

**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



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



# Invoice

DATE	INVOICE #
7/21/2022	35536

BILL TO
Carmen Schmitt, Inc. P. O. Box 47 915 Harrison Great Bend, KS 67530-0047

- Acidizing
- Cement
- Tool Rental

TERMS	Well No.	Lease	County	Contractor	Well Type	Well Category	Job Purpose	Operator
Net 30	#1-17	Higerd	Thomas	Murfin Rig #8	Oil	Development	Rotary PTA	David E

PRICE REF.	DESCRIPTION	QTY	UM	UNIT PRICE	AMOUNT
575D	Mileage - 1 Way	100	Miles	7.00	700.00
576D-P	Pump Charge - PTA	1	Job	1,100.00	1,100.00
290	D-Air	3	Gallon(s)	42.00	126.00T
410-8	8 5/8" Top Plug	1	Each	150.00	150.00T
328-4	60/40 Pozmix (4% Gel)	255	Sacks	12.50	3,187.50T
581D	Service Charge Cement	255	Sacks	2.00	510.00
583D	Drayage	1,028	Ton Miles	1.00	1,028.00
	Subtotal				6,801.50
	Sales Tax Thomas County			8.25%	285.74

*710/  
 20074.0117  
 Well Rte  
 BCP Cement to Plug*

<b>We Appreciate Your Business!</b>	<b>Total</b>	\$7,087.24
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CHARGE TO: Cornman Schwartz  
 ADDRESS \_\_\_\_\_  
 CITY, STATE, ZIP CODE \_\_\_\_\_

TICKET 35536

PAGE 1 OF 1

1. SERVICE/LOCATIONS <u>Hayes Ks</u>	WELL/PROJECT NO. <u>7-73</u>	LEASE <u>Algerd</u>	COUNTY/PARISH <u>Thomas</u>	STATE <u>KS</u>	CITY	DATE <u>7-21-22</u>	OWNER
2. <u>Ness City</u>	TICKET TYPE <input type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <u>Martin</u>	RIG NAME/NO. <u>Rig # 8</u>	SHIPPED VIA <u>BY</u>	DELIVERED TO <u>10228m</u>	ORDER NO.	
3.	WELL TYPE <u>oil</u>	WELL CATEGORY <u>development</u>	JOB PURPOSE <u>Leamy SW</u>	WELL PERMIT NO.	WELL LOCATION		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	MILEAGE	QTY.	U/M	QTY.	U/M	UNIT PRICE	AMOUNT
		LOC	ACCT	DF								
575					Tax # 111	100 mi					2.00	200.00
526 P					Pump Charge - Pts	1 EA					1100.00	1100.00
290					Top Air	3 EA					42.00	126.00
410					Top plug - 8 5/8	1 EA					150.00	150.00
328-4					60/40 permix 4 1/2 gal	255 SX					1.25	3187.50
581					Service Charge Gas	255 SX					2.00	510.00
583					Drayage	1028 m					1.00	1028.00

**LEGAL TERMS:** Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS.

**REMIT PAYMENT TO:**  
 SWIFT SERVICES, INC.  
 P.O. BOX 466  
 NESS CITY, KS 67560  
 785-798-2300

DATE SIGNED \_\_\_\_\_ TIME SIGNED \_\_\_\_\_  
 A.M.  P.M.

**SURVEY**  
 OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?  YES  NO  
 WE UNDERSTOOD AND MET YOUR NEEDS?  YES  NO  
 OUR SERVICE WAS PERFORMED WITHOUT DELAY?  YES  NO  
 WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?  YES  NO  
 ARE YOU SATISFIED WITH OUR SERVICE?  YES  NO  
 CUSTOMER DID NOT WISH TO RESPOND

PAGE TOTAL 6801 50  
 TOTAL 7687.04

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES. The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR David Edgeron APPROVAL \_\_\_\_\_

Thank You!

1000

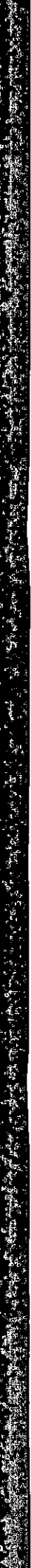
10

JOB LOG

SWIFT Services, Inc.

DATE	PAGE NO.
7-21-22	
TICKET NO.	
35536	

CUSTOMER		WELL NO.		LEASE		JOB TYPE		TICKET NO.	
Carmen Schmitt		1-17		Higerd		RA		35536	
CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS	
				T	C	TUBING	CASING		
	1530								on location
	1640	5	10			400			1st Plug @ 2675 pump w/ spacer mix amt @ 13.0 ppg - 50 sx Disp w/ wtr Disp w/ mud - 3 min
		5	13			400			
		5	3.5			400			
	1730	5	7						2nd plug @ 1848 pump w/ spacer mix amt - 100 sx Disp w/ wtr Disp w/ mud - 1.5 min
		5	26						
		5	2.5						
	1840	5	5						3rd plug @ 315 pump w/ spacer mix amt - 50 sx Disp
		5	13						
		5	1						
	1920	1	2.5			0			4th plug @ 40 mix amt - 10 sx
	1925	2.5	8			0			plug rat hole - 30 sx
	1930	2.5	4			0			plug mouse hole - 15 sx
									Job Complete
									Thanks David, Seth & Tsane



[The text in this section is extremely faint and illegible. It appears to be a multi-paragraph document with several lines of text per paragraph. The content is mostly lost to the quality of the scan.]