

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



HP Oilfield Services, LLC
383 Inverness Parkway, Suite 330
Englewood, CO 80112

RECEIVED

JUL 08 2025

WICHITA

Invoice

Date	Invoice #
7/1/2025	61887

Bill To
Abercrombie Energy, LLC 10209 W. Central, Suite #2 Wichita, KS 67212

Lease
Swisher A-1

DESC CEMENT TO PLUG

GL ACCT 9050

LSE/SUB-ACCT SWISHA

APPROVED _____

Order by / P.O. No.	Terms
	Net 30

Description	Unit	Hrs / Qty	U/M	Rate	Amount
Cement Services					
Field Ticket : 60074					
Description: Please see Attached Field Ticket					
Pump Charge for Cement	CMT	1	ea	430.00	430.00
Pumptruck Mileage	103	60	ea	7.15	429.00
Mileage Delivery of Bulk Material	CMT	846	ea	1.75	1,480.50
Liteweight Blend V	CMT	300	sack	18.50	5,550.00T
Discount - Non-Taxable Items	CMT	1	ea	-233.95	-233.95
Discount - Taxable Items	CMT	1	ea	-555.00	-555.00T
Subtotal prior to Sales Taxes					7,100.55
KS & Straton County Sales Tax				7.50%	374.63

Thank you for your business.

Total \$7,475.18

Field Ticket

HP OILFIELD SERVICES, LLC
504 W. 4TH STREET
Hugoton, Ks 67951



FIELD TICKET & TREATMENT REPORT
CEMENT

Ticket # 60074
LOCATION: Hugoton
FOREMAN: J. Arrington

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7/1/2025		Swisher A-1	8	27 S	40 W	Stanton

CUSTOMER
Abercrombie Energy

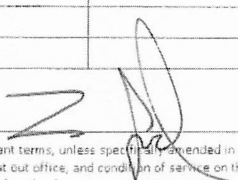
MAILING ADDRESS

CITY STATE ZIP CODE

TRUCK #	DRIVER	Salesman
803	Frank	Frank
223	Daniel	Supervisor
		Jason

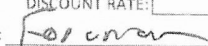
JOB TYPE: PTA HOLE SIZE (in): HOLE DEPTH (ft): CASING SIZE & WEIGHT (in & lb/ft):
CASING DEPTH (ft): DRILL PIPE: TUBING: OTHER:
SLURRY WEIGHT (ppg) SLURRY VOL (bbls) WATER REQ. (gal/sk) CEMENT LEFT IN CASING (ft)
DISPLACEMENT (bbls) DISPLACE. PRESS. (psi) MIX PRESSURE (psi) RATE (bbl/min):
REMARKS: On Location, Safely meting, Rig up, Load hole w/ fresh water, test casing to 500 PSI, Mix 30 sk, disp w/ 5.3 bbl fresh water, mix 268 sk Circ.
Cement to the pit, rig down

CODE	QUANTITY	DESCRIPTION	UNIT PRICE	UOM	TOTAL
	1	Cement Pump 1001-2000'	\$ 430.00	ea	\$430.00
	60	Heavy Vehicle Mileage	\$ 7.15	mi	\$429.00
	14.1	Cement Delivery	\$ 1.75	ton-mi	\$1,480.50
	300	Lite Weight Blend V	\$ 18.50	Sack	\$5,550.00

AUTHORIZATION: 

DISCOUNT RATE: 10%

SUB TOTAL: \$7,889.50

TITLE: 

DISCOUNT: \$788.95

DATE:

TOTAL: \$7,100.55

I acknowledge that the payment terms, unless specifically amended in writing form or in the customer's account records, at out office, and condition of service on the back of this form are in effect for services identified on this form.

*pricing does not include tax

ELI Wireline Services LLC

PO Box 549

Hays, KS 676010549

7856283998

accountspayable@eliwireline.com

RECEIVED

JUL 02 2025

WICHITA**ELI**
WIRELINE SERVICES**INVOICE****BILL TO**ABERCROMBIE ENERGY
10209 W CENTRAL, SUITE 2
WICHITA, KS 67212**SHIP TO**ABERCROMBIE ENERGY
10209 W CENTRAL, SUITE
2
WICHITA, KS 67212**INVOICE #** 10178**DATE** 07/01/2025**DUE DATE** 07/31/2025**TERMS** Net 30**FIELD TICKET #**

6669 - Swisher A #1

ITEM NO.	DESCRIPTION	QTY	RATE	AMOUNT
70-210-1000	Service Charge - Cased Hole	1	500.00	500.00
75-100-0500	Solid Bridge Plug 5 1/2	1	1,600.00	1,600.00
70-299-0200	Dump Bailer w/sack of cement - 1st Run	1	400.00	400.00
70-805-1005	Squeeze Gun - 1st Gun	1	1,250.00	1,250.00

SUBTOTAL 3,750.00

DISCOUNT 15% -562.50

TOTAL 3,187.50

BALANCE DUE **\$3,187.50**

DESC SET CIBP

GL ACCT 9047

LSE/SUB-ACCT SWISHA

APPROVED



ELI
WIRELINE SERVICES

Please Remit To:
P.O. Box 549
Hays, KS 67601
Phone: (785) 628-6395
Fax: (785) 628-3651

FIELD TICKET No.

- 6669

DATE 7/1/25
UNIT # 3362

INVOICE NO.		P.O. NO.	AFE NO.
CUSTOMER <u>Abercrombie Energy</u>		LEASE <u>Swisher A</u>	WELL NO. <u>1</u>
ADDRESS		FIELD	STATE <u>KS</u> COUNTY <u>Stanton</u>
CITY		LOCATION	
STATE		CASING SIZE & WT.	TBG. SIZE
ZIP		TYPE OF JOB	

ORDERED BY	TITLE		SERVICE SUPV.		
PART NO.	DESCRIPTION	REV. CODE	QTY.	UNIT PRICE	AMOUNT
70-210-1000	Service charge		1		\$500.00
75-820-0055	5 1/2 cast iron Plug Set at 2450'		1		\$1,600.00
70-299-0200	Dump bailer		1		\$400.00
	Sack of Cement		2		
70-805-1005	1x4 Squeeze gun Shot at 751'		1		\$1,250.00

CALLED OUT <u>5:00 AM</u> Time _____ Date	ON LOCATION <u>8:30</u> Time _____ Date	COMPLETED <u>4:30 PM</u> Time _____ Date	TOTAL SERVICE & MATERIALS <u>\$3,750.00</u>
			DISCOUNT <u>\$562.50</u>
			TAX
*ACCIDENT REPORT MUST BE ATTACHED WHEN NOT SIGNED			TOTAL CHARGES <u>\$3,187.50</u>

WITH MY INITIALS, I CONFIRM THAT THE TIME SHOWN IN THE "HOURS" COLUMN, ACCURATELY REFLECTS MY COMPENSABLE TIME.

Employee Name (Print)	Hours	Initials
Townley	11 1/2	LW
Reynolds	11 1/2	LW

CUSTOMER AGREES to pay (the "Company") on a net 45 day basis from date of invoice to avoid loss of discount. Invoices older than 45 days are subject to loss of discount on ticket. If Customer disputes any item invoiced, Customer shall, within 20 days after receipt, notify the Company of the item(s) disputed, specifying the reason(s) therefor; payment of the disputed item(s) may be withheld until settlement of dispute, but payment of undisputed portion of invoice shall be made without delay. All payments shall be made at the address shown on the reverse side of this document. In the absence of a separate written contract, CUSTOMER REPRESENTATIVE REPRESENTS AND WARRANTS THAT HE/SHE IS AUTHORIZED TO ENTER INTO THIS AGREEMENT ON BEHALF OF CUSTOMER AND ACCEPTS ALL TERMS AND CONDITIONS AS PRINTED ON THE REVERSE SIDE OF THIS DOCUMENT (WHICH INCLUDES INDEMNITY LANGUAGE THAT ALLOCATES RISKS RELATED TO THE ABOVE DESCRIBED SERVICES). Pricing and extensions, if shown above, are subject to verification and correction at time of invoicing.

[Signature]

[Signature]
CUSTOMER REPRESENTATIVE

White - Main Canary - Customer Pink - Field