## KOLAR Document ID: 1801477

**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 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.
(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



BILL TO

Citation Oil & Gas 1016 Hwy 40 Bypass Hays, KS 67601

- Acidizing
- Cement
- Tool Rental

TERMS	Well N	lo. Lease	County	Contractor	We	ll Type	W	ell Category	Job Purpos	e Operator
Net 30	#3	Hummel C	B Hodgeman		Workover	PTA	Wayne			
PRICE	REF.		DESCRIPT	QTY	(	UM	UNIT PRICE	AMOUNT		
575W 576W-P 275 328-4 290 581W 583W		Mileage - 1 Way Pump Charge - I Cotton Seed Hul 60/40 Pozmix (4 D-Air Service Charge O Drayage Subtotal Sales Tax Hodge	PTA ls % Gel) Cement				1 3 300 3 400	Miles Job Sacks Gallon(s) Sacks Ton Miles	8.00 1,250.00 40.00 14.00 2.00 1.00 7.50%	240.00T 1,250.00T 120.00T 4,200.00T 135.00T 800.00T 503.70T 7,248.70 543.65
We Appreciate Your Business!								Tota		\$7,792.35

Thank You!		d services listed	NOT WISH 1	CUSTOMER DID NOT WISH TO RESPOND of the materials and services	edges receipt c	stomer hereby acknowle	D SER	DF MATERIALS AN	OMER ACCEPTANCE C	E	SWIFT OPERATOR
UTU	TOTAL	Б Т			ARE YOU SATISFIED WITH OUR SERVICE?	·····	NESS CHY, KS 67560 785-798-2300	A.M.	TIME SIGNED	4) 1 ( X	DATE SIGNED
212	14) TOXY MAN			UIPMENT	WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS		P.O. BOX 466		MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS.	CUSTOMER OR C	MUST BE SIGNED BY CUSTOMER OF CUST START OF WORK OR DELIVERY OF GOODS
					WE UNDERSTOOD AND MET YOUR NEEDS? OUR SERVICE WAS		SWIFT SERVICES INC.	init, and	LIMITED WARRANTY provisions.	RANTY provisi	LIMITED WARRANTY provisions.
1248,70	PAGE TOTAL			PRMED	OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?		REMIT PAYMENT TO:	ich include,	the terms and conditions on the reverse side hereof which include, hit are not limited to DAYMENT DELEASE INDEMNITY and	onditions on th	the terms and co
_		UNDECIDED DISAGREE	AGREE	EY	SURVEY			d anrees to	LEGAL TERMS: Customer hereby acknowledges and agrees to	Customer h	LEGAL TERMS
						*					
503 70	00	503,71 m		2 Standard			20141400				5
00 00 8	2 00			400 SXS		CEMENT	SERVICE CHARGE				<83
135/00	45 00		62	w			D-ADR		- 12		240
420000	14 00		228	300 545		(4 % GEL)	60/40 POZMAX				328-4
120 00	40 00		SHS	2		21	Cottonseed Hulls				61.7
1250/00	1250 00		TOB			PYA	PUMP GUARGE - P				STEP
240	8 00	-	ME	30 MT			MILEAGE # 114				SHS
AMOUNT	UNIT	QTY. U/M	U/M	QTY.		PTION	DESCRIPTION	ACCOUNTING C ACCT DF	SECONDARY REFERENCE/ AU PART NUMBER LOC	SECONDA	REFERENCE
1Ks	WELL LOCATION	873	WELL PERMIT NO.	WELL PE		PTA			WELL TYPE OZL INVOICE INSTRUCTIONS	ATION	4. REFERRAL LOCATION
OWNER SAME	DATE 1 <b>0 ~ 24 - 2024</b> ОRDER NO.		RED TO	CITY	STATE SHIPPED	COUNTY/PARISH HONGEMAN RIG NAME/NO.	ASE HUMMMEL C.B. ELL SERVIZE	ACTOR		r Ks	2.
- 9	PAGE 1						CITY, STATE, ZIP CODE	CITY, ST.	0	es, Inc	Services,
37602	TICKET 3				RP.	H- GAS Corp	"CETATEN C	CHARGE TO: ADDRESS	(Mara – 1)	IFI	SMII

JOB LC			WELL NO				FT Ser	DATE PAGE NO. 10-24-2024 1
GTATZO	5 Oz	GAS COLP.	WELL NO.	1		LEASE HUMM	EL C	JOB TYPE TICKET NO. 37602
CHART NO.	TIME	RATE (BPM)	HOLUME	PU T	IMPS C		URE (PSI) CASING	DESCRIPTION OF OPERATION AND MATERIALS
	0815	(2)				TOBING	CASING	ON LOCATEDN
	-00							
								TUBING - 2 7/8" CASING - 5 1/2"
			-					PERFS e 4498 - 4504
							-	CD8P e 4518'
								5/2 <
								85/8 = 1600' FL=2500'
	0830	4	60	5		500		LOAD HOLE W/ WATER
	0900	4	13	~		500	1	TUB = 4473' MAX SOSKE CMT W/200 # HULLS
		4	22	1		350		DISPLACE CEMENT TO BALANCE
								PULL TUBING OUT WELL
	1120		14		$\checkmark$		500	LOAD HOLE-TEST- HELD
	1145	3	8		$\checkmark$		300	PERFORATE = 1620' INT PATE - CORCULATE
	1200	3	61/2		~		300	MAX CEMENT - 255KB W/O HULS
			b'/2		V		300	255x5 W/ 100 # HULLS
	1205	3	32		$\checkmark$		700	DISPLACE CEMENT
	10.0	3	3					
	1215	3			V			PERFORATE e 780' INJ DATE - CARCULATE
	1225		53		$\checkmark$		400	MAX CEMENT - 200 SKS CORCULATED TO SURFACE
								WELL STAY FULL
								1.10.91
-								WASH TRUCK
	1330							JOB COMPLETE
								THANK YOU
						(f.		
								WAWE, PRESTON, AUSTEN