## KOLAR Document ID: 1749257

**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 <b>District</b> 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 Wate	r Records	Casing Record (Surface, Conductor & Production)			ction)
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:		Stat	e:	Zip:	_+
Phone: ( )					
Name of Party Responsible for Plugging I	Fees:				
State of	County,	, SS			
	(Print Name)		Employee of Operator or	Operator on above-o	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



Page: 1

# Acid & Cement

**COPELAND** 

BURRTON, KS (620) 463-5161 FAX (620) 463-2104

(316) 524-1027 FAX GREAT BEND, KS (620) 793-3366 FAX (620) 793-3536

POST OFFICE BOX 438

HAYSVILLE, KS 67060

(316) 524-1225

# RECEIVED JAN 2 4 2024

INVOICE NUMBER: C60986-IN

LEASE: HEARN #2 SWD

BILL TO: YOUNGER ENERGY CO. 9415 E HARRY ST BLDG 400 STE 403 WICHITA, KS 67207-5083

	DATE	ORDER	SALESMAN	ORDER DATE	DUDOULO		T		
	01/22/2024	60986		01/19/2024	PURCHASE			CIAL INSTRUCTIONS	
	QUANTITY	U/M			HEARN #2 S		NET 30		
ł			TEWINO./DE	/DESCRIPTION		D/C	PRICE	EXTENSION	
	50.00	MI	MILEAGE CEME	NT PUMP TRUCK		0.00	6.00	300.00	-
	1.00	EA	PUMP CHARGE I	PLUG		0.00	700.00	700.00	
	155.00	SK	60/40 POZ MIX 29	% GEL		0.00	13.85	2,146.75	
	3.00	SK	2% ADDITIONAL	GEL		0.00	25.25	75.75	
	100.00	LB	COTTONSEED HI	JLLS		0.00	0.60	60.00	
	159.00	EA	BULK CHARGE			0.00	1.25	198.75	
	174.90	MI	BULK TRUCK - TC	ON MILES		0.00	1.10	192.39	
			) Plugsing Plugsing	L202 PAY 1 Cost Cenant /SwD	V -31-2024			He was the form	Q <sup>(C,.</sup>
		P.O. BOX 438 HAYSVILLE, KS 67060 FUEL SURCHARGE IS NOT TAXABLE AND IS ADDED TO MILEAGE, PUMP AND OR DELIVERY CHARGES ONLY.		DDED TO 28 ONLY.	STFCO	Net Invoice: Sales Tax:	3,673.64 275.52 3,949.16		
	CEIVED BY			30 DAYS			=	3,343.16	
		Ther	e will be a charge of 1.	5% "per month" (18%	annual rato) on a				

ge of 1.5% "per month" (18% annual rate) on all accounts over 30 days pas

Copeland Acid & Cement is a subsidiary of Gressel Oil Field Service Gressel Oil Field Service reserves a security interest in the goods sold until the same are paid for in full and reserve all the rights of a secured party under the Uniform Commercial Code.



#### FIELD ORDER

Nº C 60986

## BOX 438 - HAYSVILLE, KANSAS 67060 316-524-1225

			010 021 1220		
IS AUTHORI	ZED BY:	YOUNGER ENERGY		DATE	19-Jan 20 24
Address	_	· JOHNELINE (OT	(NAME OF CUSTOMER)		
			City	State	KS
TOTREAT					
AS FOLLOW	'S Lease <u>H</u>	HEARN	Well No. #2 SWD	_Customer Order No.	
Sec. Twp.	- 40144				
Range 30-2	Second de la contraction de la		County STAFFORD	State	KO
treatment is payable our invoicing depart	There will be no d ment in accordance signed represent	ration hereof it is agreed that Copeland Acid is to service or accrue in connection with said service or treatment. Copela een relied on, as to what may be the results or effect of the s liscount allowed subsequent to such date. 6% interest will be with latest published price schedules. s himself to be duly authorized to sign this order for	Ireat at owners risk, the hereinbefore mention and Acid Service has made no representation servicing or treating said well. The considera e charged after 60 days. Total charge aco p	ned well and is not to	
		Well Owner or O	Operator	Ву	
CODE	QUANTIT	V	RIPTION		gent
20.0002	50	Mileage P.T.		COST	AMOUNT
20.0003	1	Pump Charge Plug		\$6.00	\$300.00
20.1002	155	60/40 Poz 2% Gel		\$700.00	\$700.00
20.1004	3	Add. Gel after 2% Per Sack		\$13.85	\$2,146.75
20.1017	100	Hulls per lb.		\$25.25	\$75.75
				\$0.60	\$60.00
	the second s				
20.0011	159	Dull of			
20.0012	174.9	Bulk Charge		\$1.25	£100 75
	174.9	Bulk Truck Miles		\$1.10	\$198.75
		Process License Fee on	Gallons		\$192.39
					11

I certify that the above material has been accepted and used; that the above service was performed in a good and workmanlike manner under the direction, supervision and control of the owner, operator or his agent, whose signature appears below. \$3,673.64

Copeland Representative GREG C.

Station GB

Remarks

**KEITH REVIS** 

Well Owner, Operator or Agent

NET 30 DAYS



# TREATMENT REPORT

5 Sand Size	0 0 Bbl./Gal.
ft. No. ft. ft. No. ft. ft. No. ft. ft. No. ft. Twin Twin 317-308T 60/40 POZ 4% GEL Gals.	0 0 0 Bbt./Gat.
ft. No. ft. ft. No. ft.  317-308T  60/40 POZ 4% GEL Gals.	0 0 Bbl./Gal.
ft. No. ft. ft. No. ft.  317-308T  60/40 POZ 4% GEL Gals.	0 0 Bbl./Gal.
ft. No. ft. ft. No. ft.  317-308T  60/40 POZ 4% GEL Gals.	0 0 Bbl./Gal.
ft. No. ft. ft. No. ft.  317-308T  60/40 POZ 4% GEL Gals.	0 0 Bbl./Gal.
ft. No. ft. ft. No. ft.  317-308T  60/40 POZ 4% GEL Gals.	0 0 Bbl./Gal.
ft. No. ft. ft. No. ft.  317-308T  60/40 POZ 4% GEL Gals.	0 0 Bbl./Gal.
ft. No. ft. ft. No. ft.  317-308T  60/40 POZ 4% GEL Gals.	0 0 Bbl./Gal.
ft. No. ft. Twin 317-308T 60/40 POZ 4% GEL Gals.	0 Bbl./Gal.
Twin 317-308T 60/40 POZ 4% GEL Gals.	Bbl./Gal.
317-308T 60/40 POZ 4% GEL Gals	
317-308T 60/40 POZ 4% GEL Gals	
317-308T 60/40 POZ 4% GEL Gals	
60/40 POZ 4% GEL Gals	
Gals.	
Gals.	
Gals.	
Gals.	
i C.	
5 C.	
	STATES OF TAXABLE PARTY OF TAXABLE PARTY.
LD 300#	
DO SKS	
JUSKS	
	1

# RECEIVED JAN 2 4 2024



### Bill To

Younger Energy Company 9415 E. Harry St. Suite 403 Wichita, KS 67207

	Invoice
Date of Service	Due Date
1/17/2024	2/21/2024

Invoice #

5411

		Lease	Well #	County	Truck
		Hearn #2 SWD	Old	Stafford	#11
Quantity	Descriptio	on	Unit F	Price	
1				lice	Amount
	Setting, Service Charge, Stacked out 1/1 Charge	W/ 2 Sacks, CIBP 4.5 Depth & 9/24- Squeeze Holes, Service		6,520.00	6,520.00
		641 131-2024 1-2024			
	2- Bp's to	PA / SWD			
Thank you for your	business!				
All accounts are to	be naid within 30 days from 1 4 at		Subtotal		\$6,520.00
from the date of suc	ch invoice Interst Attorney Court D'll	with Excel Wireline and per month will be charged and other fees will be added to	Sales Ta	x (7.5%)	\$489.00
accounts turned ove	er to collections.		Balance	Due	\$7,009.00
					the alpha

	And the second s
-	
5	No. 1 and St.
	- VOF
6	11-11
<	AUCI
and the second second second second	
	VVIREINE
200 0	A Real Property in the Instance

Service Order No. 5411

Company	457 Yucca Lane • Pratt, Kans	CLINE				
Billing Address	Energy		620-38	8-5676		1-17-24
Lease & Well #	City				Client Order	r#
County Hearing	HOS	Field Nam		State	12	Zip
Staco	State				Legal Descrip	ption (coordinates)
Fluid Level (surface)	Reading from	Casing Siz	e </td <td></td> <td>Casing Weigh</td> <td></td>		Casing Weigh	
Engineer	KRT	Customer	T.D.			
Product Code	Operator	Operator			Excel Wireline	e T.D.
	Description	Qty	rown		Unit#	2 4 11
CIBP 4	5 Pipth 1settin	diy	Unit Price	From	Depth To	\$ Amount
Damp Ba	12 Jan	+1	. 25	0	2720	
CEBP 4,	5 Depti La p	2	.20	0	322	1800
Service	Charles + Settin	1	.25	0	800	10.00
Stack aut	@ 3/m in	+			1000	1800
Dunp Baile	C C	+				130
1-10-21		$\vdash$				
1-19-24 Squerza Hol	15					
1-19-24 Squarezz - Hol-		7	55	3	780	1420 -
1-19-24 Secure 1		4	15	0	300	11700
1-19-24 Service Char	al					72010
						950 %
						1012
		-+				
Received the above service according						
Received the above service according to the terms an which we have read and to which we hereby agree.	nd conditions specified below,					
Customer	New		SUB	TOTAL	8340	94
General Terms a (1) All accounts are to be paid within the terms fixed by Excel interest at the rate of 1.5% per month will be charged from and other fees will be added to accounts turned over to coll (2) Because of the uncertain conditions	and Conditions		DISC		-1000	100
<ul> <li>(1) An accounts are to be paid within the terms fixed by Excel interest at the rate of 1.5% per month will be charged from and other fees will be added to accounts turned over to coll</li> <li>(2) Because of the uncertain conditions existing in a well which by the customer that Excel Wireles</li> </ul>	the date of such invoice. Interest, Attorney, Co	e observed,	SUBT	OTAL	<u>1011.a</u>	10
personal or property damage in the performance of it	esults of their services and will	Inderstood		6	e520.(	n
customer agrees to make every reasonable affective	d in the performance of "	onsible for		TAX	409.00	
and quate and agreed that all dont	ing damage to items and	Value of	NET TO	DTAL 9	7009.1	00
the work to be d	approved.	employees,				
(6) No employee is authorized to alter the terms or conditions of the upper Printing. Inc. • Pratt. Kansas	e condition for the performance of said work.	l in which				