

**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 #: \_\_\_\_\_  
 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**



416 Main Street  
 P.O. Box 225  
 Victoria, KS 67671

Office (785) 639-3949  
 24 Hour Service Line (785) 639-7269

# Invoice

| Date      | Invoice # |
|-----------|-----------|
| 9/21/2024 | 1351      |

Please Pay from this Invoice.  
 Remit Payment to:  
 416 Main Street PO BOX 225  
 Victoria, KS 67671  
 Billing Questions-Call Tianna at  
 (785) 639-3949  
 Email: franksoilfield@yahoo.com

KCC License Number  
 35469

Bill To  
 Shakespeare Oil Company, Inc.  
 202 W. Main St.  
 Salem, IL 62881

**RECEIVED**  
 OCT 05 2024

| County/State     | Lease/Well#    | Terms  | Job Type   |
|------------------|----------------|--------|------------|
| Scott County, KS | Baker Comm 1-7 | Net 30 | <u>PTA</u> |

| Description               | Quantity | Rate     | Amount    |
|---------------------------|----------|----------|-----------|
| Pump Charge               | 1        | 1,500.00 | 1,500.00  |
| Mileage                   | 96       | 6.50     | 624.00    |
| 12.90 tons at 96 miles    | 1,238.4  | 1.50     | 1,857.60  |
| 60/40 4% gel 1/4# floseal | 290      | 17.35    | 5,031.50T |
| Discount                  |          | -450.65  | -450.65   |

*502-17 29*

*Thank you!*

Accounts Due Net 10th. 1-1/2% Per Month on all Past Due Accounts. 18% Annual Rate.

**Subtotal** \$8,562.45

*We appreciate your business and look forward to serving you again!*

**Sales Tax (8.5%)** \$406.29

**Balance Due** *Dad* \$8,968.74

# FRANKS Oilfield Service

◆ 416 Main St., P.O. Box 225, Victoria, KS 67671 ◆ 24 Hour Phone (785) 639-7269  
 ◆ Office Phone (785) 639-3949 ◆ Email: franksoilfield@yahoo.com

TICKET NUMBER 1351  
 LOCATION Hoxie  
 FOREMAN Jack

## FIELD TICKET & TREATMENT REPORT CEMENT

| DATE            | CUSTOMER # | WELL NAME & NUMBER       | SECTION | TOWNSHIP | RANGE | COUNTY |
|-----------------|------------|--------------------------|---------|----------|-------|--------|
| 9-21-24         | 7311       | Baker Comm #1-7          | 7       | 17       | 34    | Scott  |
| CUSTOMER        |            | Shakespeare Oil Co. Inc. |         |          |       |        |
| MAILING ADDRESS |            | 202 W Main Street        |         |          |       |        |
| CITY            | STATE      | ZIP CODE                 |         |          |       |        |
| Salem           | IL         | 62881                    |         |          |       |        |

| TRUCK # | DRIVER | TRUCK # | DRIVER |
|---------|--------|---------|--------|
| 103     | CX     |         |        |
| 201     | JT     |         |        |

JOB TYPE PTA HOLE SIZE \_\_\_\_\_ HOLE DEPTH \_\_\_\_\_ CASING SIZE & WEIGHT \_\_\_\_\_  
 CASING DEPTH \_\_\_\_\_ DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 13.8# SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING \_\_\_\_\_  
 DISPLACEMENT \_\_\_\_\_ DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: Safety meeting & plugged as ordered.

1) 2490' 50 sk  
 2) 1440' 80 sk  
 3) 600' 50 sk  
 4) 270' 40 sk  
 5) 60' 20 sk RH ~~50~~ sk MH 20 sk  
 Total 290 sk

Thank you.

| ACCOUNT CODE | QUANTITY or UNITS | DESCRIPTION of SERVICES or PRODUCT | UNIT PRICE           | TOTAL                 |
|--------------|-------------------|------------------------------------|----------------------|-----------------------|
| PC005        | 1                 | PUMP CHARGE <u>PTA</u>             | \$1500 <sup>00</sup> | \$1500 <sup>00</sup>  |
| M001         | 96                | MILEAGE                            | \$6 <sup>50</sup>    | \$624 <sup>00</sup>   |
| M002         | 12.90 ton         | ton mileage delivery               | \$1857 <sup>60</sup> | \$1857 <sup>60</sup>  |
| C0010        | 290 sk            | Class A 60/40 1/4# Flowseal        | \$17 <sup>25</sup>   | \$5,031 <sup>50</sup> |
|              |                   |                                    | subtotal             | \$9,013 <sup>10</sup> |
|              |                   |                                    | less 5% disc.        | \$450 <sup>25</sup>   |
|              |                   |                                    | subtotal             | \$8,562 <sup>45</sup> |
|              |                   |                                    | SALES TAX            | 406.29                |
|              |                   |                                    | ESTIMATED TOTAL      | 8968.74               |

Completed @ 8:30 PM

AUTHORIZATION [Signature] 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.