KOLAR Document ID: 1740292

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 #: 35970
Name: Satchell Creek Petroleum, LLC
Address 1: 3032 N CORTINA STREET
Address 2:
City: WICHITA State: KS Zip: 67205 + 7536
Contact Person: Michael J. Hopson
Phone: (970) 989-4554
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 - 15-065-24290-00-00
Spot Description:
NW - NE - SW - NE Sec. 29 Twp. 10 S. R. 25 ☐ East ☑ West
1485 Feet from ☑ North / ☐ South Line of Section
1912 Feet from ☑ East / ☐ West Line of Section
Footages Calculated from Nearest Outside Section Corner:
☑ NE ☐ NW ☐ SE ☐ SW
County: Graham
Lease Name: BELLERIVE Well #: A 3-29
Date Well Completed:
The plugging proposal was approved on: *(Date)*
by: *(KCC **District** Agent's Name)*
Plugging Commenced: 9/29/2023
Plugging Completed: 9/29/2023

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
		Surface	8.625	222	

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.

pumped 50sx H-Plug @ 2225'
pumped 100sx H-Plug @ 1300'
pumped 275sx H-Plug @ 275'
pumped 10sx H-Plug @ 40'
pumped 30sx H-Plug for rat hole

Plugging Contractor License #: 35469 Name: Franks Oilfield Service, LLC
Address 1: 815 MAIN STREET Address 2:
City: VICTORIA State: KS Zip: 67671 + 9515
Phone: (785) 639-2099
Name of Party Responsible for Plugging Fees: Satchell Creek Petroleum, LLC
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

FRANKS Oilfield Service

◆ 815 Main Street Victoria, KS 67671 ◆ 24 Hour Phone (785) 639-7269
◆ Office Phone (785) 639-3949 ◆ Email: franksoilfield@yahoo.com

TICKET NUMBER 1074
LOCATION Hoxie
FOREMAN Tom Williams

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-22-23	35970	Bellerive A3-29	29	10	25	Graham

CUSTOMER Satchell Creek Petroleum LLC
MAILING ADDRESS
CITY | STATE | ZIP CODE

TRUCK #	DRIVER	TRUCK #	DRIVER
103	Tom W		
201	Chris K		

JOB TYPE Surface HOLE SIZE ____ HOLE DEPTH 222' CASING SIZE & WEIGHT 8 5/8 23#
CASING DEPTH 222' DRILL PIPE ____ TUBING ____ OTHER ____
SLURRY WEIGHT ____ SLURRY VOL ____ WATER gal/sk ____ CEMENT LEFT in CASING ____
DISPLACEMENT ____ DISPLACEMENT PSI ____ MIX PSI ____ RATE ____

REMARKS: Safety meeting + set up on Feature #2. Circulate mud. Mix 165 sx surface blend + displace 13 Bbl. Shut in 2:20 pm cement did circulate

Thanks Tom & Chris

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
P1002	1	PUMP CHARGE Surface		
M001	40	MILEAGE		
M002	8.09 tons	Ton Mileage Delivery		
C2004	165 sx	Class A 3% cc 2% gel		
			SALES TAX	
			ESTIMATED TOTAL	

AUTHORIZATION ____ TITLE ____ DATE ____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.

ANKS Oilfield Service

Main Street Victoria, KS 67671 ♦ 24 Hour Phone (785) 639-7269
ce Phone (785) 639-3949 ♦ Email: franksoilfield@yahoo.com

TICKET NUMBER 1077
LOCATION Hoxie
FOREMAN Tom Williams

FIELD TICKET & TREATMENT REPORT

9-29-23

CEMENT

ATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-23	35970	Bellevue A3-29	29	10	25	Graham

OMER
Satchell Creek
ING ADDRESS

	STATE	ZIP CODE

TRUCK #	DRIVER	TRUCK #	DRIVER
103	Tom W		
	Chris K		

3 TYPE PTA HOLE SIZE _____ HOLE DEPTH _____ CASING SIZE & WEIGHT _____
SING DEPTH _____ DRILL PIPE _____ TUBING _____ OTHER _____
URRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
SPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

EMARKS: Safety meeting & set upon Feature # Plug as ordered.

1) 2225' 50 sx
2) 1300' 100 sx
3) 275' 50 sx
4) 40' 10 sx w/ plug
RH 30 sx
240

Thanks Tom & Chris

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
PL05	1	PUMP CHARGE PTA	$1300.00	$1300.00
MA01	40	MILEAGE	$4.00	$240.00
MA02	10.68 tons	Ton Mileage Delivery	$1.40.80	$440.80
CB010	240 sx	60/40 4% gel ¼# Flosel	$17.35	$4164.00
FE055	1	8 5/8" Wooden plug	$165.00	$165.00
			sub total	$6729.80
			less 5% disc.	$336.49
			sub total	$6,393.31
			SALES TAX	$308.44
			ESTIMATED TOTAL	$6701.75

AUTHORIZATION Todd E. Mesh TITLE _____ DATE _____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.

35469