

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.

(Print Name) ☐ Employee of Operator or ☐ 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.

Submitted Electronically

FIELD WORK ORDER, INVOICE AND CONTRACT



Received 24 Dec 2021

2470

Complete Cased Hole Services

P.O. Box 105 • El Dorado, KS 67042 • (316) 321-4500

Date 12-22-21	Charge To: JACKSON BROS. LLC.		Lease and Well No. #3 HAWTHORNE
Operator SULLIVAN	Address 116 E. Third Street		Field
Customer's T.D.	City & State Eureka, KS 67045-1747	Fluid Level 400	Legal Description NW-NE-NE
		Casing Size 4 1/2	Sec. 27 Twp. 25s Rng. 8E
T.D.	Type Fluid in Hole WATER	Casing Wt.	County Greenwood
Zero G.L.	Elevation	Casing Depth	State KANSAS

The authorized agent and representative of the owner agrees to the following general terms and conditions of services to be rendered or which have been rendered:

- (1) All accounts are due and must be paid within 30 days from the date of services of Dyna-Log, Inc., and should these terms not be observed, interest at the rate of 18% per annum will be charged from the date of the services.
- (2) Because of the uncertain conditions and hazards existing in a well which are beyond the control of Dyna-Log, Inc., it is understood and agreed by the parties hereto that Dyna-Log, Inc. cannot guarantee the results of its efforts and its services and will not be held responsible for personal or property damage in the performance of its services.
- (3) Should any Dyna-Log, Inc. instruments or equipment be lost or damaged in the performance of the operations requested, the customer agrees to make every reasonable effort to recover the same, and to reimburse Dyna-Log, Inc. for the value of the items which cannot be recovered, or the cost of repairing damage to items recovered.
- (4) The customer certifies that he has the full right and authority to order such work on such well and that the well in which the work is to be performed by Dyna-Log, Inc. is in proper and suitable condition for the performance of said work and that Dyna-Log, Inc. is merely working under the directions of the customer.
- (5) The customer agrees to pay any and all taxes, fees and charges placed on services rendered by Dyna-Log, Inc. by governmental requirements including city, county, state and federal taxes and fees or reimburse Dyna-Log, Inc. for such taxes and fees paid to said agencies.
- (6) No employee is authorized to alter the terms or conditions of this agreement between Dyna-Log, Inc. and the customer.
- (7) I certify that the services have been performed by Dyna-Log, Inc. under my directions and control, and that all zones perforated were designed by me and all depth measurements were checked and approved.
- (8) It is further stipulated and agreed to between the parties hereto that this agreement shall not become effective until the same is approved by Dyna-Log, Inc. in Sedgwick County, Kansas, and that the venue of any action, either in law or equity to enforce the terms of the same is agreed by the parties hereto to be in Sedgwick County, Kansas.

Dated, this _____ day of _____

CUSTOMER	AUTHORIZED AGENT AND REPRESENTATIVE Dyna-Log, Inc.	OFFICER
WORK PERFORMED	PRICING	
Perforated With <u>3500-301 Jets</u> as Follows:	SET UP:	\$ <u>400.00</u>
From ft. to ft., <u>250-251</u> <u>2</u> Shots	PERFORATING: 1st <u>4</u> Shots <u>Circ. shot</u>	\$ <u>600.00</u>
From ft. to ft., <u>1310-1311</u> <u>2</u> Shots	Next _____ Shots @ \$ _____ Ea.	\$ _____
From ft. to ft., _____ Shots	Next _____ Shots @ \$ _____ Ea.	\$ _____
From ft. to ft., _____ Shots	LOGGING: Logging Chg. _____ ft. @ \$ _____ ft.	\$ _____
From ft. to ft., _____ Shots	BRIDGE PLUG: Type _____ Depth _____	\$ _____
From ft. to ft., _____ Shots	CEMENT LOCATOR SURVEY:	\$ _____
	SUB TOTAL.....	\$ <u>1,000.00</u>
	TAX	\$ <u>30.⁰⁰</u>
	TOTAL	\$ <u>1030.⁰⁰</u>

810 E 7TH
PO Box 92
EUREKA, KS 67045
(620) 583-5561

ELITE
CEMENTING & ACID SERVICE, LLC

**Cement or Acid Field Report**Ticket No. **6143**Foreman Russell McCoyCamp Eureka

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State
12-27-21	1,008	Hawthorne #3	27	25	8	G.W.	KS
Customer JACKSON Brothers LLC			Unit #		Driver		Unit #
Mailing Address 116 E 3rd			105		JASON		
City Eureka			113		AB		
State KS			145		Steve		
Zip Code 67045			128		Russell		
Safety Meeting RM JASON Steve Russell							

Job Type P.T.A. Hole Depth _____ Slurry Vol. _____ Tubing 2 3/8
 Casing Depth _____ Hole Size _____ Slurry Wt. _____ Drill Pipe _____
 Casing Size & Wt. 4 1/2 Cement Left in Casing 240 to Surface Water Gal/SK _____ Other _____
 Displacement _____ Displacement PSI _____ Bump Plug to _____ BPM 4

Remarks: Safety + Job Procedure
Plug well AS Follows 35 SKi @ 2482
20 SKi @ 1315
25 SKi @ 240' GOOD CEMENT TO SURFACE
80 SKi TOTAL

API 15-073-01459-00-02

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C-105	1	Pump Charge	785.00	785.00
C-107	15	Mileage	4.20	63.00
C-203	80	SKi 60/40 Pozmix cement	14.75	1180.00
C-205	50*	caclz (Bottom Plug)	.69	34.50
C-206	300*	Gel = 4%	.28	84.00
C-108A	3.44 Ton	Ton Mileage Bulk TIC	365.00	365.00
C-113	4	hr 80 B61 VAC Truck	90.00	360.00
C-214	40 #	Hulls w/ Bottom + middle Plugs	.55	22.00
			Sub Total	2,893.50
			- 5%	155.52
			7.5% Sales Tax	217.01
Authorization <u>Roscoe H. Jackson II</u> Title <u>CO-MANAGER</u>			Total	2,954.99

I agree to the payment terms and conditions of services provided on the back of this job ticket. Any amendments to payment terms must be in writing on the front of this job ticket or in the Customer's records at ELITE's office.

W.S. Roust. Wes