KOLAR Document ID: 1672772

**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 #:			l APIN	o. 15 -				
				API No. 15 Spot Description:				
Address 1:				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:				
City:	State:							
		·						
Phone: ( )				NE NW	SE SW			
Type of Well: (Check one) Use Water Supply Well Supply	Other: Gas S  No If not, is w  All (If needed attach anoth	Storage Permit #:	Lease Date V No The pl	County: Well #: Well #: The plugging proposal was approved on: (KCC District Agent's Name)  Plugging Commenced: (KCC District Agent's Name)				
Depth to	o Top: Bot	tom: T.D	1 00	· ·				
Depth to	o Top: Bot	tom:T.D		ing Completed.				
Show depth and thickness of	all water, oil and gas for	mations.						
Oil, Gas or Wate			<del></del>	g Record (Surface, Conductor & Production)				
Formation	Content	Casing	Size	Setting Depth	Pulled Out			
		gged, indicating where the mu of same depth placed from (bu			ds used in introducing it into the hole. If			
Plugging Contractor License		_ Name:	e:					
Address 1: Addres				ss 2:				
City:			State:		Zip:+			
Phone: ( )								
Name of Party Responsible for	or 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.



			IT REP	OPERATING	COMPAL 3	<u>-</u>						
					G COMPAN Well:	BIRKET TRUST 1	-15 Ticket:	WP3583				
			IGTON H	<del></del>	County:	RENO KS	Date:	11/3/2022				
Fiel	d Rep:	JIM CR	OMBIE		S-T-R:	15-24S-08W	Service:	PLUG				
Dow	nhole I	nformati	on		Calculated Sig	ırry - Lead	Calc	ulated Slurry - Tail				
Hole	Size:	7 7/8	in		Blend:	CLASS A	Blend:	H-PLUG1.2				
Hole [	Depth:		ft		Weight:	15.6 ppg	· Weight:	13.8 ppg				
Casing			in		Water / Sx:	5.2 gal / sx	≠ Water / Sx:	6.9 gal/sx				
Casing I			ft		Yield:	1.20 ft³ / sx	Yield:	1.43 ft <sup>3</sup> / sx				
ubing /			in		Annular Bbls / Ft.:	bbs / ft.	Annular Bbls / Ft.:	bbs / ft.				
	Depth:		ft		Depth:	ft	Depth:	ft				
rool / Pa					Annular Volume:	0.0 bbls	Annular Volume:	0 bbis				
Tool Doisplace			ft		- Excess:		Excess:					
ishiace	mente		bbls		Total Slurry:	32.0 bbls	Total Slurry:	28.0 bbls				
TIME	RATE	PSI	STAGE BBLs	TOTAL BBLs	Total Sacks: REMARKS	150 sx	Total Sacks:	110 sx				
8:00 AM					ON LOCATION							
				-	1ST PLUG AT 1262'							
9:20 AM	3.0	60.0	3.0	3.0	ESTABLISH CIRCULATIO	PN .						
9:25 AM	2.5	50.0	10.5	13.5		TH 3% CALCIUM CHLORIDE						
9:30 AM	2.5	10.0	6.0	19.5	START DISPLACEMENT							
				19.5	DID NOT TAG CEMENT, R	RECEMENMT						
1:45 AM	3.0	60.0	2.0	21.5	ESTABLISH CIRCULATIO	N						
1:50 AM	2.5	40.0	10.5	32.0	MIX 50 SKS CLASS A WIT	MIX 50 SKS CLASS A WITH 3% CALCIUM CHLORIDE AND 50 LBS COTTON SEED HULLS						
1:55 AM	2.5	10.0	6.0	38.0	START DISPLACEMENT							
1:47 PM				38.0	TAGGED AT 1200'							
3.04.044	+			38.0	2ND PLUG AT 700'							
2:01 PM 2:03 PM	3.0	40.0	2.0	40.0	ESTABLISH CIRCULATIO	N						
2:07 PM	3.0	49.0 10.0	10.5	50.5	MIX 50 SKS CLASS A							
	-3.0	10.0	3.0	53.5 53.5	START DISPLACEMENT							
2:30 PM	3.0	20.0	27.0	80.5	3RD PLUG AT 228' MIX 105 SKS H-PLUG		· · · · · · · · · · · · · · · · · · ·					
				80,5	CEMENT TO SURFACE							
:50 PM	1.0	10.0	2.0	82.5	MIX 5 SKS H-PLUG FOR T	OP OFF						
								,				
				-,								
				-	JOB COMPLETE, THANK	YOU!						
				-	MIKE MATTAL							
					KEVIN & KENNY							
-+				•								
		CDEW		•								
٠.		CREW			UNIT		SUMMARY	nasyani Asal Majarakan (Salah )				
mp Ope	enter:	MATT.			91	Average Rate	Average Pressure	Total Fluid				
	rator: lk #1:	NOEL	***************************************		181/522	2.6 bpm	33 psi	83 bbis				
51	lk #1:	JULIA	P\$		182/534							



Please Remit To: P.O. Box 549

Hays, KS 67601 Phone: (785) 628-6395

Fax: (785) 628-3651

FIELD TICKET No.

7326

DATE 11/2/22

<i>-</i> /// L		
JNIT :	# <u>481</u>	7

					-				
INVOICE NO.		P.O. NO.					AFE NO.		
CUSTOMER Grand	رج ا	LEASE BI	rte	+ 7	rus 7	#1-15	WELL NO.		
ADDRESS			FIELD		ATE KS	COUNTY Ren	0		
			LOCATION						and the same of the same
CITY		CASING SIZE & WT. TBG. SIZE							
STATE	ZIP		TYPE OF JOE				PROPERTY AND ADDRESS OF THE PARTY AND ADDRESS		
ORDERED BY			TITLE					SERVICE SUPV.	
PART NO.	DESCRI					UNIT PRICE	AMOUNT	Ī	
	Sense cha	nce		TOOPE	<u> </u>	7	PRICE	!	•
									į
	5/2 Brilge F	Plug				1			
	Set at 3715								
	0 0 1								<u> </u>
	Dung Baile	. 101	21						ī
	2 Sucto Corner	lug						$\vdash$	
	Casine Cut 5)					,	A CONTRACTOR OF THE CONTRACTOR	<u>:</u>	
	Cut at 2700							İ	
	Free Point		a+2737						
	Free at 2700.	stucke					ACCUPATION OF THE PROPERTY OF	Marie Grande Communication Com	
Sickstannt			***************************************						-
h. Pha-1									
CALLED OUT ON LOCATION TimeTime			COMPLETED Time		TOTAL	SERVICE	& MATERIALS		i
					DISCOUNT				<b>†</b>
Date	Date Date			е		TANA Marian managaran katalan	TAX		
*ACCIDENT REPORT MUST BE ATTAC				TOTAL CHARGES				1	
WITH MY INITIALS, I CONFIRM "HOURS" COLUMN, ACCURATE	THAT THE TIME SHOWN IN THE Y REFLECTS MY COMPENSABLE T	IME.	,		3			-	
Employee Name (Print)	Hou	urs Initia	als						
Weeder	1.	5							
Tourley									
CUSTOMER AGREES to pay (the "C	Company") on a net 45 day basis t	from date of Ir	voice to avoid l	nes of	discount	Invoices older	then 45 days are si	thleet to loss of discount	

CUSTOMER AGREES to pay (the "Company") on a net 45 day basis from date of Invoice to avoid loss of discount. Invoices older then 45 days are subject to loss of discount on ticket. If Customer disputes any item invoiced, Customer shall, within 20 days after receipt, notify the Company of the item(s) disputed, specifying the reason(s) therefor; payment of the disputed item(s) may be withheld until settlement of dispute, but payment of undisputed portion of invoice shall be made without delay. All payments shall be made at the address shown on the reverse side of this document. In the absence of a separate written contract, CUSTOMER REPRESENTATIVE REPRESENTS AND WARRANTS THAT HEISHE IS AUTHORIZED TO ENTER INTO THIS AGREEMENT ON BEHALF OF CUSTOMER AND ACCEPTS ALL TERMS AND CONDITIONS AS PRINTED ON THE REVERSE SIDE OF THIS DOCUMENT (WHICH INCLUDES INDEMNITY LANGUAGE THAT ALLOCATES RISKS RELATED TO THE ABOVE DESCRIBED SERVICES). Pricing and extensions, if shown above, are subject to verification and correction at time of invoicing.

x Les Vice

CUSTOMER REPRESENTATIVE