KOLAR Document ID: 1719726

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 #: SWD Permit #: ENHR Permit #: Gas Storage Permit #: Gas Storage Permit #: SWD Permit #: SWD 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) Storm: T.D. Storm: T.D. Depth to Top: Bottom: T.D. Storm: T.D. Storm: Sto	County: Well #: Lease Name: Well #: Date Well Completed: The plugging proposal was approved on: (Date) by: (KCC District Agent's Name) Plugging Commenced: Diversion Completed:
Depth to Top: Bottom: T.D	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		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

Date: 6/26/2023 Invoice # 3685

P.O.#:

Due Date: 7/26/2023 Division: Russell

QUALITY CALI OILWELL CEMENTING INC. Russel, 15

QUALITY OILWELL CEMENTING, INC.

PO Box 32 - 740 West Wichita Ave, Russell KS 67665 Phone:785-324-1041 fax:785-483-1087 Email: cementing@ruraltel.net

Invoice

Contact: TREK AEC, LLC Address/Job Location:

1020 E. LEVEE ST., STE 120 DALLAS TX 75207

Reference: GREGORY A 1 SEC 25-16-9

Description of Work: PLUG JOB

Services / Items Included:	Quantity	Price	Taxable	ltem	Quantity	Price	Taxable
Labor		\$ 434.76	Yes				
Common-Class A	60	\$ 1,204.58	Yes				
Bulk Truck Mileage-Job to Nearest Bulk Plant	56	\$ 191.02	Yes				
Calcium Chloride	2	\$ 109.15	Yes				
Bulk Truck Matl-Material Service Charge	62	\$ 60.42	Yes				

lucion Termor		SubTotal:	\$ 1,999.93
Invoice Terms: Net 30	Discount Available <u>ONLY</u> if Invoice is Paid within listed term	& Received as of invoice:	\$ (50.00)
	SubTotal for	Taxable Items:	\$ 1,949.93
	SubTotal for Non-Taxable Items:		\$ -
Thank You For Your Business!		Total:	\$ 1,949.93
	7.50% Ellsworth County Sales Tax	Tax:	\$ 146.24
		mount Due:	\$ 2,096.17
	Applied	d Payments:	
	В	alance Due:	\$ 2,096.17

Past Due Invoices are subject to a service charge (annual rate of 24%) This does not include any applicable taxes unless it is listed. ©2008-2013 Straker Investments, LLC. All rights reserved.

Phone 785-483-1071 Cell 785-324-1041	Home Office P.O	ש שמטור והם הבנטיאותפהנג מדגיוג כמהיו צמו. ערופסג פצואלור ביצי מיזמי א	3685
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N.D.)		To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment a	and furnish
TC	f Dug	cementer and helper to assist owner or contractor to do	work as listed.
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Sg.	Depth	City State	Reasonable sur
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