KOLAR Document ID: 1667937

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 #:	API No. 15
Name:	Spot Description:
Address 1:	Sec Twp S. R East West
Address 2:	Feet from North / South Line of Section
City: State: Zip: +	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	NE NW SE SW
Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic Water Supply Well Other: SWD Permit #: SWD Permit #: SWD Permit #: SWD Permit #: ENHR Permit #: Gas Storage Permit #: If not, is well log attached? Yes No	County: Vell #: Lease Name: Well #: Date Well Completed:
Producing Formation(s): List All (If needed attach another sheet)	The plugging proposal was approved on: (Date)
Depth to Top: Bottom: T.D. Depth to Top: Bottom: T.D. Depth to Top: Bottom: T.D.	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	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:	Name:						
Address 1:		Address 2:							
City:		State:	Zip:	+					
Phone: ()									
Name of Party Responsible for Plu	ugging Fees:								
State of	County,	, SS.							
	(Print Name)	Employee of O	perator or Operator on a	bove-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

Invoice

GRESSEL OIL FIELD SERVICE

POST OFFICE BOX 438 HAYSVILLE, KS 67060 (316) 524-1225 FAX (316) 524-1027

BURRTON, KS	۲	GREAT BEND, KS	۵	HAYS, KS	۵
(620) 463-5161		(620) 793-3366		(785) 628-3220	

INVOICE NUMBER: L1934-IN

LEASE: COLLINSON 2 PETE

BILL TO: BUFFALO OIL CO., LLC PO BOX 6 OXFORD, KS 67119

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE C	ORDER	SPECIAL IN	NSTRUCTIONS	
09/27/2022	1934		09/21/2022	COLLINSON 2 PETE		N	ET 30	
QUANTITY	U/M	ITEM NO./DE	SCRIPTION		D/C	PRICE	EXTENSION	
1.00 1.00 1.00 3,350.00 1.00	EACH EACH EACH EACH EACH	FROM 1788' TO 178 RIG UP CIBP TOOL BAILER AND SPOT CASING OUT OF SI CAST BOOSTER, R	NE ST 1 SHOTS	3350', RIG UP NN NOT GET RIG UP 1 LBS OLLAR	20.00 20.00 20.00 20.00 0.00	1,000.00 1,200.00 850.00 0.24 0.00	800.00 960.00 680.00 643.20 0.00	
REMIT TO: P.O. BOX HAYSVILL	438 .E, KS 67060		LOG		COM	Net Invoice: /CO Sales Tax: Invoice Total:	3,083.20 138.01 3,221.21	
RECEIVED BY		1	NET 30 DAYS				·	

There will be a charge of 1.5% (18% annual rate) on all accounts over 30 days past due.

Gressel Oil Field Service reserves a security interest in the goods sold until the same are paid for in full and reserve all the rights of a secured party under the Uniform Commercial Code.

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P.O. BOX 438

Haysville, KS 67060 (316) 524-1225 • FAX (316) 524-1027

Date Day HI 2022	Charge To: B.D.	Oil & Grus. L.L.C.	Lease and Well No.
λ		UT V Gas. ALL	Callinson & PE
Operator 21-2	Address		
,	City & Chat		Field
Customer's T.D.	City & State Fluid Level		Legal Description
	XET N	Casing Size	
Τ.Ο.	Type Fluid in Hole	Casing Wt.	Sec. 30 Twp. 34 SANG.
Zero	Pasdinction	ALA	
	Elevation	Casing Depth	County Dwley
191	1155	5 000	State X <
 (2) Because of the uncertain conditions at the parties hereto that Gressel Oil Fie property damage in the performance of (3) Should any Gressel Oil Field Service, in every reasonable effort to recover the repairing damage to items recovered. (4) The customer certifies that he has the i Field Service, inc. is in proper and suita of the customer. (5) The customer agrees to pay any and a including city, county, state and federa (6) No employee is authorized to after the tag of the field that the services have been performance of the services have been performed. (8) It is further atiguidated and agrees to pay any conditional of the services have been performed. 	harged from the date of the services and hazards existing in a well which a id Service, inc. cannot guaractee the of its services. c. instruments or equipment be lost of same, and to reimburse Gressel Oil full right and authority to order such to ble condition for the performance of a fill taxes, fees and charges placed or i taxes and fees or reimburse Gress rms or conditions of this agreement be comed by Gressel Oil Field Service, in ked and approved.	re bayond the control of Gressel Oil Fie e results of its efforts and its services a r damaged in the performance of the ope Field Service, Inc. for the value of the it work on such well and that the well in wi hald work and that Gressel Oil Field Ser n services rendered by Gressel Oil Field Service the Oil Field Service, Inc. for such taxet tween Gressel Oil Field Service, Inc. and to under my directions and control, and t	State
CUSTOMER	GRES	ED AGENTANO REPRESENTATIVE SEL OIL PIELD SERVICE, INC.	OFFICER
WORK PERFORM	fED		PRICING
Perforated With 166 Greet Boost	as Follows:	SET UP:	1770 7
From 1788 ft. to 17882	ft., Shots	PERFORATING:	<u>\$ 1000</u>
-romft. to		1stShots	<u>s 1200 /</u>
	ft.,Shots	Next Shots @ \$	Ea. \$
fromft. to	ft.,Shots	Next Shots @ \$	Ea. \$
-iromft. to	ft.,Shots	LOGGING: Logging Chg. ft. G	e a
romft. to	ft.,Shots		
· · · · · · · · · · · · · · · · · · ·		BRIDGE BLUGU	1708 707
romft. to	ft.,Shots	Type Stop 2 Depth	
in no UBP tools Run	IN ASOF S350	CEMENT LOCATOR SURVEY:	
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N NOT CAST CALL ONT O	+ slips top joint	I are ADER SUB TO	TAL
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Acid & Cement

BUFFALO OIL CO., LLC

OXFORD, KS 67119

BURRTON KS (620) 463-5161 FAX (620) 463-2104

BILL TO:

PO BOX 6

GREAT BEND, KS (620) 793-3366 FAX (620) 793-3536

INVOICE NUMBER: C48035-IN

350.00

1.850.85

100.00

240.00

168.75

522.72

Page: 1

LEASE: COLLINSON #2 PETE

ORDER ORDER DATE **PURCHASE ORDER** SPECIAL INSTRUCTIONS DATE SALESMAN **COLLINSON #2 PETE** 09/27/2022 09/23/2022 48035 **NET 30** QUANTITY U/M **ITEM NO./DESCRIPTION** D/C PRICE **EXTENSION** 700.00 PUMP CHARGE FOR PLUG JOB 0.00 0.50 EA **SPLIT BETWEEN 2 WELLS** 0.00 13.71 135.00 SK 60/40 POZ MIX 4% GEL 200.00 LB COTTONSEED HULLS 0.00 0.50 40.00 MILEAGE CEMENT PUMP TRUCK 0.00 6.00 MI **SPLIT BETWEEN 2 WELLS** 0.00 1.25 135.00 EA **BULK CHARGE** 0.00 1.10 **BULK TRUCK - TON MILES** 475.20 MI COB **REMIT TO:** Net Invoice:

POST OFFICE BOX 438

HAYSVILLE, KS 67060

(316) 524-1225

(316) 524-1027 FAX

3,232.32 P.O. BOX 438 cowco 210.10 HAYSVILLE, KS 67060 FUEL SURCHARGE IS NOT TAXABLE AND IS ADDED TO Sales Tax: MILEAGE, PUMP AND OR DELIVERY CHARGES ONLY. 3,442.42 Invoice Total: **RECEIVED BY NET 30 DAYS**

There will be a charge of 1.5% "per month" (18% annual rate) on all accounts over 30 days pas

Copeland Acid & Cement Is a subsidiary of Gressel Oil Field Service

Gressel Oil Field Service reserves a security interest in the goods sold until the same are paid for in full and reserve all the rights of a secured party under the Uniform Commercial Code.



FIELD ORDER Nº C 48035

2022

BOX 438 • HAYSVILLE, KANSAS 67060 DATE Some 22

316-524-1225	
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IS AUTHORIZED BY: Butter ()) + Gives		
Address	City	State
To Treat Well As Follows: Lease	Well No. #2PETE	_ Customer Order No.
Sec. Twp. Range	County Cowly	State

CONDITIONS: As a part of the consideration hereof it is agreed that Copeland Acid Service is to service or treat at owners risk, the hereinbefore mentioned well and is not to be held liable for any damage that may accrue in connection with said service or treatment. Copeland Acid Service has made no representation, expressed or implied, and no representations have been relied on, as to what may be the results or effect of the servicing or treating said well. The consideration of said service or treatment is payable. There will be no discount allowed subsequent to such date. 6% interest will be charged after 60 days. Total charges are subject to correction by our invoicing department in accordance with latest published price schedules.

The undersigned represents himself to be duly authorized to sign this order for well owner or operator.

THIS ORDER MUST BE SIGNED BEFORE WORK IS COMMENCED

BEFORE WORK	IS COMMENCED) By By	Acost	
	<u> </u>		Agent	
CODE	QUANTITY	DESCRIPTION		AMOUNT
		Pomp chy for Ply Job splir & wells		350~
	1355	4 60-40-42 foz 137 sich.		28 CB81
	2007	Hulls 504 bb		100 ~
	So mil	, I way pump truck split I wells		240
				······
	1	9,25/		No B
	1:35:50	Bulk Charge 125/ Serch,		168 12
	47520	Bulk Truck Miles 12 to - mile.		522 =
		Process License Fee onGallons		
		TOTAL BILLING		

I certify that the above material has been accepted and used; that the above service was performed in a good and workmanlike manner under the direction, suffervision and control of the owner, operator or his agent, whose signature appears below.

Copeland R	epresentative	<u>In</u>	<u>R/</u>	
Station	Buckton	_/		
Remarks	Plusont	11:30		

Well Owner, Operator or Agent

NET 30 DAYS



TREATMENT REPORT

Acid Stage No.

		~			Type Treatment:		Type Fluid	Sand Size	Pounds of Sand
Durenlas	2)22 DI	strict.	<u>.</u>). No	Bkdown	Bbl. /Gal.	••••••	••••	
Company	Sig for	01140	<u>éns</u>			Bbi. /Gai.	•••••••		••••••
Well Name &	No Colla	sar A	PETE			Bbi. /Gal.	•••••••••••••••••••••••••••••••••••••••	•••• ••••••	
						Bbi. /Gal.			
County Co	ander		State		Flush	Bbi. /Cal.	••••••	•••• ••••••••••	••••••
					Treated from		.ft. to	ft. No. !	ft
Cusing: Size	·····	Туре & Wt		Set atft.	from	••••••	.ft. to	ft. No. :	ft
Formation:			Perf	to	from		.ft. to	ft. No.	£t
				to					
					Actual Volume of	OII/Water to Lo	ad Hole:		Bbi. /Gal.
				. Bottom atft.	Pump Trucks. N	o. Used: Std. 🏒	S	Tv	vin
				ft. toft.	Auxiliary Equips	sone Balk 3	22		
				ft.				Bet ±1	ft.
					Auxiliary Tools				
Fer	Torated Iron				Plussing or Seali	ng Materials: Ty	no 135 sades	CD-40-1	ta Poz
			6 11	3. to					
Ouen Hole Miz	e				1	Ń	Λ		
					Treater /	m the	/		
	Representativ				I ITALEI	-/~~/ /	/		
TIME a.m /p.m.	Tubing	SURES Casing	Total Fluid Pumped			REMAR	K 8		
	Teoms	Casting		0	the Co				ويتباد ويتفاقه والمتحدية
9:45				+ King mp	Tala -		ant 11 1		
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			3388	Bester	20 02 87	<u>s</u>		<u> </u>	
:			B	Swer why	in go do	you hak	Levesach Si	en add	150# Hulls
:			33882	130 sada	miller gen	al sturg	+ Hulls to	sullac	
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