## KOLAR Document ID: 1669987

**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 #:	County:  Lease Name: Well #: Date Well Completed:
Is ACO-1 filed?	The plugging proposal was approved on: (Date)
Producing Formation(s): List All (If needed attach another sheet)	by: (KCC District Agent's Name)
Depth to Top:         Bottom:         T.D.           Depth to Top:         Bottom:         T.D.           Depth to Top:         Bottom:         T.D.           Depth to Top:         Bottom:         T.D.	Plugging Commenced:

Show depth and thickness of all water, oil and gas formations.

Oil, Gas or Wate	r Records		Casing Record (Surfa	ce, Conductor & Produc	ction)
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



Citation Oil & Gas	APPROVED BY	<ul> <li>Acidizing</li> </ul>	
1016 Hwy 40 Bypass	OCT 17 2022	<ul> <li>Cement</li> </ul>	
Hays, KS 67601	LEASE	• Tool Renta	al I
	WELL# LOF NRE AFE#		

TERMS	Well N	o. Lease	County	Contractor	We	ll Type	W	ell Category	Job Purpose	e Operator
Net 30	#8	Trexle	r Graham	Express Well		Oil		Workover	РТА	David E
PRICE	REF.		DESCRIP	TION		QT	(	UM	UNIT PRICE	AMOUNT
575W 576W-P 290 275 328-4 581W 583D		Mileage - 1 Wa Pump Charge - D-Air Cotton Seed Hu 60/40 Pozmix ( Service Charge Drayage Subtotal Sales Tax Grah	PTA Ills 4% Gel) Cement				1 5 8 585	Miles Job Gallon(s) Sacks Sacks Ton Miles	7.00 1,100.00 42.00 35.00 12.50 2.00 1.00 7.50%	420.00T 1,100.00T 210.00T 280.00T 7,312.50T 1,300.00T 1,573.00 12,195.50 796.69
We A	opree	ciate Yo	ur Busine	<b>5</b> 5!				Tota	I	\$12,992.19

Thank You!				~
d on this ticket.	ges receipt of the materials and services listed on this ticket.	APPROVAL	APPROVAL	SWIFT OPERATOR
1.1.01.01	CUSTOMER DID NOT WISH TO RESPOND		TR ACCEPTANCE OF MATERIAL	CUSTOME
TOTAL IN AGIN IN	0		TIME SIGNED A.M.	DATE SIGNED
Gratium 19410	WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?		DMER'S AGENT PRIOR TO	MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS. X
_	MET VOUR NEEDS? OUR SERVICE NEEDS?	SWIFT SERVICES. INC.		LIMITED WARRANTY provisions.
PAGE TOTAL 12195150	SURVEY AGREE UNDECIDED DISAGREE OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?	REMIT PAYMENT TO:	by acknowledges and agrees to verse side hereof which include, RELEASE INDEMNITY and	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
1 40 1573 00	ni zy ci	abiatra 10		
1300	650 152	Service Charge, Conr		282
12 50 73/2 50	2 583-5X	bolido poznix 4% bit		h- 875
22-02 280 00	S Jx	Cotton Ster Hulls		
210	Star	N-Aie		010
1100	1 EA	Pump Charge - BA		dot S
PRICE AMULUIVI	CITY. UM CTY. UM	MILEAGE		
		DESCRI	SECONDARY REFERENCE/ ACCOUNTING PART NUMBER LOC ACCT	PRICE SECONDARY REFERENCE PART N
		AFC # 2208/2	INVOICE INSTRUCTIONS	LOCATIC
WELL LOCATION	WELL PERMIT NO.	WELL CATEGORY JOB PURPOSE		4.
ORDER NO.	VA CONTON		DE EXPR	3. 1 har (1)
DATE OWNER		LEASE COUNTY/PARISH	WELL/PROJECT NO.	1. HAUS
PAGE OF		CITY, STATE, ZIP CODE	CITY, 1	Services, Inc.
55611		ESS	ADDRESS	
TICKET		CHARGE TO:	CHAR	SWIFT

DATE PAGE NO. SWIFT Services. Inc. 10-13-22 TICKET NO. 35611 JOB LOG JOB TYFE WELL NO. #8 CUSTOMER . LEASE Trexler CITATION PUMPS PRESSURE (PSI) CHART VOLUME RATE DESCRIPTION OF OPERATION AND MATERIALS TIME (BBL) (GAL) NO. (BPM) C TUBING CASING Т On location 930 Csg-6" TB4 - 23/8 pump 75 Sx w/ 200 Hulls Disp 20 200 5 ~ 5 1200 200 plug - 3115 pimp 130 sx w/ 300 Hulls Disp 000 5 35 3 1500 3RS plug - 2075 pimp 130 SK w/ 300 Hulls Disp 5 600 35 600 the plug a lots pump 150 sx to Circ 40 400 5 T.D. OH W/ TRG TOPOFF 10" - 50 SX TOP OFF 6'- SO SK JOB COMPLETE Thanks DAVIA, SETH, JOHN, & TY/ER