

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

Form	CP4 - Well Plugging Record
Operator	Shakespeare Oil Co., Inc.
Well Name	PARSONS 2-27
Doc ID	1849232

Producing Formations

Formation	Top	Bottom	Total Depth
Cherokee	4502	4505	4629
Johnson	4493	4495	
Ft Scott	4418	4422	
Myrick Station	4384	4390	
LKC K	4153	4155	
LKC J	4127	4130	
LKC I	4101	4108	
LKC H	4068	4072	
LKC E/F	4004	4006	
LKC D	3991	3995	

SWIFT



P. O. Box 466
Ness City, KS 67560
Off: 785-798-2300



Invoice

DATE	INVOICE #
5/13/2025	37886

BILL TO
Shakespeare Oil Company, Inc 202 West Main Street Salem, IL 62881

RECEIVED
MAY 23 2025

- Acidizing
- Cement
- Tool Rental

TERMS	Well No.	Lease	County	Contractor	Well Type	Well Category	Job Purpose	Operator
Net 30	#2-27	Parsons	Gove	Wild West	Oil	Workover	PTA	Gideon

PRICE REF	DESCRIPTION	QTY	UM	UNIT PRICE	AMOUNT
575W	Mileage - 1 Way	80	Miles	8.00	640.00T
576W-P	Pump Charge - PTA	1	Job	1,250.00	1,250.00T
328-4	60/40 Pozmix (4% Gel)	355	Sacks	14.00	4,970.00T
325	Standard Cement	75	Sacks	17.50	1,312.50T
275	Cotton Seed Hulls	6	Sack(s)	40.00	240.00T
278	Calcium Chloride	3	Sack(s)	55.00	165.00T
279	Bentonite Gel	14	Sack(s)	30.00	420.00T
290	D-Air	5	Gallon(s)	45.00	225.00T
581W	Service Charge Cement	492	Sacks	2.00	984.00T
583W	Drayage	1,786	Ton Miles	1.00	1,786.00T
	Subtotal				11,992.50
	Sales Tax Gove County			8.50%	1,019.36

502-17 49

We Appreciate Your Business!	Total	\$13,011.86
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Services, Inc.

TICKET 37886

CHARGE TO: Shakespeare Oil Co.
 ADDRESS _____
 CITY, STATE, ZIP CODE _____

PAGE 1 OF 1

SERVICE LOCATIONS
 1. Ness City, KS
 2. _____
 3. _____
 4. _____

WELL/PROJECT NO. 2-27
 LEASE Parsec
 COUNTY/PARISH Greene
 STATE KS
 CITY _____

TICKET TYPE SERVICE SALES
 CONTRACTOR Wild West
 RIG NAME/NO. _____

WELL TYPE Oil
 WELL CATEGORY Workover
 JOB PURPOSE Plug to Abandon

INVOICE INSTRUCTIONS _____

WELL PERMIT NO. _____

WELL LOCATION 5/2 of Carley, KS

DATE 5/13/2025
 ORDER NO. _____

OWNER _____

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	LOC	ACCOUNTING		DESCRIPTION	MILEAGE	QTY.		UNIT PRICE	AMOUNT	
			ACCT	DF			UM	UM			
575		1			Truck #116	80 MI			8.00	640.00	
576P		1			Pump Charge - PTA		1	500	1.250	1.250	
328-4		1			Colyo Foamix 4% gcl				14.00	4,976.00	
326		1			Standard Cement				17.00	1,312.00	
276		1			Conon Seed Hells				40.00	240.00	
278		1			Calcium Chloride	130 lbs			55.00	165.00	
279		1			Benzonite Gcl	700 lbs			30.00	420.00	
290		1			T-Air				45.00	225.00	
581		1			Cement Service Charge				2.00	984.00	
583		1			Drays				1.00	1,786.00	
LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions.					SURVEY		44630 lbs	1786 TM			
MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS.					OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?						
					WE UNDERSTOOD AND MET YOUR NEEDS?						
					OUR SERVICE WAS PERFORMED WITHOUT DELAY?						
					WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?						
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JOB LOG

SWIFT Services, Inc.

DATE 5/13/2026 PAGE NO. 1

CUSTOMER		WELL NO.		LEASE		JOB TYPE		TICKET NO.	
Shakespeare Oil		2-27		PARSONS		Plug to Abandon		37886	
CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS	
				T	C	TUBING	CASING		
	0845							ON LOCATION 2 3/8" x 5 1/2"	
								TP: 4,475'	
	0940	5	16	✓		200		Plug @ 4,475' w/ 75 sks of STANDARD 3% CC + 200 lbs of HULLS	
	1010	5	13	✓		200		Plug @ 3850' w/ 50 sks of 60/40 Permox 4% gel + 100 lbs of HULLS	
	1030	5	21	✓		650		Pump 700 lbs of Gel @ 3350'	
		5	4	✓		450		Mix 15 sks of 60/40 Permox 4% gel	
	1100	5	39	✓		400		Mix 150 sks of 60/40 Permox 4% gel w/ 300 lbs of HULLS @ 2,500'	
	1200	3 1/2	30	✓		350		Mix 115 sks of 60/40 Permox 4% gel *CIRCULATE CMT to SURFACE	
								JOH	
	1245	1	5	✓		0		Top off 5 1/2" w/ 20 sks	
		Ø	1	✓		300		Plug BS w/ 5 sks	
	1315							WASH UP TRUCK #115 JOB COMPLETE	
								355 sks of 60/40 Permox 4% gel 75 sks of STANDARD 3% CC, 600 lbs of HULLS + 700 lbs of Gel used	
								THANKS!	
								Dudean, Josh, Gortona	