KOLAR Document ID: 1734063

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: Well #: 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)	by: (KCC District Agent's Name)
Depth to Top: Bottom: T.D	Plugging Commenced:
Depth to Top: Bottom: T.D	Plugging Completed:
Depth to Top: Bottom: T.D	

Show depth and thickness of all water, oil and gas formations.

Oil, Gas or Water	Records	Casing Record (Surface, Conductor & Production)				
Formation	rmation Content		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

Cus	tomer:	er: LB Exploration			Well:	Ticket:	wp 3974	
City,	State:	te: Claflin Kansas		County:	Barton.Kansas	Sprawka 1-12 Ticket: Barton.Kansas Date:		
Fiel	ld Rep:	P: Michael Peterman		S-T-R:	12-18s-12w	Service:	PTA	
Dow	mhole	Informati	on		Calculated Slu	rry - Lead	Calci	ulated Slurry - Tail
Hole	e Size:	7 7/8	in		Blend:	H -Plug	Blend:	aaced oldrig - Tall
Hole	Depth:		ft		Weight:	13.7 ppg	Weight:	000
Casing	g Size:	4 1/2	in		Water / Sx:	6.9 gal / sx	Water / Sx:	ppg gal / sx
Casing	Depth:		ft		Yield:	1.43 ft ³ / sx	Yield:	ft ³ / sx
Tubing /	Liner:	2 3/8	in		Annular Bbls / Ft.:	bbs / ft.	Annular Bbls / Ft.:	bbs / ft.
	Depth:	2500	ft		Depth:	ft	Depth:	ft
Tool / P	acker:				Annular Volume:	0.0 bbls	Annular Volume:	0 bbls
	Depth:		ft		Excess:		Excess:	
Displace	ement:	9.5	bbls		Total Slurry:	25.4 bbis	Total Slurry:	0.0 bbls
TIME	RATE	Del	STAGE		Total Sacks:	100 sx	Total Sacks:	0 sx
1:00 PM		PSI	BBLs	BBLs	REMARKS			
1:05 PM			-		on location job and safety	/		-
1.00 F W					spot trucks and rig up			
1:25 PM					1st plug 50 sacks at 2500			
					1st plug 50 sacks at 2500 start cement			
	2.5	150.0	12.7	12.7	mix 50 sacks cement			
	2.5	200.0	9.5	22.2	displacement	-		
2:10 PM				-	2nd plug 50 sacks at 1450			
					start cement	the state of the s		
	2.5	300.0	12.7	12.7	mix 50 sacks cement			
	2.5	500.0	3.5	and a second second second second	displacement	the second s		to a second day on the second second second second
		-						
					Server and State State State State State			
		CREW			UNIT		SUMMARY	
Ceme		M Brungardt			916	Average Rate	Average Pressure	Total Fluid
ump Oper		R Osb	orn		176/522	2.5 bpm	288 psi	38 bbis
Bul	lk #1:	J Trive	no		525/534		· · · · · · · · · · · · · · · · · · ·	



TREATMENT REPORT

Acid	& Cemer	nt 🕿			Acid Stage No.						
					Type Treatment: Amt.		Type Fluid	Sand Size	Pou	nds of Sand	
Date 7	7/11/2023 (District GB	F.O. 1	No. C60878	Bkdown						
Company	LB EXPLORAT	TION									
Well Nam	e & No. SPRAW	'KA 1-12 SWD									
Location	12-1	18S-12W	Field			Bbl./Gal.					
County	BARTON		State KS		Flush	Bbl./Gal.					
					Treated from		ft. to	ft.	No. ft	<u> </u>	
Casing	Size 4 1/2	2 Type & Wt.		Set atft.	from		ft. to	ft.	No. ft.		
Formation	n:		Perf.	to	from		ft. to	ft.	No. ft.	0	
Formation	n:		Perf.	to	Actual Volume of Oil / Wat	er to Load H	lole:			Bbl./Gal.	
Formation	n:		Perf.	to							
Liner: S	ize Type 8	& Wt	Top at ft	Bottom atft.	Pump Trucks. No. Used	d: Std.	320 Sp.		Twin		
					Auxiliary Equipment						
Tubing:	Size & Wt.	2 3/8	Swung at	ft.	Personnel GREG & CUR						
	Perforated	rom	ft. to	ft.	Auxiliary Tools						
					Plugging or Sealing Materia	als: Type		60/40 POZ	4% GEL		
Open Hol	e Size	T.D.	ft. P	.B. toft				Gals	i	lb.	
Company	Representative		MICHAEL PE	TERMAN	Treater		GI	REG C.			
TIME		SURES	Total Fluid Pumped			REMA	RKS				
a.m./p.m	Tubing	Casing									
8:30				ON LOCATION							
				SHOT TUBING OFF @ 325'							
				PERF @ 325'							
					MENT FROM 325' TO SURFACE. TOOK 90 SKS FOR THE 4 1/2 IONAL SKS FOR THE 8 5/8						
				AND 40 ADDITIC							
TOPPED O					DFF WITH 15 SKS						
3:45				JOB COMPLETE							
				THANK YOU!!!							
								2011			