

**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 #: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Address 1: \_\_\_\_\_  
 Address 2: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_  
 Contact Person: \_\_\_\_\_  
 Phone: ( \_\_\_\_\_ ) \_\_\_\_\_  
 Type of Well: (Check one)  Oil Well  Gas Well  OG  D&A  Cathodic  
 Water Supply Well  Other: \_\_\_\_\_  SWD Permit #: \_\_\_\_\_  
 ENHR Permit #: \_\_\_\_\_  Gas Storage Permit #: \_\_\_\_\_  
 Is ACO-1 filed?  Yes  No If not, is well log attached?  Yes  No  
 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. \_\_\_\_\_

API No. 15 - \_\_\_\_\_  
 Spot Description: \_\_\_\_\_  
 \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ 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:  
 NE  NW  SE  SW  
 County: \_\_\_\_\_  
 Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_  
 Date Well Completed: \_\_\_\_\_  
 The plugging proposal was approved on: \_\_\_\_\_ (Date)  
 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.  
 \_\_\_\_\_  Employee of Operator or  Operator on above-described well,  
 (Print Name)

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



CHARGE TO: Well 11 Del.  
 ADDRESS  
 CITY, STATE, ZIP CODE

TICKET 36070

PAGE 1 OF 1

SERVICE LOCATIONS:  
 1. Ness City WELL/PROJECT NO. 1-7 LEASE Hank Trust COUNTY/PARISH Lane STATE KS CITY location DATE 6-1-23 OWNER  
 2. TICKET TYPE  SERVICE CONTRACTOR RIG NAME/NO. SHIPPED VIA CT DELIVERED TO location ORDER NO.  
 3.  SALES WELL TYPE oil WELL CATEGORY Workover JOB PURPOSE PTA WELL PERMIT NO.  
 4. REFERRAL LOCATION INVOICE INSTRUCTIONS

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.	UM	QTY.	UM	UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575					MILEAGE Truck 112	40	mi			8.00	320.00
576					Pump charge (PTA)	1	SK			1200.00	1200.00
328-4					60/40 puz (4th gen)	160	SK			13.00	2080.00
290					O-Air	1	gal			42.00	42.00
581					emt Service Charge	185	SK			2.00	370.00
582					min. Payage	1548	lbs			309.7m	350.00

**LEGAL TERMS:** Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS.

X

DATE SIGNED 6-1-23 TIME SIGNED 11:00  A.M.  P.M.

REMIT PAYMENT TO:  
 SWIFT SERVICES, INC.  
 P.O. BOX 466  
 NESS CITY, KS 67560  
 785-798-2300

SURVEY

OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?	AGREE	UNDECIDED	DISAGREE
WE UNDERSTOOD AND MET YOUR NEEDS?			
OUR SERVICE WAS PERFORMED WITHOUT DELAY?			
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?			

ARE YOU SATISFIED WITH OUR SERVICE?  YES  NO  
 CUSTOMER DID NOT WISH TO RESPOND

TOTAL

4889.15

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

OPERATOR

Robert Wood

APPROVAL

Thank You!



# PEAK WIRELINE SERVICES, INC.

7026

P.O. Box 864

Cheyenne Wells, CO 80810

Phone 719-767-8707

Fax 719-767-5522

PEA100

DATE 5-16-2023

REMIT TO:

Invoice

CHARGE TO: Mull Drilling Company Inc

ADDRESS \_\_\_\_\_

LEASE AND WELL NO. HANKS TRUST #1-7

FIELD \_\_\_\_\_

NEAREST TOWN \_\_\_\_\_

COUNTY LANE

STATE KS

CUSTOMER'S ORDER NO. KYLE RANDA

SEC. 7

TWP. 17S

RANGE 27W

ZERO 11.3

CASING SIZE 4 1/2

WEIGHT \_\_\_\_\_

CUSTOMER'S T.D. \_\_\_\_\_

PEAK WL SERVICES T.D. \_\_\_\_\_

FLUID LEVEL \_\_\_\_\_

ENGINEER HENDERSEN

OPERATOR \_\_\_\_\_

PERFORATING					
CODE REFERENCE	DESCRIPTION	NO HOLES	DEPTH FROM TO		AMOUNT

PLUGS, PACKERS, AND OTHER					
CODE REFERENCE	MFG TYPE	CASING SIZE	WEIGHT	DEPTH	AMOUNT
143005	ALPHA M-2			4410	
153000	Dump 230 Curt			4410	
143005	ALPHA M-2			3990	
153000	Dump 230 Curt			3990	

MATERIAL INVENTORY					
CODE REFERENCE	DESCRIPTION	QUANTITY	UNIT	PRICE PER UNIT	AMOUNT

TRUCK RENTAL					
CODE REFERENCE	RUN NO.	PREVIOUS INVOICE NO.	AMOUNT		
102975	ONE				
DEPTH OF OPERATIONS CHARGES					
CODE REFERENCE	FROM	TO	NO. FEET	PRICE PER FT.	AMOUNT
142005	60	4400	4400		
142005	00	3990	3990		

#634	SUB TOTAL	5017.60
5-19-23	TAX	351.23
PLEASE PAY FROM THIS INVOICE	TOTAL	5368.83

RECEIVED THE ABOVE SERVICE ACCORDING TO THE TERMS AND CONDITIONS SPECIFIED BELOW WHICH WE HAVE READ AND TO WHICH WE HEREBY AGREE.

Customer \_\_\_\_\_

General Terms and Conditions

- All accounts are to be paid within the terms fixed by Peak Wireline Services invoices; and should these terms not be observed, interest at the rate of 1.5% per month will be charged from the date of such invoice.
- Because of the uncertain conditions existing in a well which are beyond the control of Peak Wireline Services, it is understood by the customer that Peak Wireline Services cannot guarantee the results of their service and will not be held responsible for personal or property damage in the performance of their services.
- Should any of Peak Wireline Services instruments be lost or damaged in the performance of the operation requested, the customer agrees to make every reasonable effort to recover same, and to reimburse Peak Wireline Services for the value of the items which cannot be recovered, or the cost of repairing damage to items recovered.
- It is further understood and agreed that all depth measurements shall be supervised by the customer or its employees and customer hereby certifies that the zones, as shot were approved.
- The customer certifies that it has the full right and authority to order such work on such well and that the well in which the work is to be done by Peak Wireline Services is in proper and suitable conditions for the performance of said work.
- No employee is authorized to alter the terms or conditions of this agreement.