

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

SWIFT



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



Invoice

DATE	INVOICE #
7/18/2022	35480

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	404	Dorr	Rooks	Express	Oil	Workover	PTA	Jonathan

PRICE REF.	DESCRIPTION	QTY	UM	UNIT PRICE	AMOUNT
575W	Mileage - 1 Way	40	Miles	7.00	280.00T
576W-P	Pump Charge - PTA	1	Job	1,100.00	1,100.00T
290	D-Air	4	Gallon(s)	42.00	168.00T
275	Cotton Seed Hulls	6	Sack(s)	35.00	210.00T
328-4	60/40 Pozmix (4% Gel)	295	Sacks	12.50	3,687.50T
581W	Service Charge Cement	400	Sacks	2.00	800.00T
583W	Drayage	1,174.99	Ton Miles	1.00	1,174.99T
	Subtotal				7,420.49
	Sales Tax Rooks County			7.00%	519.43

7/10/43
 12420.0404
 Well Rte
 Cement to Plug

We Appreciate Your Business!	Total	\$7,939.92
-------------------------------------	--------------	------------



Services, Inc.

TICKET 35480

CHARGE TO: Carmen Schmidt Inc
 ADDRESS _____
 CITY, STATE, ZIP CODE _____

PAGE 1 OF 1

1. SERVICE LOCATIONS <u>Hays, KS</u>	WELL/PROJECT NO. <u>404</u>	LEASE <u>None</u>	COUNTY/PARISH <u>Rooks</u>	STATE <u>KS</u>	CITY	DATE <u>07/18/23</u>	OWNER <u>same</u>	
2. <u>Ness City, KS</u>	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <u>Express Well Service</u>	RIG NAME/NO.	SHIPPED VIA <u>CT</u>	DELIVERED TO <u>Location</u>	ORDER NO.		
3.	WELL TYPE <u>0.1</u>	WELL CATEGORY <u>Workover</u>	JOB PURPOSE <u>Plug To Abandon</u>	WELL PERMIT NO.	WELL LOCATION			
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS							

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	MILEAGE #	QTY.		UNIT PRICE	AMOUNT
		LOC	ACCT	DF			UM	UM		
575		1			MILEAGE # 113		4	0 mi	7.20	288.00
571.0 P		1			Pump Charge - PTA		1	EA	1100.00	1100.00
290		1			D-Air		4	gal	42.00	168.00
275		1			Custom seed Halls		16	Sks	35.00	560.00
328.4		2			1600 Permox (40% Gel)		2	Sks	12.50	3687.50
581		2			Service Charge Cement		4	00 Sks	33.57	1342.28
583		2			Drayage		1	00 mi	174.44	174.44

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.
 X Nathan P. ...
 DATE SIGNED _____ TIME SIGNED _____
 A.M. P.M.

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

SURVEY	AGREE	UNDecided	DISAGREE	PAGE TOTAL	TOTAL
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				7,420.52	7,420.52
WE UNDERSTOOD AND MET YOUR NEEDS?					
OUR SERVICE WAS PERFORMED WITHOUT DELAY?					
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?					
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES	<input type="checkbox"/> NO			
CUSTOMER DID NOT WISH TO RESPOND					

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.
 SWIFT OPERATOR [Signature] APPROVAL [Signature]
 Thank You!

[The main body of the document contains several columns of extremely faint, illegible text, likely bleed-through from the reverse side of the page.]

JOB LOG

SWIFT Services, Inc.

DATE	PAGE NO.
07/18/23	1
TICKET NO.	
35480	

CUSTOMER		WELL NO.		LEASE		JOB TYPE		TICKET NO.	
Carmen Schmitt Inc.		404		Darr		PTA		35480	
CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS	
				T	C	TUBING	CASING		
	1300								On location, set up trucks Wait on State Mart Bulk Truck 2 3/8 x 4 1/2"
	1345	4	6 1/2			800			1 st Plug Mix 25 SKS cement Start Adding Hulls Fin Cement & hulls - 400 #s & 125 cement Displace w/water Washup truck, wait on perforators
		5 1/2	39 1/2			1000			
		5 1/2	3			1000			
	1540	5 1/2							2 nd Plug Start Cement w/hulls 200 #s Cement Circulation, D Shut Down Displace w/water Shut Down 95 SKS
		5 1/2	25			600			
		5 1/2	3			600			
									T.O.O.H.
	1630	1	6 1/2						Top off 4 1/2" w/ 25 SKS
	1645	1	6 1/2			300			Tie Onto 8 5/8, Pressured up to 300psi, Shut in 25 SKS
	1655								Washup Packup
	1715								Job Complete
									Thanks Jon, Joe, John
									295 SKS Total 600 #s hulls