

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

Form CP-4
March 2009

Type or Print on this Form
Form must be Signed
All blanks must be Filled

WELL PLUGGING RECORD
K.A.R. 82-3-117

OPERATOR: License #: _____
 Name: _____
 Address 1: _____
 Address 2: _____
 City: _____ State: _____ Zip: _____ + _____
 Contact Person: _____
 Phone: (_____) _____
 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 - _____
 Spot Description: _____
 _____ - _____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West
 _____ Feet from North / South Line of Section
 _____ Feet from East / West Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: _____
 Lease Name: _____ Well #: _____
 Date Well Completed: _____
 The plugging proposal was approved on: _____ (Date)
 by: _____ (KCC District Agent's Name)
 Plugging Commenced: _____
 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	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.
 _____ Employee of Operator or Operator on above-described well,
 (Print Name)

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

COPELAND

Acid & Cement

BURRTON, KS (620) 463-5161
 GREAT BEND, KS (620) 793-3366
 FAX (620) 463-2104 FAX (620) 793-3536

POST OFFICE BOX 438
 HAYSVILLE, KS 67060
 (316) 524-1225
 (316) 524-1027 FAX

Invoice

INVOICE NUMBER:
C61011-IN

BILL TO:
SATCHELL CREEK EXPLORATION
4320 VINE, SUITE 80
PMB386
HAYS, KS 67601

LEASE: HOBBS 2-28

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE ORDER	SPECIAL INSTRUCTIONS	
02/19/2024	61011		02/13/2024	HOBBS 2-28	NET 30	
QUANTITY	U/M	ITEM NO./DESCRIPTION		D/C	PRICE	EXTENSION
200.00	MI	MILEAGE PICKUP		0.00	4.00	800.00
200.00	MI	MILEAGE CEMENT PUMP TRUCK		0.00	6.00	1,200.00
1.00	EA	PUMP CHARGE		0.00	1,650.00	1,650.00
395.00	SK	60/40 POZ MIX 2% GEL		0.00	17.50	6,912.50
7.00	SK	2% ADDITIONAL GEL		0.00	28.00	196.00
11.00	SK	GEL ON THE SIDE		0.00	28.00	308.00
700.00	LB	COTTONSEED HULLS		0.00	0.60	420.00
1,863.00	EA	BULK CHARGE		0.00	1.25	2,328.75
420.00	MI	BULK TRUCK - TON MILES		0.00	1.10	462.00
REMIT TO: P.O. BOX 438 HAYSVILLE, KS 67060		COP		Net Invoice:		14,277.25
		FUEL SURCHARGE IS NOT TAXABLE AND IS ADDED TO MILEAGE, PUMP AND OR DELIVERY CHARGES ONLY.		GRHCO Sales Tax:		1,070.79
RECEIVED BY		NET 30 DAYS		Invoice Total:		15,348.04

There will be a charge 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.

COPELAND Acid & Cement

FIELD ORDER

N^o C 61011

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

DATE 13-Feb 20 24

IS AUTHORIZED BY: SATCHELL CREEK
(NAME OF CUSTOMER)

Address _____ City _____ State KS

TO TREAT WELL
AS FOLLOWS Lease HOBBS Well No. 2-28 Customer Order No. _____

Sec. Twp. _____
Range _____ County GRAHAM State KS

CONDITIONS: As a part of the consideration hereof it is agreed that Copeland Acid is to service or treat at owners risk, the hereinbefore mentioned well and is not to be held liable for any damage that may accrue in connection with said service or treatment. Copeland Acid Service has made no representation, expressed or implied, and no representations have been relied on, as to what may be the results or effect of the servicing or treating said well. The consideration of said service or treatment is payable. There will be no discount allowed subsequent to such date. 8% interest will be charged after 60 days. Total charges are subject to correction by our invoicing department in accordance with latest published price schedules.
The undersigned represents himself to be duly authorized to sign this order for well owner or operator.

THIS ORDER MUST BE SIGNED
BEFORE WORK IS COMMENCED _____ By _____
Well Owner or OperatorAgent

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
20.0001	200	Mileage P.U.	\$4.00	\$800.00
20.0002	200	Mileage P.T.	\$6.00	\$1,200.00
20.0003	1	PUMP CHARGE	\$1,650.00	\$1,650.00
20.1002	395	60/40 Poz 2% Gel	\$17.50	\$6,912.50
20.1004	7	Add. Gel after 2% Per Sack	\$28.00	\$196.00
20.1005	11	Gel on side per sack	\$28.00	\$308.00
20.1017	700	Hulls per lb.	\$0.60	\$420.00
20.0011	1863	Bulk Charge	\$1.25	\$2,328.75
20.0012	420	Bulk Truck Miles	\$1.10	\$462.00
Process License Fee on Gallons				
TOTAL BILLING				\$14,277.25

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.

Copeland Representative GREG C.

Station GB TAYLOR LEIKER
Well Owner, Operator or Agent

Remarks _____

NET 30 DAYS

COPELAND

Acid & Cement

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 FAX (620) 463-2104 FAX (620) 793-3536

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 HAYSVILLE, KS 67060
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Invoice

INVOICE NUMBER:
C61014-IN

BILL TO:
SATCHELL CREEK EXPLORATION
4320 VINE, SUITE 80
PMB386
HAYS, KS 67601

LEASE: HOBBS 2-28

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE ORDER	SPECIAL INSTRUCTIONS	
02/19/2024	61014		02/16/2024	HOBBS 2-28	NET 30	
QUANTITY	U/M	ITEM NO./DESCRIPTION		D/C	PRICE	EXTENSION
200.00	MI	MILEAGE CEMENT PUMP TRUCK		0.00	6.00	1,200.00
200.00	MI	MILEAGE BULK TRUCK		0.00	6.00	1,200.00
REMIT TO: P.O. BOX 438 HAYSVILLE, KS 67060		COP		Net Invoice:		2,400.00
RECEIVED BY _____		FUEL SURCHARGE IS NOT TAXABLE AND IS ADDED TO MILEAGE, PUMP AND OR DELIVERY CHARGES ONLY.		GRHCO Sales Tax:		180.00
				Invoice Total:		<u>2,580.00</u>
		NET 30 DAYS				

There will be a charge of 1.5% "per month" (18% annual rate) on all accounts over 30 days pas

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mail: franksoilfield@yahoo.com 639-7269

TICKET NUMBER 1039
 LOCATION Horse
 FOREMAN Tam Williams

**FIELD TICKET & TREATMENT REPORT
 CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7-18-23	35920	Hobbs A2-28	28	10	25	Grady
CUSTOMER	Satchell Creek Petroleum LLC		TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS	3032 N Cortina Street		103	Tam W		
CITY	STATE	ZIP CODE	201	Chris K		
Wichita	KS	67205				
JOB TYPE	HOLE SIZE	HOLE DEPTH	CASING SIZE & WEIGHT		OTHER	
Surface	12 1/4"	220'				
CASING DEPTH	DRILL PIPE	TUBING	CEMENT LEFT IN CASING		RATE	
220'						
SLURRY WEIGHT	SLURRY VOL	WATER gal/sk	CEMENT LEFT IN CASING		RATE	
DISPLACEMENT	DISPLACEMENT PSI	MIX PSI	CEMENT LEFT IN CASING		RATE	
REMARKS: Safety meeting & set up on feature. Circulated mud. Mix 170 slt surface blend. Displace 13.8 bbl shut in 4:15 am. Cement did crackle.						

Thanks Tam & Chris

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
P002	1	PUMP CHARGE		
M001	45	MILEAGE		
M002	8.33 tons	Surface	\$1150.00	\$1150.00
L3004	170 slt	Tan Mileage Delivery Class A 3000 29 gal	\$16.00	\$272.00
			\$600.00	\$600.00
			\$25.50	\$4335.00
			subtotal	\$6377.50
			less 5% disc.	\$318.88
			subtotal	\$6058.62
			SALES TAX	288.28
			ESTIMATED TOTAL	6346.90



AUTHORIZATION A. Pettit

TITLE _____ DATE _____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in an office, and conditions of service on the back of this form are in effect.



CEMENT TREATMENT REPORT

Customer: Satchell Creek	Well: Hobbs A #2-28	Ticket: WP 4661
City, State: St.Peter KS	County: Graham KS	Date: 8/29/2023
Field Rep: Jay Krier	S-T-R: 28-10S-25W	Service: Lonnstring

Downhole Information			Calculated Slurry - Lead			Calculated Slurry - Tail		
Hole Size:	7 7/8 in		Blend:	H-Con		Blend:	H-LD	
Hole Depth:	4478 ft		Weight:	12.0 ppg		Weight:	14.8 ppg	
Casing Size:	5 1/2 in		Water / Sx:	15.5 gal / sx		Water / Sx:	6.5 gal / sx	
Casing Depth:	4462 ft		Yield:	2.56 ft ³ / sx		Yield:	1.51 ft ³ / sx	
Tubing / Liner:	in		Annular Bbls / Ft.:	0.0309 bbs / ft.		Annular Bbls / Ft.:	0.0309 bbs / ft.	
Depth:	ft		Depth:	4462 ft		Depth:	4462 ft	
Tool / Packer:			Annular Volume:	137.9 bbls		Annular Volume:	137.8758 bbls	
Tool Depth:	ft		Excess:			Excess:		
Displacement:	105.8 bbls		Total Slurry:	250.7 bbls		Total Slurry:	67.2 bbls	
			Total Sacks:	550 sx		Total Sacks:	250 sx	

TIME	RATE	PSI	BBLs	TOTAL BBLs	REMARKS
8:20 AM			-	-	Arrived on location
8:30 AM				-	Safety meeting
8:40 AM				-	Rigged up
11:25 AM				-	Casing on bottom
11:46 AM				-	Circulated mud
12:55 PM	4.5	225.0	10.0	10.0	Water ahead
12:57 PM	4.5	250.0	12.0	22.0	Pumped 500 gallons mud flush
1:01 PM	4.5	275.0	10.0	32.0	Water behind
1:05 PM	3.0	100.0	13.6	45.6	Mixed 30 sacks cement for rat hole plug
1:11 PM	3.5	250.0	237.0	282.6	Mixed 520 sacks H-Con Lead cement @ 12.0 ppg mud scale verified
2:04 PM	3.5	200.0	67.2	349.8	Mixed 250 sacks H-LD Tail cement @ 14.8 ppg mud scale verified
2:24 PM					Shut down, loaded plug, cleared pump and lines
2:38 PM	4.7	250.0	95.8		Begin diaplacement
2:58 PM	3.0	1,650.0	10.0		Slowed down to 3.0 bpm 10 bbls to go
3:02 PM		2,500.0			Plug down with 1750 landing psi and 2500 bump psi cement did not come around and did not regain circulation after beginning c
3:04 PM					Released pressure plug held with 1 bbl back to tank
3:06 PM					Washed up and rigged down
3:50 PM					Left location

CREW			UNIT		SUMMARY		
Cementer:	John		947		Average Rate	Average Pressure	Total Fluid
Pump Operator:	Jose V		208		3.9 bpm	633 psi	456 bbls
Bulk #1:	Michael		194-235				
Bulk #2:	Christen		538-530				