			PUMP CMT - 25 SX NO HULLS
		3.5	7			800			25 SX W/ 100 # HULLS
	1320	3.5	24			800			Disp
	1330		24			1000			PRESSURED UP
									RELEASE PRESSURE
									PERF @ 700'
		1.5	36			400			PUMP CMT DOWN CSG TO CIRC
									OUT SURFACE - 135 SX
									DID NOT REACH CIRC.
		.75	13			0			PUMP CMT DOWN BACKSIDE
						200			PRESSURE UP - 50 SX
									USED 285 SX CMT
									4 SX COTTON SEED HULLS
									JOB COMPLETE
									THANKS
									DAVID, ZACH, & ISMAEL