

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



HURRICANE SERVICES INC

Remit To: Hurricane Services, Inc.
250 N. Water, Suite 200
Wichita, KS 67202
316-303-9515

Customer:

CARMEN SCHMITT INC
PO BOX 47
GREAT BEND, KS 67530-0047

Invoice Date: 10/7/2025
Invoice #: 0386762
Lease Name: Joseph
Well #: 1-8
County: Thomas, Ks
Job Number: WP6624
District: Oakley

Date/Description	HRS/QTY	Rate	Total
Plug to Abandon	0.000	0.000	0.00
H-Plug	255.000	14.400	3,672.00
Wooden plug 8 5/8"	1.000	135.000	135.00
Cello Flake	64.000	1.575	100.80
Light Eq Mileage	24.000	1.800	43.20
Heavy Eq Mileage	48.000	3.600	172.80
Ton Mileage	264.000	1.350	356.40
Depth Charge 2001'-3000'	1.000	1,800.000	1,800.00
Cement Blending & Mixing	255.000	1.260	321.30
Service Supervisor	1.000	247.500	247.50

7/10/43
22569.0108
Well Ate
Surface Cement

Net Invoice	6,849.00
Sales Tax:	410.29
Total	7,259.29

TERMS: Net 30 days. Interest may be charged on past due invoice at rate of 1 ½% per month or maximum allowed by applicable state or federal laws. HSI has right to revoke any discounts applied in arriving at net invoice price if invoice is past due. If revoked, full invoice price without discount plus additional sales tax, as applicable, is due immediately and subject to interest charges. Customer agrees to pay all collection costs directly or indirectly incurred by HSI in the event HSI engages a third party to pursue collection of past due invoice.

SALES TAX: Services performed on oil, gas and water wells in Kansas are subject to sales tax, with certain exceptions. HSI relies on the well information provided by the customer in identifying whether the services performed on wells qualify for exemption.

WE APPRECIATE YOUR BUSINESS!



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 effect 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 issue. 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 implied. HSI assumes no liability for advice or recommendations made concerning the results from 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 future production performance. Customer represents and warrants that well and all associated equipment in acceptable condition to receive services by HSI. Likewise, the customer guarantees proper operational care of all 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.

ftv: 13-2021/01/19
mply: 490-2025/03/19



CEMENT TREATMENT REPORT

Customer:	Carmen Schmitt	Well:	Joseph #1-8	Ticket:	WP 6624
City, State:		County:	Thomas,KS	Date:	10/7/2025
Field Rep:		S-T-R:	8-9S-34W	Service:	PTA

Downhole Information		Calculated Slurry - Lead		Calculated Slurry - Tail	
Hole Size:	7 7/8 in	Blend:	H-Plug	Blend:	
Hole Depth:	4900 ft	Weight:	13.6 ppg	Weight:	ppg
Casing Size:	in	Water / Sx:	6.9 gal / sx	Water / Sx:	gal / sx
Casing Depth:	ft	Yield:	1.42 ft ³ / sx	Yield:	ft ³ / sx
Tubing / Liner:	in	Annular Bbls / Ft.:	bbs / ft.	Annular Bbls / Ft.:	bbs / ft.
Depth:	ft	Depth:	ft	Depth:	ft
Tool / Packer:		Annular Volume:	0.0 bbls	Annular Volume:	0 bbls
Tool Depth:	ft	Excess:		Excess:	
Displacement:	bbls	Total Slurry:	64.5 bbls	Total Slurry:	0.0 bbls
		Total Sacks:	255 sx	Total Sacks:	0 sx

TIME	RATE	PSI	BBLs	TOTAL BBLs	REMARKS
1100pm			-	-	Arrive On Location
1130pm				-	Safety Meeting
1200am				-	Rig Up
				-	Pipe At 2825'
1245am	4.0	330.0	15.0	15.0	H2O Ahead
1252am	3.5	380.0	12.6	27.6	Cement Slurry H-Plug 50sks 13.8ppg
1256am	3.0	150.0	30.0	57.6	Displace 5bbls water then 25bbls mud with rig pump
				57.6	Pipe At 1925'
142am	4.0	260.0	15.0	72.6	H2O Ahead
145am	4.3	370.0	25.2	97.8	Cement Slurry H-Plug 100sks 13.8ppg
150am	4.5	170.0	15.0	112.8	Displace with Water
					Pipe at 375
252am	4.0	140.0	15.0		H2O Ahead
256am	3.5	170.0	12.6		Cement Slurry H-Plug 50sks 13.8ppg
300am	2.5	150.0	1.0		Displace with Water
					Pipe at 40'
411am	2.5	50.0	2.5		Cement Slurry H-Plug 10sks 13.8ppg Plug Down
					Mouse Hole
414am	2.5	60.0	3.8		Cement Slurry H-Plug 15sks 13.8ppg
					Rat Hole
418am	2.5	60.0	7.5		Cement Slurry H-Plug 30sks 13.8ppg
422am					Wash Up
440am					Rig Down
500am					Leave Location

CREW		UNIT	PERFORMANCE		
Cementer:	Spencer	958	Average Rate	Average Pressure	Total Fluid
Pump Operator:	Cory	230	3.4 bpm	191 psi	155 bbls
Bulk #1:	Kale	537/235			
Bulk #2:	Jose				