KOLAR Document ID: 1681131

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? Yes No If not, is well log attached? Yes No	The plugging proposal was approved on: (Date)
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. 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	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



CEMENT TREATMENT REPORT

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Cust	omer:	MCCOY PETR					그의 기업이 감독하게 관망	
City, S					BROWN A 1-15	Ticket	WP 3652	
				County:		Date	11/20/2022	
Field	l Rep:			S-T-R:	15- 30S- 19W	Service	PTA	
Down	ihole li	formation		Calculated Slur	rv - Lead	IER, CARACTER		
	Size:	7 7/8 in	7	Blend:			culated Slurry - Tail	
Hole D	epth:	ft		Weight: ppg		Blend: H-PLUG		
Casing		4 1/2 in	D.P.	Water / Sx: gal / sx		Weight Water / Sx		
asing Depth:		g Depth: ft		Yield:	ft ³ / sx	Yield		
ubing / L		In		Annular Bbis / Ft.:	bbs / ft,	Annular Bbls / Ft.		
	Depth: ft			Depth:	ft	Depth		
fool / Pa	COLUMN.			Annular Volume:	0.0 bbis	Annular Volume:		
Tool D	100000	ñ		Excess:		Excess		
isplacen	nent:	bbis		Total Slurry:	0.0 bbis	Total Slurry:		
IME F	RATE	STAGE PSI BBLs		Total Sacks:	0 sx	Total Sacks:		
:30AM		- SI BBLS		REMARKS				
			•	ON LOCATION- SPOT EQU 1st PLUG @ 1250'	APMENT			
3:55AM 5	5.0	12.7	12.7	MIX 50 SKS H-PLUG CEME	NT @ 13 8 PPC			
4:00AM 5	5.0	14.5	27.2	DISPLACEMENT	INI @ 13.8 PPG			
			27.2	2nd PLUG @ 690'				
4:25AM 4	.0	12.7	39.9	MIX 50 SKS H-PLUG CEME	NT @ 13.8 PPG			
4:28AM 4	.0	6.5	46.4	DISPLACEMENT				
			46.4	3rd PLUG @ 60'				
5:10AM 4	.0	5.0	51.4	MIX 20 SKS H-PLUG CEME	NT # 13.8 PPG			
6:20AM 3		7.0	58.4	PLUG RATHOLE				
5:30AM 3.	.0	5.0	63.4	PLUG MOUSEHOLE				
				WASH UP PUMP TRUCK				
				JOB COMPLETE.				
				THANKS- KEVEN AND CRE	W			
_								
-	1	COLUMN TWO IS NOT						
		CREW		UNIT		SUMMAR	A MARK AND A CAMPACINA AND A	
Cemen		LESLEY		936	Average Rate	Average Pressure	Total Fluid	
mp Opera		JULLIAN		176-522	4.0 bpm	- psi	63 bbls	
Bulk	: #1: : #2:	TREVINO		182-534				

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In the second second		and the state of the		-		\sim				S
Customer	McCOY PETRO	DLEUM CORP.	Lease & W	ell 🖗 🛛 BRC	WN A 1	-15			Date	11/20/202
Service District	PRATT, KS.		County & S	itate KIO	NA, KS.	Legals S/T/F	15- 30	S- 19W	÷ doL	
Јођ Туре	PTA	PROD	¤ INJ	□ SV	VD	New Well?	* YES	D No	Ticket #	WP 3652
Equipment #	Driver				Job Safe	ty Analysis - A Discu	ssion of Hazards	& Safety P	rocedures	
936	LESLEY	Hard hat		⊡ Glo	oves		Lockout/Tag	out	Warning Signs	& Flagging
176-522	JULLIAN	A H2S Monitor		© Eyr	e Protect	ion	Required Per	mits	Fail Protection	
182-534	TREVINO	A Safety Footw	ear	D Re	spiratory	Protection	Slip/Trip/Fall	Hazards	Specific Job Se	equence/Expectations
		G FRC/Protectiv	e Clothing	□ Ad	ditional	Chemical/Acid PPE	Overhead Ha	zards		Medical Locations
		P Hearing Prote	ection	• Fin	e Extingu	isher	Additional control	oncerns or is	sues noted below	
						Co	mments			
		ΡΤΑ						•		
		_								
D.4.2. 410										
Product/Service Code		Des	scription			Unit of Measur	a Dupatitu			
CPDE5	H-Plug A		-		-	sack	and the second se			Net 4
VI015	Light Equipment	Mileage				mi	170.00			t
M010	Heavy Equipment	2778-0451				- mi	45.00 90.00			t
vi620	Ton Mileage					tm	331.00		-	t
2660	Cement Blending	& Mixing Service				sack	170.00			t
0012	Depth Charge: 1					job	1.00		1	ł
225	Cement Data Ac	quisition				job	1.00			t
2001	Service Supervis	ior				day	1,00			t
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Custo	mar Section: On	the following out								<u> </u>
00310	mer acenon, Un	the following scale	nova thorniq Aort i	aie Burrice	ilia Selvi	res Inc 2			iller were	-
Bas	sed on this job. h	low likely is it you	would recomm	end HSI to	ut colles	10Ue?	Total Taxable	\$ -	Tax Rate:	
						19241	used on new wells	to be sales t		s
					_ ,		Hurricane Service well information al		a determination if	
Ur	nilikety 1 2	3 4 5	6 7	8 9	10	Extremely Likely	services and/or pr			
BUS: Cash in advan							HSI Represe	ntative:	KEVE	7

TERMS: Cash in advance unless Humicane Services Inc. (HSI) has approved credit prior to sale. Credit terms of sale for approved accounts are total invoice due on or before the 30th da due accounts shall pay interest on the balance past due at the rate of 1 ½ per month or the maximum allowable by applicable state or federal laws. In the event it is necessary to employ applied in aniving at net invoice price. Upon revocation, the full invoice price without discount is immediately due and subject to collection. Prices quoted are estimates only and date of issue. Pricing does not include federal, state, or local taxes, or royalites and stated price adjustments. Actual charges may vary depending upon time, equipment, and material ultir recommendations made concerning the results form the use of any product or service. The information precented is a best estimates of the actual results that may be achieved and should purposes and HSI makes no guarantees of future production performance. Customer represents and warrants that well and all associated equipment in acceptable condition to receive se customer guarantees proper operational care of all customer owned equipment and property while HSI is on location performing services. The authorization below acknowledges the rece terms/conditions stated above, and Humicane has been provided accurate well information in determining laxable services.

CUSTOMER AUTHORIZATION SIGNATURE