

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

Form	CP4 - Well Plugging Record
Operator	Shakespeare Oil Co., Inc.
Well Name	SPLITTER B 2 OWWO
Doc ID	1865374

Producing Formations

Formation	Top	Bottom	Total Depth
Johnson	4567	4578	4672
Cherokee	4554	4557	
Altamont	4410	4414	
Lenapah	4366	4375.5	
LKC I	4207	4214	

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Oil, Gas, or Water Records

Formation	Content
Johnson	Oil
Cherokee	Oil
Altamont	Oil
Lenapah	Oil
LKC	Oil



Midwest Wireline, LLC
PO Box 793
Hays, KS 67601
(785)625-3858

Invoice

Date	Invoice #
10/1/2025	3526

Bill To
Shakespeare Oil Company, Inc. 202 W. Main St Salem, IL 62881

Well Name: Splitter B #2
County, State: Lane, KS
Due Date: 10/31/2025
Unit #: 111
Terms: Net 30

RECEIVED
OCT 02 2025

Check Remit to Address:
PO Box 793
Hays, KS 67601

ACH Payment Preferred:
Equity Bank
Checking Acct Name: Midwest Wireline LLC
Account Number: 7701058917
Routing Number: 101105354

Description	Quantity	Price	Amount
Truck Rental / Rig-up	1	2,200.00	2,200.00T
Mast Trailer Charge	1	650.00	650.00T
Setting Service - Depth	4,290	0.40	1,716.00T
3.50" - 4.4" OD	1	2,220.00	2,220.00T
Dump Bailer - Depth	4,290	0.29	1,244.10T
Dump Bailer - Operations	1	2,400.00	2,400.00T
Subtotal of Invoice			10,430.10
Total Discount - MS		-7,580.10	-7,580.10
Lane County Sales Tax		7.50%	213.75

Thank you for your business.

All invoices over 60 days past due will be charged
15% interest

Total

\$3,063.75

**Service Order No.**

1- 3526

Date: 10-1-25

Product Code	Description	Qty	Unit Price	Depth		\$ Amount
				From	To	
10000	Truck Rental / Rigup	1	2200			2200
10011	Mast trailer	1	650			650
15071	Depth Charge	4290	.40	0	4290	1,716
15090	Set 5½" CFBP	1	2,220	4290		2,220
15021	Depth Charge	429	.29	0	4290	1,244.1
15022	Pump Cement on Plug	1	2,400	4290		2,400
	4282.5					
	7.5					
4290	4290					


SUBTOTAL	10,430. ¹⁰
DISCOUNT	7,580. ¹⁰
SUBTOTAL	2,850
TAX	213.75
NET TOTAL	\$3,063.75

Midwest Field Representative

Michael Hiss in R 10-1-25

Name Printed Signature / Date

MIDWEST OFFICE USE ONLY - Manager Approval

 10-2-25

Name Printed _____ Signature / Date _____



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



Invoice

DATE	INVOICE #
10/3/2025	38023

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

RECEIVED
OCT 14 2025

- Acidizing
- Cement
- Tool Rental

TERMS	Well No.	Lease	County	Contractor	Well Type	Well Category	Job Purpose	Operator
Net 30	B-2	Splitter	Lane		Oil	Workover	PTA	Wayne
PRICE REF.		DESCRIPTION			QTY	UM	UNIT PRICE	AMOUNT
575W	Mileage - 1 Way			35	Miles	8.00	280.00T	
576W-P	Pump Charge - PTA			1	Job	1,250.00	1,250.00T	
275	Cotton Seed Hulls			0	Sack(s)	40.00	0.00T	
328-4	60/40 Pozmix (4% Gel)			195	Sacks	14.00	2,730.00T	
290	D-Air			2	Gallon(s)	45.00	90.00T	
581W	Service Charge Cement			300	Sacks	2.00	600.00T	
583W	Drayage			440.3	Ton Miles	1.00	440.30T	
	Subtotal						5,390.30	
	Sales Tax Lane County					7.50%	404.27	
We Appreciate Your Business!						Total	\$5,794.57	

502-17 4

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE	PAGE NO.
10-3-2025	1
TICKET NO.	
38023	

CUSTOMER		WELL NO.		LEASE		JOB TYPE	
SNAPES OIL CO.		B-2		SPLITTER		PTA	
CHART NO.	TIME	RATE (BPM)	VOLUME (BBL/GAL)	PUMPS		PRESSURE (PSI)	
				T	C	TUBING	CASING
	1030						
							ON LOCATION
							5 1/2" CS6 = 4617' C2BP = 4290'
							PERFS = 4588-90 4310-18
							P.C. = 1660 FL = 3425'
							85/8 = 265'
	1200	4 1/2	39		✓	0	PUMP WATER
		4 1/2	46		✓	500	MIX 175 SLS CEMENT CASING FULL - PSE UP
	1230	1	5 1/4		✓	300	MIX 20 SLS CEMENT - BRADEN HEAD - PSE UP
							WASH TROCK
	1300						JOB COMPLETE
							THANK YOU
							WAYNE, SETH, MARK, AUSTIN