KOLAR Document ID: 1742289

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 -					
				Spot Description:					
Address 1:			I .	•					
				Sec Twp S. R East West Feet from North / South Line of Section Feet from East / West Line of Section					
City:	State:	Zip: +							
Contact Person:			Footage	s Calculated from Near	rest Outside Section Corner:				
Phone: ()				□ NE □ NW	SE SW				
Water Supply Well ENHR Permit #: Is ACO-1 filed? Yes Producing Formation(s):	Other: Ga No If not, i List All (If needed attach a	SWD Permit #: as Storage Permit #: swell log attached? Yes [nother sheet) Bottom: T.D.	Lease N Date We The plug	County: Lease Name: Well #: Date Well Completed: (Date) by: (KCC District Agent's Name)					
De	pth to Top:	Bottom: T.D	""						
De	pth to Top:	Bottom:T.D	——— Plugging	g Completed:					
Show depth and thickness	ss of all water, oil and gas	formations.							
Oil, Gas or V	Water Records		Casing Record (Su	ırface, Conductor & Prod	luction)				
Formation	Content	Casing	Size	Setting Depth	Pulled Out				
		plugged, indicating where the muter of same depth placed from (but it is a first from the muter of same depth placed from (but it is a first from the muter of same depth placed from the same depth placed from the muter of same depth placed from the same depth placed from t	·		ods used in introducing it into the hole. If				
Plugging Contractor Lice	ense #:		_ Name:	e:					
Address 1: Addres				ss 2:					
City:			State:						
Phone: ()									
Name of Party Responsil	ble for Plugging Fees:								
State of	Cou	unty,	, SS.						
	(Print Na	ma)	E	mployee 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.



TREATMENT REPORT

								wein stake in	J	
Data	0/8/2022	CD				Amt.		Sand Size	Po	unds of Sand
Date	1.B. Evaloratio	District GB	F.O.	No. 80151	Bkdown	Bbl./Gal.				
	LB Exploratio		22			Bbl./Gal.				
	e & No. Kanapo	ils Federal 1-2				Bbl./Gal.				
	Location Field County Ellsworth Co State KS					Bbl./Gal.				
County	Elisworth Co		State KS		Flush	Bbl./Gal.				
					Treated from	ft	to	ft.	No. ft.	0
Casing:				Set atft.	from		to		_	
Formation			Perf.	to	from		to		No. ft.	0
Formation	1		Perf.		Actual Volume of Oi	il / Water to Load Hole			-	Bbl./Gal.
Formation	:		Perf.	to						
Liner: Si	zeType &	Wt	Top at ft.	Bottom atft.	Pump Trucks. N	o. Used: Std.	Sp.		Twin	
(emented. 462	• Perforated f	rom	ft to ft.	Auxiliary Equipment			365,327,		
Tubing:	Size & Wt.	2 3/8	Swung at			larance M. &Nat				
	Perforated fr	om	ft. to		Auxiliary Tools					
					Plugging or Sealing N	Materials: Type	Gel Common	& Common	3% Calc	ium Cloride
Open Hole	Size	T.D.	ft. P				Gei, common	Gals.	376 Calc	lb.
								0013.	THE OWNER OF THE OWNER, AND	10.
Company F	Representative				Treater		Joe	c		
TIME	PRESS	SURES	T		1100001		106	J.		
a.m./p.m.	Tubing	Casing	Total Fluid Pumped			REMARKS	i			
9:00				On Location & Se	et Un					
					СОР					
				Pump 10 SKS of (Gel to Circula	ato holo full a	nd than n	mn 20 Cl	/C of C	
			-	with 3% Calcium					(3 01 C	ommon
1.20			-							
1:30			-	Tag Cement at 1						
					50' and Pump 80 SKS of Common with 3% Calcium Cloride splace down to 650' had injection rate of 3 BPM 100 PSI					
3:30				Cement was tagg						
				Run 23 Jts of tub					ium C	oride
				Trip tubing out a	nd Wait to ta	ag Plug Mond	lay mornin	g		
5:00				Off Location						
			-							
- 1										
-										



TREATMENT REPORT

Acid & Cement &					Acid Stage No.					
	9/11/2023 LB Exploration		F.O.	No. 90152	Bkdown	Amt. Bbl./Gal.			Pounds of S	Sand
		olis Federal 1-2	22			Bbl./Gal.				
						Bbl./Gal.				
County			State KS			Bbl./Gal.				
					Treated from				, ,	
Casing:	Size 4 1/2	2 Type & Wt.		Set at ft.			ft. to		o. ft)
Formation			Perf.		from)
Formation					Actual Volume of Oi		ft. to	π. π.		
Formation			Perf.		Accusi Volume of O	ii / Water to Load No	ne		BD	l./Gal.
	**	& Wt	Top at ft.	Bottom atft.	Pumn Trucks N	lo Head: Std	-			
	Cemented: Yes	▼ Perforated f	from	ft. toft.	Auxiliary Equipment	t sta.	Sp	365 &327	win	
Tubing:	Size & Wt.	2 3/8	Swung at		Personnel Joe S. &			303 0327		
	Perforated f	rom	ft. to	ft.	Auxiliary Tools					
Open Hole			ft. P		Plugging or Sealing I					
орентые	3120	1.0.	п. Р	.B. toft.				Gals.		lb.
-	Representative				Treater		Joe	e S.		
TIME a.m./p.m.	Tubing	SURES	Total Fluid Pumped			REMAR	KS			
8:00				On Location and						
8:30				Attempt to tag p	lug at 650 ar	nd only able	to get dow	n to 220'		
				Clean Up and He	ad home				-	
1:30				On Location and						
				Able to get thru l	bridge and ta	ag Plug at 60	08'			
				Perforate at 450	and got inje	ection rate o	f 3BPM @ 2	200 PSI		
				Circulate 4.5 casing and surface pipe full with 225 SKS of Common Cemen						nt
4:00				Off Location					***************************************	
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