

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



Ellinwood, KS
620-727-3409

INV# 11112025

LOEWEN OPERATOR INC
LEASE : W CRANE #2
ATTN: DOUG LOEWEN

NOVEMBER 11 2025

RIG TIME 11 HOURS @\$270.00 =\$2970.00

CEMENT 4 SKS @ \$15.00 =\$60.00

WELDING/TORCH SERVICES 3 HOURS @ \$81.00 =\$243.00

BACKHOE SERVICES 3 HOURS @\$100.00 = \$300.00

DROVE OVER RIGGED UP DUG CELLAR AND PIT DROPPED SURFACE SAND AT
2601 BAILED 4 SKS CEMENT SHOT 400 COUNT GET FREE

NOVEMBER 12 2025

RIG TIME 9 HOURS @\$270.00 =\$2430.00

BACKHOE SERVICES 3 HOURS @\$100.00 =\$300.00

1" TUBING RENTAL AND TRUCKING \$200.00

RAN 1" TO 300' PUMPED 50 SKS 100# HULLS DOWN 5 1/2 PUMPED 150 SKS DOWN 1"
TOPPED OFF 50 SKS TORE DOWN LOADED OUT FILLED CELLAR AND PIT AND
PICKED UP TRASH

SUB TOTAL \$6503.00
LESS TAXES \$600.00

\$5903.00

MCPHERSON SALES TAX 9% \$531.27

TOTAL \$7034.27

paid
12-15-25
with #13473
\$7,034.27

PAYABLE TO TAR LLC
190 US HWY 56
ELLINWOOD KS 67526
RICHARD MCINTYRE
620-727-3409

GRESSEL OIL FIELD SERVICE

Invoice

Page: 1

POST OFFICE BOX 438
 HAYSVILLE, KS 67060
 (316) 524-1225
 FAX (316) 524-1027

BURRTON, KS ♦ GREAT BEND, KS ♦ HAYS, KS ♦
 (620) 463-5161 (620) 793-3366 (785) 628-3220

**INVOICE NUMBER:
 L3044-IN**

BILL TO:
LOEWEN OPERATING INC
PO BOX 335
CANTON, KS 67428-0335

LEASE: W CRANE #2

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE ORDER	SPECIAL INSTRUCTIONS	
11/20/2025	3044		11/10/2025	W CRANE #2	NET 30	
QUANTITY	U/M	ITEM NO./DESCRIPTION		D/C	PRICE	EXTENSION
1.00	EACH	CUT 5 1/2 CASING AT 300'				
		SET UP WIRELINE		0.00	1,000.00	1,000.00
1.00	EACH	CUT CASING AT 300'		0.00	1,200.00	1,200.00
1.00-	EA	DISCOUNT PER BID		0.00	500.00	500.00-
REMIT TO: P.O. BOX 438 HAYSVILLE, KS 67060		LTG		Net Invoice:		1,700.00
RECEIVED BY _____		NET 30 DAYS		MCPCO Sales Tax:		136.00
				Invoice Total:		1,836.00

There will be a charge of 1.5% (18% annual rate) on all accounts over 30 days past due.

Gressel Oil Field Service reserves a security interest in the goods sold until the same are paid for in full and reserve all the rights of a secured party under the Uniform Commercial Code.

GRESSEL OIL

3044

Field Service, LLC

P.O. BOX 438
 Haysville, KS 67060
 (316) 524-1225 • FAX (316) 524-1027

Date 11-10-25

CHARGE TO: Loewen Operator, Inc.
 ADDRESS _____
 R/A SOURCE NO. _____ CUSTOMER ORDER NO. _____
 LEASE AND WELL NO. W-Crane #2 FIELD _____
 NEAREST TOWN _____ COUNTY McPherson STATE KS
 SPOT LOCATION NE-NW-SW-NE SEC. 7 TWP. 18 S RANGE 1 W
 ZERO Gr.L. CASING SIZE 5 1/2" WEIGHT _____
 CUSTOMER'S T.D. _____ GRESSEL _____ FLUID LEVEL _____
 ENGINEER LeeBetz OPERATOR _____

PERFORATING				
Description	No. Shots	From	Depth To	Amount
cut 5 1/2" casing at 300'	1		300'	1200.00

DEPTH AND OPERATIONS CHARGES					
Description	From	Depth To	Total No. Ft.	Price Per Ft.	Amount

MISCELLANEOUS		
Description	Quantity	Amount
Service Charge	1	1000.00

PRICES SUBJECT TO CORRECTION BY BILLING DEPARTMENT

RECEIVED THE ABOVE SERVICES ACCORDING TO THE TERMS AND CONDITIONS SPECIFIED ON THE REVERSE SIDE TO WHICH WE HEREBY AGREE.

<i>Bid</i>	Sub Total	2200.00
	Tax	1700.00

COPELAND

Acid & Cement

BURRTON, KS (620) 463-5161
 GREAT BEND, KS (620) 793-3366
 FAX (620) 463-2104 FAX (620) 793-3536

POST OFFICE BOX 438
 HAYSVILLE, KS 67060
 (316) 524-1225
 (316) 524-1027 FAX

Invoice

INVOICE NUMBER:
 C48708-IN

BILL TO:
 LOEWEN OPERATING INC
 PO BOX 335
 CANTON, KS 67428-0335

LEASE: W CRANE #1

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE ORDER	SPECIAL INSTRUCTIONS	
11/18/2025	48708		11/10/2025	W CRANE #4	NET 30	
QUANTITY	U/M	ITEM NO./DESCRIPTION		D/C	PRICE	EXTENSION
102.00	MI	MILEAGE CEMENT PUMP TRUCK		0.00	6.00	612.00
1.00	EA	CEMENT PUMP CHARGE		0.00	700.00	700.00
35.00	SK	COMMON CEMENT		0.00	18.00	630.00
1.00	EA	BULK CHARGE-MIN CHG		0.00	150.00	150.00
1.00	MI	BULK TRUCK - TON MILES-MIN CHG		0.00	150.00	150.00
REMIT TO: P.O. BOX 438 HAYSVILLE, KS 67060		COB		Net Invoice:		2,242.00
RECEIVED BY _____		FUEL SURCHARGE IS NOT TAXABLE AND IS ADDED TO MILEAGE, PUMP AND OR DELIVERY CHARGES ONLY.		MCPCO Sales Tax:		179.36
		NET 30 DAYS		Invoice Total:		2,421.36

There will be a charge of 1.5% "per month" (18% annual rate) on all accounts over 30 days pas

Copeland Acid & Cement is a subsidiary of Gressel Oil Field Service

Gressel Oil Field Service reserves a security interest in the goods sold until the same are paid for in full and reserve all the rights of a secured party under the Uniform Commercial Code.

