

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

Elite Cementing & Acidizing of KS, LLC
 PO Box 92
 Eureka, KS 67045



Date	Invoice #
12/31/2021	6134

Bill To	
Petroleum Property Services, Inc. 125 N. Market St., Suite 1251 Wichita, KS 67202	
Customer ID#	1440

Job Date	12/30/2021
Lease Information	
Anderson #2	
County	Wabaunsee
Foreman	KM

Item	Description	Qty	Terms	Net 15
			Rate	Amount
C105	Cement Pump-Plug (old well)	1	1,100.00	1,100.00T
C107T	Pump Truck Mileage-taxable	80	4.20	336.00T
C203	Pozmix Cement 60/40	212	14.75	3,127.00T
C206	Gel Bentonite	365	0.28	102.20T
C205	Calcium Chloride	545	0.69	376.05T
C214	Cottonseed Hulls	45	0.55	24.75T
C108BT	Ton Mileage-per mile (one way)-taxable	729.6	1.40	1,021.44T
C113T	80 Bbl Vac Truck	6	90.00	540.00T
C224	City Water	3,300	0.011	36.30T
D101T	Discounts on Services		-149.87	-149.87T
D102	Discount on Materials		-183.31	-183.31T

We appreciate your business!

Phone #	Fax #	E-mail
620-583-5561	620-583-5524	rene@elitecementing.com

Send payment to:
 Elite Cementing & Acidizing of KS, LLC
 PO Box 92
 Eureka, KS 67045

Subtotal	\$6,330.56
Sales Tax (8.0%)	\$506.44
Total	\$6,837.00
Payments/Credits	\$0.00
Balance Due	\$6,837.00

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



Cement or Acid Field Report
 Ticket No. **6134**
 Foreman Kevin McCoy
 Camp EUREKA

API # 15-197-20099

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State
12-30-21	1440	Anderson #2	20	145	12E	WABAUNSEE	K5
Customer <u>Petroleum Property Services, Inc</u>		Safety Meeting KM JH BW SM	Unit #	Driver		Unit #	Driver
Mailing Address <u>125 N. MARKET ST. Ste 1251</u>			105	JASON H.			
City <u>Wichita</u>			113	BROKER W.			
State <u>K5</u>			145	STEVE M.			
Zip Code <u>67202</u>							

Job Type P.T.A. old well Hole Depth _____ Slurry Vol. _____ Tubing 2 3/8" Euc
 Casing Depth _____ Hole Size 7 7/8 Slurry Wt. _____ Drill Pipe _____
 Casing Size & Wt. 5 1/2 Cement Left in Casing _____ Water Gal/SK _____ Other CIBP @ 3000'
 Displacement _____ Displacement PSI _____ Bump Plug to _____ BPM _____

Remarks: Safety Meeting: RAN 2 3/8" Tubing to 2802'. Spot 25 SKS 60/40 Pozmix Cement w/ 3% CaCl2, 2% Gel, 1SK of HULLS. Pull 20 Jts. Wait 1 Hr Tag Cement w/ wire line @ 2578'. Set Tubing @ 1349'. Spot 20 SKS Cement. Pull Tubing. Rig up to 5 1/2" casing. Circulate Cement to SURFACE from 350' w/ 167 SKS Cement. Job Complete. Rig down.

Note 5 1/2" WAS PERFORATED @ 1350' & 350'

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C 105	1	Pump Charge	1100.00	1100.00
C 107	80	Mileage	4.20	336.00
C 203	212 SKS	60/40 Pozmix Cement	14.75	3127.00
C 206	365 *	Gel 2%	.28 *	102.20
C 205	545 *	CaCl2 3%	.69 *	376.05
C 214	45 *	Hulls w/ Bottom Plug	.55 *	24.75
C 108 B	9.12 Tons	Ton Mileage 80 miles	1.40	1021.44
C 113	6 HRS	80 BBL VAC TRUCK	90.00	540.00
C 224	3300 gals	CITY WATER	11.00/1000	36.30
			Sub Total	6,663.74
			Less 5%	359.84
			Sales Tax 8.0%	533.10
Authorization <u>[Signature]</u> Title _____			Total	6,837.00

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.