

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

JOB LOG

SWIFT Services, Inc.

DATE

5-4-22

PAGE NO.

CUSTOMER	WELL NO.	LEASE	JOB TYPE	DESCRIPTION OF OPERATION AND MATERIALS	
				T	C
CHART NO.	VOLUME (BBL) (GAL)	PUMPS	TIME (BPM)	PRESSURE (PSI) TUBING	CASING
Vincent oil	2-5	BASSEY			
900					on location
					2 ³ / ₈ x 4 ¹ / ₂
					Top off 8 ⁵ / ₄ - 5 sx
					1st Plug @ 1298
	13	1000	5		Mix 50 sx cmt w/ 200# hulls
	5	200	5		Disp
					2nd Plug @ 750
	39	400	5		Mix 150 sx w/ 300# hulls
	1	400	5		Disp
					Did not circ. to surf.
					3rd Plug @ 400
	13	300	3		Mix 50 sx
					Circulate to surf.
					T.O.D.H w/ TRG
					Top off 4 ¹ / ₂ - 5 sx
					Used 160 sx cmt
					500 # Hulls
					THANKS
					Dennis, Seth & Dusty



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

Invoice

DATE	INVOICE #
5/4/2022	34120

BILL TO

Vincent Oil Corporation
200 W. Douglas, Ste 725
Wichita, KS 67202

- Acidizing
- Cement
- Tool Rental

TERMS	Well No.	Lease	County	Contractor	Well Type	Well Category	Job Purpose	Operator	
									QTY
Net 30	#2-5	Bassett	Graham	Fritzler	SWD	Workover	PTA	David E	
PRICE REF.									
575W	Mileage - 1 Way					60	Miles	7.00	420.00T
576W-P	Pump Charge - PTA					1	Job	1,100.00	1,100.00T
290	D-Air					2	Gallon(s)	42.00	84.00T
275	Cotton Seed Hulls					5	Sack(s)	35.00	175.00T
328-4	60/40 Pozmix (4% Gel)					260	Sacks	12.50	3,250.00T
581W	Service Charge Cement					260	Sacks	2.00	520.00T
583W	Drayage					629	Ton Miles	1.00	629.00T
	Subtotal							0.00%	6,178.00
	SWD &/Or Injection Well, Exempt From Sales Tax								0.00
							Total		\$6,178.00

We Appreciate Your Business!