KOLAR Document ID: 1675496

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 #:			ı	API No. 15	5			
Name:								
Address 1:						vp S. R East West		
Address 2:					Feet from			
City:	State:	Zip:+			Feet from			
Contact Person:						est Outside Section Corner:		
Phone: ()				· ·	NE NW	□se □sw		
Type of Well: (Check one) Water Supply Well ENHR Permit #: Is ACO-1 filed? Producing Formation(s): List A Depth to Depth to	Other: Gas Sto No If not, is well All (If needed attach another Top: Botto	SWD Permit #: rage Permit #: log attached? Yes	No	Lease Nar Date Well The pluggi by: Plugging C	me:Completed:ing proposal was appro	oved on: (Date) (KCC District Agent's Name)		
Show depth and thickness of a	all water, oil and gas forma	ations.						
Oil, Gas or Water	Records		Casing F	Record (Surfa	ace, Conductor & Produc	ction)		
Formation	Content	Casing	Size		Setting Depth	Pulled Out		
cement or other plugs were us	sed, state the character of	same depth placed from (bot	ttom), to (top) for each	n plug set.			
Plugging Contractor License #	t:		Name: _					
Address 1:				dress 2:				
City:				State:		Zip:+		
Phone: ()				-				
Name of Party Responsible fo	r Plugging Fees:							
State of	County, _			, SS.				
				Fmi	plovee of Operator or	Operator on above-described well,		
	(Print Name)				p. 5,00 or Operator of	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.

Acid & Cement

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

Invoice

Page: 1

BURRTON, KS | 6 GREAT BEND, KS (620) 463-5161

(620) 793-3366 FAX (620) 463-2104 FAX (620) 793-3536

INVOICE NUMBER: C60713-IN

BILL TO:

NOVY OIL & GAS, INC. PO BOX 559 GODDARD, KS 67052

LEASE: PETRO #1

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE O	RDER	SPECIAL I	NSTRUCTIONS		
11/28/2022	60713		11/23/2022	PETRO #1		N	IET 30		
QUANTITY	U/M	ITEM NO./DE	ESCRIPTION	•	D/C	PRICE	EXTENSION		
120.00	МІ	MILEAGE CEME	MILEAGE CEMENT PUMP TRUCK			6.00	720.00		
1.00	EA	PUMP CHARGE	PLUG		0.00	700.00	700.00		
215.00	SK	60/40 POZ MIX 2	% GEL	:	0.00	13.25	2,848.75		
4.00	sĸ	2% ADDITIONAL	.GEL		0.00	25.25	101.00		
200.00	LB	COTTONSEED H	HULLS		0.00	0.50	100.00		
223.00	EA	BULK CHARGE			0.00	1.25	278.75		
588.72	МІ	BULK TRUCK - TON MILES			0.00	1.10 647.59			
REMIT TO:			СОР			Net Invoice:	5 396 09		
P.O. BOX 438 HAYSVILLE, KS 67060		FUEL SURCHARGE IS NOT TAXABLE AND IS ADDED TO MILEAGE, PUMP AND OR DELIVERY CHARGES ONLY.			SCO	5,396.09 458.67			
					SCOCO Sales Tax: Invoice Total: 5,				
RECEIVED BY		t	NET 30 DAYS						



FIELD ORDER

Nº C_____

60713

BOX 438 - HAYSVILLE, KANSAS 67060

ncia &	CCIIIC	316-	24-1225	DATE :	00 N	20	22
				DATE	23-Nov	20	22
S AUTHORIZE	D BY: NOV	Y (NAME OF	CUSTOMER)		· · · · · · · · · · · · · · · · · · ·		
Address		City		State	KS	· · · · · · · · · · · · · · · · · · ·	
TO TREAT WEL AS FOLLOWS		ROWell No.	<u>1</u> C	ustomer Order No.			
Sec. Twp. Range <u>1-20-33</u>	w	County <u>S</u>	сотт	State	KS		
be held liable for any da implied, and no represen- realment is payable. Th bur invoicing departmen. The undersignation of the second THIS ORDER MUST	image that may accr intations have been in here will be no disco- int in accordance with ned represents hit. BE SIGNED	n hereof it is agreed that Copeland Acid is to service or treat at owners risk ue in connection with said service or treatment. Copeland Acid Service ha elved on, se to what may be the results or effect of the servicing or treating, and allowed subsequent to such date. 6% interest will be charged after 60 of latest published price schedules. maelf to be duty authorized to sign this order for well owner or op	s made no representation, exp seid well. The consideration of lays. Total charges are subject erator.	ressed or of said service or t to correction by			
BEFORE WORK IS	COMMENCED	Well Owner or Operator	B	·	Agent		
CODE	QUANTITY	DESCRIPTION		UNIT COST		MOUNT	
20.0002	120	Mileage P.T.	· · · · · · · · · · · · · · · · · ·	J\$6.00		\$720	<u></u>
20.0003	1	Pump Charge Plug		\$700.00		\$700	
20.1002	215	60/40 Poz 2% Gel		\$13.25		\$2,848	 3.75
20.1004	4	Add. Gel after 2% Per Sack		\$25.25		\$10 ⁻	1.00
20.1017	200	Hulls per lb.		\$0.50		\$100	00.0
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20.0011	223	Bulk Charge		\$1.25		\$278	3.75
20.0012	588.72	Bulk Truck Miles		\$1.10	ļ	\$647	7.59
		Process License Fee on	Gallons	}			

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, supervision and control of the owner, operator or his agent, whose signature appears below.

Copeland Representative GREG C.

Copelan	a Representative	GREG C.			
Station	GB		KIRK G.		
				Well Owner, Operator or Agent	
Remarks					

TOTAL BILLING



TREATMENT REPORT

Formation:	Acid	& Cemer	it 🕰						Acid Stage No.		
Date 11/23/2022 Datrict GB						Type Treatment: A	lmt.	Type Fluid	Sand Size	Pound	is of Sandi
Company NOVY	Date 1	1/23/2022 D	istrict GB	F.O.	No. <u>C60713</u>						
BBL/Gal BBL/	Company	NOVY		·							
Scot State State	Well Name	& No. PETRO	¥1				Bbl./Gal.				
Casing Size Type & Wt.			0-33W			Í <u></u>	Bbf./Gal.				
Type & Wt. Set at ft.	County	SCOTT		State KS	···	Flush					
Size Type & Wt. Set at ft from ft. to ft. No. ft. O						Treated from				o. ft	0
Formation:	Casing:	Size	Type & Wt.		5et atft.	from				o, ft.	0
Perf. To Actual Volume of Oil / Water to Load Hole: Bbh/Gal.	Formation			Perf	to	from	ft. to		ft. N	o. ft.	0
Formation:	Formation	:		Perf.	to	Actual Volume of Oil / V	Vater to Load Hole:				Bbl./Gal.
Line: Size Type & Wt Top at ft. Bottom at ft. Cemented: Yes ▼ perforated from ft. to ft. Tubing: Size & Wt. Swung at ft. bottom ft. to ft. t. Perforated from ft. t. Perforated from ft. t. Perforated from ft. t. t. Perforated from ft. t. t. Perforated ft. Perforated ft. Perforated ft. Perforated ft. t. Perforated ft. t. t. Perforated ft. Perforated ft. t. Perforated ft. t. Perforated ft. Perforated ft	Formation								···		
Cemented: Yes Perforated from	Liner: Siz	reType &	Wt.	Top at ft.		Pump Trucks. No. U	sed: Std. 320	Sp.	т	win	
Perforated from										-	
Plugging or Sealing Materials: Type Open Hole Size	Tubing:	Size & Wt				Personnel GREG CLA	RENCE				
Company Representative KIRK G. Treater GREG C.		Perforated fr	om	ft. to	ft.	Auxiliary Tools					
Company Representative KIRK G. Treater GREG C.						Plugging or Sealing Mate	erials: Type				
TIME PRESSURES Inm./p.m. Tubing Casing Total Fluid Pumped REMARKS ON LOCATION TIE ON TO 8 5/8 AND PUMP 15 SKS, PSI TO 200#	Open Hole	Size	Y.D	ft. P	.B. toft.				Gals.		lb.
TIME PRESSURES Inm./p.m. Tubing Casing Total Fluid Pumped REMARKS ON LOCATION TIE ON TO 8 5/8 AND PUMP 15 SKS, PSI TO 200#											
### Tubing Casing Total Fluid Pumped REMARKS 9:45	Company f	Representative		KIRK	j	Treater		GRE	G C.	_	
9:45 ON LOCATION TIE ON TO 8 5/8 AND PUMP 15 SKS, PSI TO 200# TIE ON 4 1/2 CASING AND PUMP 50 SKS WITH 200# HULLS, PUMP 26 BBLS H2O. PUMP 150 SKS, PSI TO 400#. JOB COMPLETE	TIME	PRES	SURES	Total Fluid Pumped		<u></u>	DEAAADVE				·
TIE ON TO 8 5/8 AND PUMP 15 SKS, PSI TO 200# TIE ON 4 1/2 CASING AND PUMP 50 SKS WITH 200# HULLS, PUMP 26 BBLS H2O. PUMP 150 SKS, PSI TO 400#. JOB COMPLETE	ı.m./p.m.	Tubing	Casing				REMIARKS				
TIE ON 4 1/2 CASING AND PUMP 50 SKS WITH 200# HULLS, PUMP 26 BBLS H2O. PUMP 150 SKS, PSI TO 400#. JOB COMPLETE	9:45		· · · · · · · · · · · · · · · · · · ·		ON LOCATION				_		
TIE ON 4 1/2 CASING AND PUMP 50 SKS WITH 200# HULLS, PUMP 26 BBLS H2O. PUMP 150 SKS, PSI TO 400#. JOB COMPLETE											
BBLS H2O. PUMP 150 SKS, PSI TO 400#. 11:15 JOB COMPLETE					TIE ON TO 8 5/8	AND PUMP 15	SKS, PSI TO	200#			
BBLS H2O. PUMP 150 SKS, PSI TO 400#. 11:15 JOB COMPLETE		_									
BBLS H2O. PUMP 150 SKS, PSI TO 400#. 11:15 JOB COMPLETE	i				TIE ON 4 1/2 CA	SING AND PUN	AP 50 SKS WI	TH 200#	HULLS, PL	JMP 26	5
				1							
THANK YOU!!!	11:15				JOB COMPLETE					-	
THANK YOU!!!											
	-				THANK YOU!!!		:				1
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