KOLAR Document ID: 1690538

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 De	scription:			
Address 1:			.		Sec Tw	p S. R East West		
Address 2:					Feet from			
City:	State:	Zip: +	.		Feet from	East / West Line of Section		
Contact Person:				Footage	s Calculated from Neares	st Outside Section Corner:		
Phone: ()					NE NW	SE SW		
Type of Well: (Check one)		OG D&A Cathodi		,				
ENHR Permit #:	Gas Sto	rage Permit #:						
Is ACO-1 filed? Yes	No If not, is well	log attached? Yes				ved on: (Date)		
Producing Formation(s): List A	ll (If needed attach another	sheet)				(KCC District Agent's Name)		
Depth to	Top: Botto	m: T.D		Plugging	a Commenced:			
Depth to	Top: Botto	m: T.D		00 0				
Depth to	Top: Botto	m: T.D	'	. ragging	g completed.			
Show depth and thickness of a	all water, oil and gas forma	ations.						
Oil, Gas or Water	Records		Casing Re	g Record (Surface, Conductor & Production)				
Formation	Content	Casing	Size		Setting Depth	Pulled Out		
Describe in detail the manner cement or other plugs were us		_				Is used in introducing it into the hole. If		
Plugging Contractor License #	:		Name:	ame:				
Address 1:			Address 2:	:				
City:			\$	State:		Zip:+		
Phone: ()								
Name of Party Responsible for	r Plugging Fees:							
State of	County, _			, ss.				
	<i>3</i> , –			_	implayed of Onerster -	Operator on obeyed decertibed		
	(Print Name)			E	imployee 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.

Invoice



Date	Invoice #
1/9/2023	8339

Bill To	
EDISON OPERATING CO LLC 8100E 22ND STREET NORTH BLDG 1900 WICHITA, KS 67226	

Job Info	
Kuhn #1-24 Stafford County, KS	
Field Ticket #7358	

P.O. No.	Terms
	Net 30

Quantity	Description	Amount
1 1 1	Service Charge Casing Cutter @ 1550 Set Solid Bridge Plug 5 1/2 - each Dump Bailer w/sack of cement Total Charges for Service Cased Hole - Discount	500.00 1,350.00 1,550.00 300.00 3,700.00 -555.00

Please remit to above address.

Total

\$3,145.00



INVOICE

DATE INVOICE #

January 15, 2023

2220

PLUG JOB

470 Yucca Ln Pratt, K5 67124 Office Phone (620)672-9100 Fax (620)672-5020

Bill To: EDISON OPERATING COMPANY

Lease Name

Kuhn

Well Number

1-24

County

State

Stafford KS

1/9/23 Work Ticket #29560 8.0 Rig #30 Operator & 2 men 1.0 Tong Trip 1.0 Thread Dope 1.0 Fuel Charge 1/9/23 Work Ticket #181 1.0 Service Man to Run Casing Equipment 4 1/2 Casing Equipment	300.00 2,400.0 100.00 100.0 50.00 50.0 160.00 160.0
 1.0 Tong Trip 1.0 Thread Dope 1.0 Fuel Charge 1/9/23 Work Ticket #181 1.0 Service Man to Run Casing Equipment 	100.00 100.00 50.00 50.00 160.00 160.00
1.0 Thread Dope 1.0 Fuel Charge 1/9/23 Work Ticket #181 1.0 Service Man to Run Casing Equipme	100.00 100.00 50.00 50.00 160.00 160.00
1.0 Fuel Charge 1/9/23 Work Ticket #181 1.0 Service Man to Run Casing Equipme	50.00 50.00 160.00 160.00
1/9/23 Work Ticket #181 1.0 Service Man to Run Casing Equipme	160.00
1.0 Service Man to Run Casing Equipme	750.00 750.00
	ont 750.00 750.00
	ent 750.00 750.0
	800.00
90.0 Mileage	1.50 135.0
1/10/23 Work Ticket #29561	
5.5 Rig #30 Operator & 2 men	300.00 1,650.0
1.0 Fuel Charge	110.00

 SUBTOTAL
 6,155.00

 TAX RATE
 7.50%

 SALES TAX
 461.63

 TOTAL
 \$ 6,616.63

SALES & SERVICE INVOICE

Remit To: Alliance Well Service Inc. • 470 Yucca Lane • Pratt, KS 67124

TERMS: 30 DAYS FROM DATE OF INVOICE

OLD WELL D		STATE		DISC. NET AMOUNT	₩—							\$000	135 00					tion in accordance with addition of applicable x if not listed above.
Office Phone: 620-672-9100 23 $P_{4}ff$ Fax: 620-672-5020	Falison Opersting	P COUNTY	T WELL NO. FIELD	DESCRIPTION DESCRIPTION	- Service man charge to run casia, tonss, set CIBP 750	@ 3750' & Sump beil 25x cont on C/DP.	14 @ 1550° /qu	to 873' pump 10 sx sol & 50 sx 60/40 por	4% sel pull to 517 4 pump 50 sx 60/40 mil	4% 8 ml to 64 d estecléte w/ 25 sx	60/40 you 4% sol	Cosing opuip 512 cesing tongs, slips, cloustons of les down oguis 800 00	milosje (er milospe			фхи	invises have been received on the terms and conditions set forth on the reverse as read and understood, that the basis for charges is correctly stated and that I am as agent of owner or contractor.	Charges are subject to correction in accordance with latest price schedules and the addition of applicable State and Local sales / Use tax if not listed above.
DATE ISSUED /- 9- 2.	0	٥	-0	EM CO	19	+						20	03 60	-	+		Barry	aylor Printing, Inc. • 620-672-3656

Taylor Printing, Inc. • 620-672-3656



№ 29560

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		24 Hc	our Phone: e	70 Yucca Lan	ie • Pratt,	KS 6712	24 010 11	IELL 🔀	
				620-672-9100	• Fax: 620	-672-502	- (12 00	7	
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COMPANY E	ddien				JOB TYP€_	> 1			COMPLETE
ADDOCÉS	44150n								INCOMPLETE
ADDRESS					LEASE K			1116	:(L # -)[]
CITY / STATE		7	ZIP CODE		SEC	TI	IJρ		
POSITION		NAME	THE CODE		COLINITY S	tarffin	4	RNC	-
OPERATOR DESCRIPTION	Sosh (20055		THIS HE VENUE	TRAVEL	NON REVE	NUE TOTAL H	I CONTRACTOR I	STATE KS
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Nº 29561

Taylor Printing, Inc. • 620-672-3656

WORK TICKET

NEW WELL 470 Yucca Lane • Pratt, KS 67124 OLD WELL 🛛 24 Hour Phone: 620-672-9100 • Fax: 620-672-5020 RIG # __30 DATE -JOB TYPE INCOMPLETE COMPANY Eddison _ WELL #___ 1-54 ADDRESS ... SEC TWP ANG CITY / STAT€ ZIP CODE COUNTY **POSITION** NAME HRS REVENUE TRAVEL NON REVENUE TOTAL HAS WIKD **OPERATOR** DERRICK HAND BOOK FLOOR HAND JTS PULLED WELL EQUIPMENT JTS RAN RODS RODS PONY RODS POUSHED AODS PUMP / VALVES TUBING PUPS SN / BBL ANCHOR / PACKER OTHER DESCRIPTION OF WORK BEING PERFORMED Double Drum Rig w/2 Men_ 300 Hrs @ Per Hour Travel Time Total Hrs @ Per Hour Swab Cups No._ Total Size _ Type Per Each Swab Cups No. Total Size ___Tγρe ____ Per Each Misc Luel Total Misc Total Misc Total Misc Total Misc Total Misc__ Total Total Company Representative Date TOTAL



Remit To: Hurricane Services, Inc.

250 N. Water, Suite 200 Wichita, KS 67202 316-303-9515

Customer:

EDISON OPERATING CO LLC 8100 E 22ND ST N BUILDING 1900 WICHITA, KS 67226 Invoice Date: 1/10/2023
Invoice #: 0366057
Lease Name: Kuhn
Well #: 1-24
County: Stafford, Ks
Job Number: WP3815
District: Pratt

Date/Description	HRS/QTY	Rate	Total						
PTA	0.000	0.000	0.00						
H-Plug	150.000	14.000	2,100.00						
Cement Gel-Tacobond	1,000.000	0.450	450.00						
Light Eq Mileage	40.000	2.000	80.00						
Heavy Eq Mileage	80.000	4.000	320.00						
Cement Blending & Mixing	175.000	1.400	245.00						
Ton Mileage	302.000	1.500	453.00						
Depth Charge 501'-1000'	1.000	1,250.000	1,250.00						
Cement Data Acquisition	1.000	250.000	250.00						
Service Supervisor	1.000	275.000	275.00						

 Net Invoice
 5,423.00

 Sales Tax:
 318.75

 Total
 5,741.75

TERMS: Net 30 days, Interest may be charged on past due invoice at rate of 1 ½% per month or maximum allowed by applicable state or federal laws. HSI has right to revoke any discounts applied in arriving at net invoice price if invoice is past due. If revoked, full invoice price without discount plus additional sales tax, as applicable, is due immediately and subject to interest charges. Customer agrees to pay all collection costs directly or indirectly incurred by HSI in the event HSI engages a third party to pursue collection of past due invoice.

<u>SALES TAX:</u> Services performed on oil, gas and water wells in Kansas are subject to sales tax, with certain exceptions. HSI relies on the well information provided by the customer in identifying whether the services performed on wells qualify for exemption.



Customer	Edison Operating		Lease & Well #	Kuhn 1-2	4				Date	1,	/10/2023	
Service District	Pratt Kansas		County & State	Stafford.	Kansas	Legals S/T/R	24-2	2s-14w	Job#			
Job Type	PTA	2 PROD	IJ IN)	□ SWD		New Well?	D YES	☑ No	Ticket#	ļ	vp 3815	
Equipment #	Driver				Safety A	nalysis - A Discus			The state of the s		Ah 2012	
916	M Brungardt	7) (tarel bea		☑ Gloves		, any one of the second	□ Lockout/T			e O Flancius		
181/521	A Clifton	3 Hard hat 3 H2S Monitor		☐ Eye Pro			☐ Required i		 □ Warning Sign. □ Fall Protection 			
182/534	K Julian	Safety Footwer		☐ Respira		tection	☐ Slip/Trip/f		□ Specific Job S		netation.	
102354	K Julian	FRC/Protective				mical/Acid PPE	☑ Overhead		Muster Point/			,
		D Hearing Protect		☐ Fire Ext					ssues noted below	MEGICAI LUCA	lions	
							nments	Concerns of 1	sades Hoted Delow			
						001	minerita					
Product/ Service		and and an election			A			THE RESERVE AS A SECOND		150 At 100 1810	- C 4 F	+1-11-5
Code	0.4	Desc	ription	X 10		Unit of Measure	Quantity				Commence of	Amount
apôte	H-Plug				V===	sack	450	19				\$2,100.00
02/06/4	Cement Gel					ib	1,400	00				\$450.00
สมโหาด์	Light Equipment Mil	eage				mī	46	50				\$80.00
m0.10	Heavy Equipment M	fileage				mi		10				\$320.00
5 44	Cement Blending &	Mixing Service				sack	1.5	no.				\$245.00
(40 =7)	Ton Mileage					tm	340	10				\$453.00
614	Depth Charge: 501'-	1000'				job		10				\$1,250.00
4 -	Cement Data Acquis	silion				dol	I	10				\$250.00
to-1	supervisor					job	t.	10				\$275.00
-,-												
Custo	mer Section: On the	e following scale h	ow would you rate	Hurricane S	Services	Inc.?				Net:	S	5,423.00
							Total Taxab	e \$ -	Tax Rate:		>	<
Bas	sed on this job, how	v likely is it you v	vould recommend	HSI to a c	olleagu	27			nducts and services	Sale Tax:	\$	185
			0 0 0		1		Humicane Serv		a customar provided			
U	netty 1 2 3	3 4 5	6 7 8	9	10 E	archety Likely		n above to make i products are ta	e a determination if ax exempt	Totali	e	E 492 00
				-						Total:	\$	5,423.00
							HSI Repre	sentative:	Mark Brung	rardt		
ERMS: Cash in advan	ce unless Humcane Se	ervices Ind. (HSI) ha	s approved credit pri	or to sale. Cr	redil terni	s of sale for approved	accounts are to	ital invoice due	on or before the 30th	day from the di	ate of invo	pice, Past
ue accounts shall pay	interest on the balance	past due al the rate	e of 1 ½% per month	or the maxim	num allov	rable by applicable sta	are or federal las	vs. In the event	it is necessary to am:	sloy an agency	and/or all	omey to

TEIMS: Cash in advance unless flurricane. Services flor, (FSI) has approved credit prior to sale, Oradii terms of sale for approved accounts are total invoice due on or before the 30th day from the date of invoice. Past 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 an agency and/or allomay to affect the collection, Customer hereby agrees to pay all fees directly or indirectly incurred for such collection. In the event that Customer's account with IRS becomes destinguent, HSI has the right to revoke any discounts previously applied in arriving 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 are good for 30 days from the date of issue. Pricing does not include federal, state, or local laxes, or royallies and stated price adjustments, Actual charges may vary depending upon time, equipment, and material utilimately required to perform these services. Any discount is based on 30 days net payment terms or cash. DISCLAIMER NOTICE: Technical data is presented in good (aith, but no warranty is stated or implied. HSI assumes no liability for advice or recommendations made concarming the results from the use of any product or service. The information presented is a best estimate of the actual results that may be achieved and should be used for comparison purposes and HSI makes no guarantee of future production performance. Customer represents and warrants that well and all associated equipment in acceptable condition to receive services by HSI. Likewise, the customer guarantees proper operational care of all customer owned equipment and property while HSI is on localion performing services. The authorization below acknowledges the receipt and acceptance of all terminals accurate well information in determining towards.

CUSTOMER AUTHORIZATION SIGNATURE



EMENT	TTRE	ATMEN	T REPO	ORT			(A)	
Customer: Edison Operating			ng	Well:	Kuhn 1-24	Ticket:	wp 3815	
City,	City, State: St John Kansas				County:	Stafford.Kansas	Date:	1/10/2023
Field Repa Barry Walters					S-T-R:	24-22s-14w	Service:	PTA
Dow	nhole li	nformatio	n		Calculated Slu	ırry - Lead	Calc	ulated Slurry - Tail
Hole	e Size:	7 7/8	in		Blend:	H -Plug	Blend:	
Hole	Depth:	870	ft	1	Weight:	13.7 ppg	Welght:	PPG
Casing Size:			in		Water / Sx:	6.9 gal / sx	Water / Sx:	gal / sx
Casing Depth: Tubing / Liner: Depth: Tool / Packer:		2 7/8 in B70 ft			Yield: Annular Bbls / Ft.: Depth:	1.43 ft ³ / sx bus / ft. ft	Yield: Annular Bbls / Ft.: Depth:	ft ³ / sx bbs / ft. ft
Displacement:					Excess: Total Slurry:	38.2 bbls	Excess:	0.0 hhlp
		STAGE		TOTAL	Total Sacks:	150 sx	Total Slurry: Total Sacks:	0.0 bbls 0 sx
TIME	RATE	PSI	BBLs		REMARKS	AND THE PARTY OF T	Total Sacks:	SILVE AND SOUTH THE
8:45 AM			2		on location job and safet	у		
9:00 AM					spot trucks and rig up			
				- 10				
0:10 AM					1st plug 870			
	4.0	200.0		2	gel			
	4.0	200.0	12.0	12.0	mix 50 sacks cement			
	4.0	200.0	2,5	14.5	displacement			
10:35 AM					2nd plug 300ft			
	1.0	50.0	2,5	2.5	load the hole			
	4.0	100.0	0.4	14.5	mix 50 sacks			
	4.0	100.0	0.4		displacement			
0:55 AM			- No.		3rd plug 60 ft			***************************************
	4.0	50.0	14.0		mix 55 sacks to surface			
			-					
		CREW			UNIT	传统等10个元 4	SUMMAR	
	nonter:	M Brungardt			916	Average Rate	Average Pressure	Total Fluid
Сеп	TO THE						1	
Cem ump Ope	UNIVERSE	A Clift	on		181/521	3.6 bpm	129 psi	43 bbis

ftv: 15-2021/01/25 mplv: 105-2021/01/27

