KOLAR Document ID: 1597600

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 #:			1	API No. 15	5								
Name:													
Address 1:					Sec T	wp S. R East West							
Address 2:				Feet from North / South Line of Section									
City:	State:	Zip: +			Feet from	East / West Line of Section							
Contact Person:				Footages	Calculated from Neare	est Outside Section Corner:							
Phone: ()					NE NW	SE SW							
Type of Well: (Check one)		OG D&A Cathodi SWD Permit #:		,		Well #:							
ENHR Permit #:	Gas Sto	rage Permit #:											
Is ACO-1 filed? Yes	No If not, is well	log attached? Yes	No		•	oved on: (Date)							
Producing Formation(s): List A	All (If needed attach another	sheet)				(KCC District Agent's Name)							
Depth to	Top: Botto	m: T.D											
Depth to	Top: Botto	m: T.D		00 0									
Depth to	Top: Botto	m: T.D		Plugging (Completed:								
Show depth and thickness of a	all water, oil and gas forma	ations.											
Oil, Gas or Water	Records		Casing F	Record (Surfa	ace, Conductor & Produ	ction)							
Formation	Content	Casing	Size		Setting Depth	Pulled Out							
Describe in detail the manner cement or other plugs were us		-		•		ds used in introducing it into the hole. If							
Plugging Contractor License #	:		Name: _	me:									
Address 1:			Address	ress 2:									
City:				State:		Zip:+							
Phone: ()				-									
Name of Party Responsible for	r Plugging Fees:												
State of	County, _			, ss.									
				_	ployee 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.



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



Invoice

DATE	INVOICE#
10/26/2021	35267

BILL TO

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

- Acidizing
- Cement
- Tool Rental

TERMS	Well No	o. Lease	County	We	II Type	We	ell Category	Job Purpose	Operator	
Net 30	A #1	Deetz	Rush	Express		Oil		Workover	PTA	David E
PRICE		ION		QT	Y	UM	UNIT PRICE	AMOUNT		
575W 576W-P 290 275 328-4 581W 582W		Mileage - 1 Way Pump Charge - PTA D-Air Cotton Seed Hulls 60/40 Pozmix (4% C Service Charge Cem Minimum Drayage C Subtotal Sales Tax Rush Coun	Gel) ent Charge				1 2 2	Miles Job Gallon(s) Sack(s) Sacks Sacks Each	6.00 1,000.00 42.00 35.00 11.50 2.00 300.00	180.00T 1,000.00T 84.00T 70.00T 2,012.50T 400.00T 300.00T 4,046.50 263.02

We Appreciate Your Business!

Total

\$4,309.52



CHARGE TO:	ál.	PA	
ADDRESS			

CITY, STATE, ZIP CODE

TICKET 35267

PAGE

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CUSTON	DATE SIGNED	MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS.	LIMITED WARRANTY provisions	LEGAL TERMS: Customer her the terms and conditions on the			287		328-4	275	290	9765	245	PRICE SECONDAR' REFERENCE PART	REFERRAL LOCATION	4.	3.		Services, Inc.
MER ACCEPTANCE OF MATERIAL	TIME SIGNED	STOMER'S AGENT PRIOR TO	LIMITED WARRANTY provisions.	LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to BAYMENT BELLEAGE INDEMNITY and			2 6	2	2				-	SECONDARY REFERENCE/ ACCOUNTING PART NUMBER LOC ACCT [INVOICE INSTRUCTIONS	O PE	EXPRE	CONTRACTOR	
CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.	ARE	WE (AND CALI SATI	SWIFT SERVICES, INC. WE WINDER SIDDLY AND WET WOUTH NEEDS? OUR SERVICE WAS PERFORMED WITHOUT	REMIT PAYMENT TO: OUR EQUIPM WITHOUT BR	2	TURINIKUM DORYHOK	1		boldo poznix d% Ger	COTTON SEED HULLS	J-Air.	PUMP CHARGE- PTA	MILEAGE TRK # 11	DESCRIPTION	AFE # 210498	ABANDONED JOB PURPOSE		DECTZ RIG NAME/NO	
ceipt of the materials and services lis	YOU SATISFIED WITH OUR SERVICE? YES NO CUSTOMER DID NOT WISH TO RESPOND	WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?	ME TYOUR NEEDS? MET YOUR NEEDS? OUR SERWICE WAS PERFORMED WITHOUT DELAY?	AGREE UNDECIDED ORMED ?		RA .	200 SX		175 3x	2 &	2 bac	EA.	30 mi	QTY. U/M QTY. U/M		WELL PERMIT NO.	1	SHALE CITY	
sted on this ticket.	TOTAL 4300 5	Lush 2436	\$ \tag{\partial}	PAGE TOTAL 4046 50		500	7 00 400 00		11 50 2012 5	35 80 70 80	42 00 84 00	000 000 000	00 08 00	UNIT AMOUNT		WELL LOCATION	CIETING.	DATE OWNER	

SWIFT OPERATOR DAVID LOWERTAN

APPROVAL

Thank You!

SWIFT Services. Inc. JOB LOG CUSTOMER WELL NO. TATION DIL & GAL 1=1 BERTZ VOLUME (BBL) (GAL) PUMPS CHART PRESSURE (PSI) TIME DESCRIPTION OF OPERATION AND MATERIALS TC TUBING CASING 1000 ON LOCATION 23/8 x 4/6 Ist Plug e 3777 pump 50 Sx cm w/ Zoo# hous 1100 11,00 2ND Plug @ 1421 25 800 T.O.O.H W/ TBG TOP OFF 85/8 - 10 5x 200 Top off 41/2 - 25 sx 200 JOB COMPLETE THANKS DAVID, JOE, JESAAC

PAGE NO.