KOLAR Document ID: 1602241

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 #	:		APIN	No. 15					
Name:				Spot Description:					
Address 1:				Sec Twp S. R East West					
				Feet fron					
		:		Feet from East / West Line of Section					
		·		Footages Calculated from Nearest Outside Section Corner:					
Phone: ()				□ NE □ NW	SE SW				
Water Supply Well ENHR Permit #: Is ACO-1 filed? Ye Producing Formation(s)	Other: G s No If not, : List All (If needed attach a	as Storage Permit #: is well log attached? Yes	Leasi Date The p	County: Well #: Date Well Completed: The plugging proposal was approved on: (Cate) by: (KCC District Agent's Name)					
	epth to Top:	Bottom: T.D	Plugg	Plugging Commenced:					
	epth to Top:	Bottom: T.D	Plugg	Plugging Completed:					
De	epth to Top:	Bottom:T.D							
Show depth and thickne	ess of all water, oil and gas	s formations							
·	Water Records	- I	Casing Record	Record (Surface, Conductor & Production)					
Formation	Content	Casing	Size	Setting Depth	Pulled Out				
· omaton	Comon	- Cuomig	0.20	Johnning 2 op in	. 4.154 541				
		cter of same depth placed from	•		ods used in introducing it into the hole. If				
Plugging Contractor License #: Name				:					
Address 1: Address				SS 2:					
City:			State	:					
Phone: ()									
Name of Party Respons	sible for Plugging Fees:								
State of	Co	unty,	, ss.						
		,		Employee of Operator a	r Operator on above-described well,				
	(Print Na			Employee of Operator o	Operator on above-described well,				

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.



TREATMENT REPORT

Acid Stage No.

					Type Treatment: Amt					ounds of Sand
Date 8/5/2021 District GB F.O. No. C60368					Bkdown					
Company LB EXPLORATION										
Well Name & No. CHADD #1										
			Field			200 000 000 000				
County BARTON State KS				Flush	_					
								ft.		
Casing:	Size 5 1/2	Type & Wt.		Set atft.				ft.		
Formation: Perf. to				from		ft. to	ft.	No. ft.	0	
Formation	:		Perf	to	Actual Volume of Oil / Water to Load Hole: Bbl./Gal.					
Formation	:		Perf.	to						
Liner: Si	zeType &	Wt.	Top atft.	Bottom atft.	Pump Trucks. No. Used	d: Std.	320 S	D	Twin	
	Cemented: Yes	▼ Perforated fr	om	ft. toft.	Auxiliary Equipment			360-308T		
Tubing:	Size & Wt.		Swung at	ft.	Personnel GREG JIM					_
	Perforated fr	om	ft. to	ft.	Auxiliary Tools					
					Plugging or Sealing Materia	als: Type				
Open Hole	Size	T.D.	ft. P.	B. toft.				Gals	š	lb.
Company Representative MIKE KELSO					Treater			GREG C.		
TIME	PRES	SURES	Total Fluid Pumped			REMA	DVC			
a.m./p.m.	Tubing	Casing	Total Fluid Pumped			KEIVIA	unis			
12:30				ON LOCATION						
				PUMP 150 SKS WITH 400# HULLS @ 1500'						
				PUMP 60 SKS @ 900'						
				PUMP 50 SKS @ 600'						
				CIRCULATE CEMENT FROM 250' TO SURFACE. TOOK 100 SKS.						
-			 	CINCOLATE CENT	EIVI I NOW 250	10 30		3011 200 511		
-			 	HOLE STAYED FL	11.1					
				HOLL STATED TO	JLL					
1.00				JOB COMPLETE						
4:00				JOB COMPLETE						
				TUANIK VOLULI						
-				THANK YOU!!!						