

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.

(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

COPELAND

Acid & Cement

BURRTON, KS ♦ GREAT BEND, KS
(620) 463-5161 (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

Page: 1

RECEIVED NOV 7 2024

INVOICE NUMBER:
C70900-IN

BILL TO:

YOUNGER ENERGY CO.
555 N WEBB ROAD,
SUITE B
Wichita, KS 67206-1801

LEASE: THEIS 5-19

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE ORDER	SPECIAL INSTRUCTIONS		
10/31/2024	70900		10/30/2024	THEIS 5-19	NET 30		
QUANTITY	U/M	ITEM NO./DESCRIPTION			D/C	PRICE	EXTENSION
100.00	MI	MILEAGE CEMENT PUMP TRUCK			0.00	6.00	600.00
1.00	EA	PUMP CHARGE PLUG			0.00	700.00	700.00
132.00	SK	60/40 POZ MIX 2% GEL			0.00	15.55	2,052.60
3.00	SK	2% ADDITIONAL GEL			0.00	25.25	75.75
10.00	SK	GEL ON SIDE			0.00	25.25	252.50
145.00	EA	BULK CHARGE			0.00	1.25	181.25
700.00	MI	BULK TRUCK - TON MILES			0.00	1.10	770.00
10-2024 PAY 11-15-24 PLUGGING COSTS PLUGGING CEMENT / 5-19 copy to Keith Theis 5-19 Scan to OP							
REMIT TO: P.O. BOX 438 HAYSVILLE, KS 67060		COP FUEL SURCHARGE IS NOT TAXABLE AND IS ADDED TO MILEAGE, PUMP AND OR DELIVERY CHARGES ONLY.			Net Invoice: CLACO Sales Tax: Invoice Total:		4,632.10 301.09 <u>4,933.19</u>
RECEIVED BY _____		NET 30 DAYS					

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.



FIELD
ORDER N° C 70900

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

DATE 30-Oct 20 24

IS AUTHORIZED BY: YOUNGER ENERGY

(NAME OF CUSTOMER)

Address _____ City _____ State KS

TO TREAT WELL

AS FOLLOWS: Lease THEIS 5-19 Well No. Customer Order No.

Sec. Twp.

Range _____ County CLARK State KS

Job Safety Analysis-Hazards & Safety Procedures

X	Hard Hat
	H2S Monitor
X	Safety Shoes
	FR Clothing
	Hearing Protection

X	Gloves
	Eye Protection
	Respiratory Protection
	Chemical/Acid PPE
	Fire Extinguisher

☐	Permits
☐	Trip Hazard
☐	Fall Protection

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
30.0002	100	Mileage Pump Truck	\$6.00	\$600.00
20.0003	1	Pump Charge Plug	\$700.00	\$700.00
20.1002	132	60/40 Poz 2% Gel	\$15.55	\$2,052.60
20.1004	3	Add. Gel after 2% Per Sack	\$25.25	\$75.75
20.1005	10	Gel on side per sack	\$25.25	\$252.50
20.0011	145	Bulk Charge	\$1.25	\$181.25
20.0012	700	Bulk Truck Miles	\$1.10	\$770.00
TOTAL BILLING				\$4,632.10

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 TIM DETTER

Station GB

Remarks _____

NET 30 DAYS

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. 6% interest will be charged after 60 days. Total charges are subject to correction by our invoicing department in accordance with latest published price schedules.

TREATMENT REPORT



Excel Wireline, LLC

457 Yucca Lane

Invoice

Date of Service	Due Date
10/29/2024	12/1/2024

Bill To
Younger Energy Company 555 N. Webb Rd., Suite B Wichita, KS 67206-1801

Invoice #
5828

RECEIVED NOV 4 2024

Lease	Well #	County	Truck
Theis #5-19	Old	Clark	#16

Quantity	Description	Unit Price	Amount
1	Service Charge, 5.5 CIBP, Setting Charge @ 7130, Dump Bailer w/ 2 Sacks Cement, Freepoint Service, Cut 5.5 10-2024 PAY 11-15-24 PLUGGING COSTS SET CIBP @ 7130, cut 5.5/5-19	5,450.00	5,450.00T

Thank you for your business!

All accounts are to be paid within 30 days from date of invoice with Excel Wireline and should these terms not be observed, interest at the rate of 1.5% per month will be charged from the date of such invoice. Interst, Attorney, Court, Filing and other fees will be added to accounts turned over to collections.

Subtotal	\$5,450.00
Sales Tax (6.5%)	\$354.25
Balance Due	\$5,804.25

Theis 5-19
10/29/2024

