

**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 #
10/31/2024	1399

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



County/State	Lease/Well#	Terms	Job Type
Scott County, KS	Walker 1-7	Net 30	PTA

Description	Quantity	Rate	Amount
Pump Charge	1	1,500.00	1,500.00
Mileage	90	6.50	585.00
13.50 tons at 90 miles	1,215	1.50	1,822.50
60/40 4% gel 1/4# floseal	300	17.35	5,205.00T
8-5/8 Wooden Plug	1	165.00	165.00T
Discount		-463.87	-463.87

502-17 9

Thank you!

Accounts Due Net 10th. 1-1/2% Per Month on all Past Due Accounts. 18% Annual Rate.	<b>Subtotal</b>	\$8,813.63
We appreciate your business and look forward to serving you again!	<b>Sales Tax (8.5%)</b>	\$433.63
	<b>Balance Due</b>	\$9,247.26

# 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 1399  
 LOCATION Hoare  
 FOREMAN Connor D.

## FIELD TICKET & TREATMENT REPORT CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10-31-24	7311	Walker-7	7	17s	34w	Scott
CUSTOMER <u>Shakespeare Oil Co Inc.</u>			TRUCK #			
MAILING ADDRESS			DRIVER			
CITY			TRUCK #			
STATE			DRIVER			
ZIP CODE			TRUCK #			
			DRIVER			

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

REMARKS: Safety meeting to set up on Duke 9, plugged according to orders

1. 50sx @ 2490
  2. 80sx @ 1440
  3. 50sx @ 720
  4. 50sx @ 270
  5. 70sx @ 60
- RH = 30 MH = 20 300  
~~70~~ sx total
- T Trucks, Connor, Josh, & Tom

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
PC005	1	PUMP CHARGE PTA	\$1500.00	\$1500.00
M001	90	MILEAGE	\$6.50	\$585.00
M002	13.60 <del>13.60</del> tons	Ton mileage delivery	\$1822.50	\$1822.50
CB010	300 <del>200</del> sx	60/140 4% gel 1/4" fl-seal	\$17.35	\$5,205.00
FE055	1	8 5/8 wood plug	\$115.00	\$115.00
			subtotal	\$9,277.50
			less 5% disc.	\$463.87
			subtotal	\$8,813.63
			SALES TAX	433.63
			ESTIMATED TOTAL	9247.26

AUTHORIZATION Emigdio Rojas TITLE \_\_\_\_\_ DATE 10-31-2024

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.