KOLAR Document ID: 1714776

**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:					escription:	
Address 1:					Sec Tw	vp S. R East West
Address 2:					Feet from	
City:	State:	Zip: +	.		Feet from	East / West Line of Section
Contact Person:				Footage	es Calculated from Neares	st Outside Section Corner:
Phone: ( )					NE NW	SE SW
Type of Well: (Check one)		OG D&A Cathodi SWD Permit #:		,		Well #:
ENHR Permit #:	Gas Sto	rage Permit #:				
Is ACO-1 filed? Yes	No If not, is well	log attached? Yes				oved on: (Date)
Producing Formation(s): List A	ll (If needed attach another	sheet)				(KCC <b>District</b> Agent's Name)
Depth to	Top: Botto	m: T.D		Plugging	a Commenced:	
Depth to	Top: Botto	m: T.D		00 (	•	
Depth to	Top: Botto	m:T.D	'	i iuggiiis	g completed.	
Show depth and thickness of a	all water, oil and gas forma	ations.				
Oil, Gas or Water	Records		Casing Re	cord (Su	urface, Conductor & Produc	tion)
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:			
Address 1:			Address 2:			
City:			;	State:		Zip:+
Phone: ( )						
Name of Party Responsible for	r Plugging Fees:					
State of	County, _			, SS.		
	·				Employee of Operator or	Operator on above described
	(Print Name)			⊑	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.



Remit To: Hurricane Services, Inc.

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

Customer:

CARMEN SCHMITT INC

PO BOX 47

GREAT BEND, KS 67530-0047

Invoice Date:

4/19/2023

Invoice #:

Lease Name:

0367953 Keller

Well #:

District:

1-13

County:

Kiowa, Ks

Job Number:

WP4185 Pratt

Date/Description	HRS/QTY	Rate	Total
PTA	0.000	0.000	0.00
H-Plug	210.000	14.000	2,940.00
Light Eq Mileage	50.000	2.000	100.00
Heavy Eq Mileage	100.000	4.000	400.00
Ton Mileage	495.000	1.500	742.50
Cement Blending & Mixing	210.000	1.400	294.00
Depth Charge 1001'-2000'	1.000	1,500.000	1,500.00
Cement Data Acquisition	1.000	250.000	250.00
Service Supervisor	1.000	275.000	275.00

710/213 20193.0113 Vell Ale BUP Cement to Plus

Net Invoice

6,501.50

Sales Tax:

383.98

Total

6,885.48

TERMS: Net 30 days. Interest may be charged on past due invoice at rate of 1 1/2% 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.

SALES TAX: 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.

Hurricane Services, Inc. 250 N. Water St., Suite #200 Wichita, KS 67202



Customer	Carmon Schmi	tŧ	Lea	se & Well#	Keller	1-13				Date	4/	19/202	:3
Service District	Pratt Kansas		Cou	nty.&:State	Klowa	.Kansas	Legals S/T/R	13-29s	-20w	Job#			
Job Type	РТА	@ PROD	נאן נו		CI SWI	)	New Well?	3 YES	U No	Ticket#	W	φ 4185	5
Equipment#	Driver				Jo	b Safety	Analysis - A Discus	sion of Hazards	& Safety Pro	cedures			
916	M Brungardt	☑ Hard hai	i.		ra Glov	res		D Lockout/Fago	iut	CI Warning Signs	& Flagging		
179/521	A Clifton	CI H2S Mo	nitor		l∄ Eye	Protectio	on.	CI Required Pen	nits	O Fall Protection			
182/534	Jose	Ø Safety Fo	ootwear		D Res	piratory i	Protection	© Slip/Trip/Fall	Hazards	O Specific Job Se	equence/Expe	ctation	15
		@ FRC/Pro	tective Clothi	ng	D Add	litional C	hemical/Acid PPE	☑ Overhead Ha	zards	☑ Muster Point/I	Medical Locat	ions	
	ļ	O Hearing	Protection		U Fire	Exlingui			ncerns or iss	ues noted below			·····
							Cor	nments		·····			
									Y Market Line	inayya Nelahada			STORY SHIP
Product/ Service Code			Description	:			Unit of Measure	Quantity				Net	t Amount
cg055	H-Plug A			<u> </u>			sack	210 00	Ĭ				\$2,940.00
::4015	Light Equipmen	t Mileage	***************************************			• • • • • • • • • • • • • • • • • • • •	mi	56.00					\$100.00
nió 10	Heavy Equipme		***************************************				mi	(00 40					\$400.00
m630	Ton Mileage			· · · · · · · · · · · · · · · · · · ·			lm	495.00					\$742.50
c65)	Cement Blendir	ig & Mixing Sen	rice				sack	210,00					\$294.00
d612	Depth Charge: 100 f'-2000'						job	1 60					\$1,500.00
ç855	Cement Data Acquisition						job	\$ 6 <u>0</u>	<u> </u>				\$250.00
7841	Service Superv	sor					day	00,5					\$275.00
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Gust	omer Section: O	n the following	scale hōwwo	uld you rate	Húmica	ne Servi	ces inc.?		1	<del>                                     </del>	Net:		\$6,501.50
								Total Taxable	Ts -	Tax Rate:			
8:	ased on this Job	, how likely is i	t you would	recommen	d HSI to	a coltea	gue?	State fax laws de		ducts and services	Sale Tax:	\$	-
	0 0	0 0				$\Box$			s retes on the	customer provided			
,	ossey 1 2	3 4	5 6	7 8		10	Extensively 13/15/	well information a services and/or p			Total:	\$	6,501.50
	····							1		Mark Bour	<del></del>	L	.,

TERMS: Cash in advance unless Hunicane Services Inc. (HSI) has approved credit prior to sale. Credit terms of sale for approved accounts are total invoice due on or before the 30m day from the date of invoice. Past due accounts shall pay interest on the balance past due at the rate of 1 200 per month or the maximum allowable by applicable state or tederal taws. In the event it is necessary to employ an agency and/or altoney to affect the collection, Costomer hereby agrees to pay all feet directly or indirectly incorred for such collection. In the event that Costomer's account with HSI becomes delinquent. HSI has the right to revoke any discounts provingly applied in among at not invoice price. Upon revocation, the full invoice price without discount is immediately due and subject to collection. Prices quoted are similar only and are good for 50 days from the date of issue. Pricing does not include fedoral, state, or local laves, or reyelfies and stated price adjustments. Actual charges may vary depending upon time, equipment, and material ultimately required to perform these services. Any discount is based on 30 days net payment terms or cash. <u>DISCLAIMER NOTICE</u>: Technical data is presented in good faith, but no warranty is stated or implied. HSI assumes no liability for advice or recommendations made concerning the results from the use of any product or service. The information presented is a bast estimate of the actual results that may be achieved and should be used for companion purposes and HSI makes no guarantee of future production performance. Customer represents and warrants that wall and all associated equipment in acceptable condition to receive services by HSI. Elevate, the customer operational care of all customer owned equipment and properly while HSI is on location performing services. The authorization below acknowledges the receipt and acceptance of all terms to only a control of the receipt and acceptance of all terms to only a control of the receipt and acceptance of all terms to only a contr

× A Dovey

CUSTOMER AUTHORIZATION SIGNATURE



	-		,						
CEMENT	i RE	ATMEN	TREP	ORT					
Cust	omer:	Carmen	Schmit	t	Wolls	Kelle	1-13	Ticket:	wp 4185
City,	City, State: Mullinville Kansas County:					Kiowa.I	Kansas	Date:	4/19/2023
Field Rep: Lanny Saloga					S-T-R:	13-29	s-20w	Service:	PTA
Dow	ihole	nformatic	on :		Calculated Slur	ry - Lead		Calcu	lated Slurry - Tail
Hole	Size:	7 7/8	in		Blend:	H-Plug		Blend:	
Hole I	lepth:	1320	ft		Weight:	13.7 ppg		Weight:	ppg
Casing	Size:		in		Water / Sx:	8.4 gal/sx		Water / Sx:	gal / sx
Casing I	epth:		ft		Yield:	1.43 (t <sup>3</sup> / sx		Yield:	ft³/sx
Tubing /	Linera		in		Annular Bbls / Ft.:	bbs / ft.		Annular Bbls / Ft.:	bbs / ft.
	epth:		ft		Depth:	ft		Depth:	ft
Tool/Pa	icker:				Annular Volumes	0.0 bbls		Annular Volumes	0 bbls
Tool I	)opth:		ft		Excess			Excess:	
Displace	mont:	12.0	bbls		Total Slurry:	53.4 bbls		Total Siurry:	0.0 bbls
			STAGE	TOTAL	Total Sacks:	210 sx		Total Sacks:	0 sx
	RATE	PSI	BBLs	BBLs	REMARKS	Commencer and grad district an			and the same of th
12:55 PM			<u> </u>	*	on location job and safety				
1:00 PM				-	spot trucks and rig up				
1:25 PM	5,0	250.0		,	1st plug 50 sacks at 1320				
	5.0	250.0 250.0	3.0 12.7	3,0 15.7 (	fresh water				
	5.0	250.0	12.7	27.7	mix 50 sacks cement displacemnt				
	0.0	200.0	12.0	EI.I	Оторгасония				
1:55 PM					2nd plug 50 sacks at 720				***************************************
	4.0	130.0	3.0	3.0	fresh water	· · · · · · · · · · · · · · · · · · ·			to to other control of the control o
	4.0	130.0	12.7	15.7	mix 50 sacks cement	·			
	4.0	130.0	4.0		displacement				
2:10 PM					3rd plug 40 sacks at 360				
	5.0	130.0	3.0		fresh water				
	5.0	130.0	10.0		mix 40 sacks cement				
	5.0	130.0	1.5		displacement				
					***		·····		
2:30 PM	3,0		5,0		60 ft 20 sacks				····
	3.0		7.5		rat hole mouse hole				
	3.0	•	5.0		mouse note				
		CREW			UNIT		<u> </u>	SUMMARY	
Cem	enter:	M Bri	ıngardt		916	Averag	e Rate	Average Pressure	Total Fluid
Pump Ope	rator:	A Clif	ion		179/521	4.3	bpm	128 psi	79 bbis
	ilk#1:	Jose			182/534				
Bı	ilk #2:								

ftv: 15-2021/01/25 mplv: 385-2023/04/18

