### KOLAR Document ID: 1806667

**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 #:       SWD Permit #:         ENHR Permit #:       Gas Storage Permit #:       Gas Storage Permit #:       No         Is ACO-1 filed?       Yes       No       If not, is well log attached?       Yes       No         Producing Formation(s): List All (If needed attach another sheet)	County: Well #: Uell #: Date Well Completed: The plugging proposal was approved on: (Date) by: (KCC District Agent's Name) Plugging Commenced:
Depth to Top:         Bottom:         T.D.           Depth to Top:         Bottom:         T.D.	Plugging Completed:

Show depth and thickness of all water, oil and gas formations.

Oil, Gas or Water	r 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	r 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



GEMENT	T TRE	ATMEN	T REP	ORT						1.122
Cust	tomer:	FG Holl			Well:	Enlow	filler 2-11	Ticket:	wp 5936	
City,	State:	Belpre P	(ansas		County:	Edward	s Kansas	Date:	12/3/2024	
Field	d Rep:	Richard	Mcinty	re	S-T-R:	11-24	ls-17w	Service:	PTA	
	and the second second									
	e Size:	nformatio			Calculated Slu				ulated Slurry - Tail	
Hole I					Blend:	H-Plug A	- 63	Blend:		
Casing		1200 4 1/2			Weight:	13.7 ppg		Weight:	ppg	
Casing I					Water / Sx:	6.9 gal / sx		Water / Sx:	gal / sx	
Tubing /			in in		Yield:	1.43 ft <sup>3</sup> / sx		Yield:	ft <sup>3</sup> / sx	· · · ·
	Depth:		ft		Annular Bbls / Ft.:	bbs / ft.		Annular Bbis / Ft.:	bbs / ft.	
Tool / P			п.		Depth:	ft	-	Depth:	ft	
	Depth:		ft		Annular Volume:	0.0 bbis		Annular Volume:	0 bbis	
Displace		13.0			Excess:	0.0.1.1.	- 112	Excess:		
Displace	inem.	13.0	Same in the	TOTAL	Total Slurry:	0.0 bbis	- 89	Total Slurry:	0.0 bbis	
TIME	RATE	PSI	STAGE BBLs	TOTAL BBLs	Total Sacks:	0 sx		Total Sacks:	0 sx	3
8:40 AM	T. Secondaria	ng an ing an			on location job and safet	by		والمرجع الأربية والأنتاجي		
8:45 AM	1				spot trucks and rig up	.y	· · · ·			
0.1074					sport ducks and hig up			· · · ·		
9:07 AM	3.5	100.0	60.0	60.0	casing stuckand pump v	vater to free casing				
					outing outlokand parties	addi to nee odoling				
10:40 AM					1st plug 250 lbs gel 50 sa	acks H-Plug and 100lb	s buils			
	3.5	150.0		-	gel	toko minag and room.	- Huno			
	3.5	50.0	12.7		cement mix 50 sacks H-P	Nua		· · · · · · · · · · · · · · · · · · ·		
	4.0	100.0	13.0	13.0	displacement		· · · · · · · · · · · · · · · · · · ·		· · · · · · ·	·. ···
						·····		· · · · · · · · ·		
				-	had no returns "gonna le	et cement set till tomm	IOTOW	· · · · · · · · · · · · · · · · · · ·	· · ·	
						r i i i i i i i i i i i i i i i i i i i	• , • • •			
									· - · · · · -	
									· · · ·	4
1-1-2 C.		CREW		46.5	UNIT			SUMMAR	Y	- The state
Cen	nenter:	MBn	ungardt		916	Avera	ge Rate A	verage Pressure	Total Fluid	
Pump Op	erator:	M Mc	Graw		540/522	3.6	bpm	100 psi	86 bbis	
	Bulk #1:	EJ M	cGraw		176/532					
В	Bulk #2:								an a	

X



Customer	FG Holl		Lease & Well #	Enlow Miller 2-11				Date	1:	2/4/2024
Service District	Pratt Kansas		County & State	Edwards kansas	Legals S/T/R	11-24s		Job #		
Job Type	Top out	PROD	I INJ	□ SWD	New Well?	P YES	⊠ No	Ticket#		vp 5942
Equipment #	Driver			Job Safety An	alysis - A Discuss	sion of Hazards	& Safety Pro			
916	M Brungardt	Hard hat		Gloves		□ Lockout/Tag	out	Warning Signs	8 Flagging	
540/522	M McGraw	H2S Monitor		Eye Protection		D Required Per	mits	□ Fall Protection	1	
176/532	K Julian	Safety Footwea	r	Respiratory Prote	ection	☑ Slip/Trip/Fall	Hazards	Specific Job Se	equence/Expe	ctations
		☑ FRC/Protective	Clothing	Additional Chem	ical/Acid PPE	Overhead Ha	zards	Muster Point/	Medical Locat	ions
		Hearing Protect	tion	Fire Extinguisher		□ Additional co	oncerns or iss	ues noted below		
					Con	nments				
		tag cement	at 900ft							
										r
Product/ Service										
Code		Desc	ription		Unit of Measure	Quantity				Net Amount
cp055	H-Plug A				sack	120.00				MARKAN ON CONTRACTOR
m015	Light Equipment Mil	eage			mi	50.00				
m010	Heavy Equipment M	lileage			mi	100.00				
m020	Ton Mileage				tm	753.00				
c060	Cement Blending &	Mixing Service			sack	350.00			L	
d010	Depth Charge: 0'-50				job	1.00		ļ	L	
c035	Cement Data Acquis	sition			job	1.00	ļ		L	
r061	Service Supervisor				day	1.00			L.	
									+	
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		and a state of the second second	No	The Distance of the local data	in the second		l			_
Custo	mer Section: On the	a tollowing scale h	ow would you rate	Hurricane Services I	nc.?				Net:	-
Ba	sed on this job, how	v likely is it you w	rould recommend	HSI to a colleague	2	Total Taxable	<b>\$</b> -	Tax Rate:		<
Du						used on new wells	to be sales ta		Sale Tax:	\$
						well information a	bove to make a			
U:	nlikety 1 2 3	3 4 5	6 7 8	9 10 Extr	emely Likely	services and/or pr	oducts are tax	exempt.	Total:	\$
						HSI Represe	entative:	Mark Brung	ardt	

TERMS: Cash in advance unless Hurricane Services Inc. (HSI) has approved credit prior to sale. Credit terms of sale for approved accounts are total invoice due on or before the 30th day from the date of invoice. Past due accounts shall pay interest on the balance past due at the rate of 1 ½% per month or the maximum allowable by applicable state or federal laws. In the event it is necessary to employ an agency and/or attorney to affect the collection, Customer hereby agrees to pay all fees directly or indirectly incurred for such collection. In the event that Customer's account with HSI becomes delinquent, HSI has the right to revoke any discounts previously applied in arriving at net invoice price. Upon revocation, the full invoice price without discount is immediately due and subject to collection. Prices quoted are estimates only and are good for 30 days from the date of fisue. Pricing does not include federal, state, or local taxes, or royalties and stated price adjustments. Actual charges may vary depending upon time, equipment, and material ultimately required to perform these services. Any discount is based on 30 days net payment terms or cash. DISCLAIMER NOTICE: Technical data is presented in good faith, but no warranty is stated or limplied. HSI assumes no liability for advice or recommendations made concerning the results form the use of any product or service. The information presented is a best estimate of the actual results that may be achieved and should be used for comparison purposes and HSI makes no guarantee of faure production performance. Customer orpersents and warrants that well and all associated equipment in acceptable condition to receive services by HSI. Likewise, the customer owned equipment and property while HSI is on location performing services. The authorization below acknowledges the receipt and acceptance of all terms/conditions stated above, and Hurricane has been provided accurate well information in determining taxable services.

#### **CUSTOMER AUTHORIZATION SIGNATURE**



Service Order No. 6006

**\$** Amount

	VVI 457 Yucca Lane • Pratt, Ka	RELINE	620-388-5	676 r	Date 12-2	-24
Company					lient Order#	
F.G. Holl					1000 ···	
Billing Address	City		St	ate	Zip	
Lease & Well # En low - m. //	er 2-11	Field Name		L	egal Description (	coordinates)
Edwards	State	Casing Size		C	asing Weight	
Fluid Level (surface)	Reading from	Customer T.D		E	xcel Wireline T.D.	
Engineer 12 Wheeter	Operator	Operator		U	Init#	
Product Gode	Description	Qiy	Unit Price	From	Depth To	\$ Amoun
Servin	ee charge					
CIB	P 45					
De	phi + Setting		.25	0	4300	
Cemen	F Durano Bailor		201	0	4300	
Disaso	istal cutter			O.	1410	
						earles de
					-	
which we have read and to whic	ording to the terms and conditions specified b h we hereby agree.	elow,		SUBTOT		
Customer	General Terms and Conditions			DISCOU	NT	
interest at the rate of 1.5% per and other fees will be added to (2) Because of the uncertain condi- by the customer that Excel Wire personal or property damage in (3) Should any of Excel Wireline in:	in the terms fixed by Excel Wireline invoices and shoul month will be charged from the date of such invoice. In accounts turned over to collections. tions existing in a well which are beyond the control of eline cannot guarantee the results of their services and the performance of their services. Struments be lost or damaged in the performance of the reasonable effort to recover same, and to reimburse E	nterest, Attorney, Court, F Excel Wireline, it is unde will not be held responsi e operations requested,	illing rstood ble for	SUBTOT T NET TOT	AX	

and customer hereby certifies that the zones, as shot, were approved. (5) The customer certifies that it has the full right and authority to order such work on such well, and that the well in which the work to be done by Excel Wireline is in proper and suitable condition for the performance of said work. (6) No employee is authorized to alter the terms or conditions of this agreement.

(4) It is further understood and agreed that all depth measurements shall be supervised by the customer or its employees,

the items which cannot be recovered or for the cost of repairing damage to items recovered.

Taylor Printing, Inc. • Pratt, Kansas



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# Invoice

 Date of Service
 Due Date

 12/2/2024
 1/3/2025

Invoice # 6006

Bill To F.G. Holl Company, LLC P.O. Box 308 Ellinwood, KS 67526-0308

		Lease	Well#	County	Truc
		Enlow-Miller 2-11	Old		
Quantity	Descriptio		<u> </u>	Edwards	#1
	Service Charge, CIBP 4.5, Depth & Setti		Unit P	rice	Amount
	Noble Cutter	ng, Cement Dump Bailer, Dyn	la		
	DEC	0 9 2024			
		LONG			
	HOTICOL				
	4071080 Plug	ging			
Thank you for you	Ir business!				
	5 <b>(1)</b>		Subtotal		
All accounts are to	be paid within 30 days from date of invoid	e with Excel Wireline and			
from the date of su	ich invoice. Interst Attorney Court Eiling		Sales Ta	x (7.5%)	
accounts turned or	ver to collections.	, and other rees will be added t	Balance	Due	
				wuu	