

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 _____ 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: _____

CANCELLED 12/6/2019 OPERATOR SUBMITTED ON INCORRECT API NO. 12/9/2019 djik per RHesterman.

Show depth and thickness of all water, oil and gas formations.

Table with 6 columns: Oil, Gas or Water Records (Formation, Content) and Casing Record (Surface, Conductor & Production) (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

Kepley Well Service, LLC

19245 Ford Road
Chanute, KS 66720

N & W Enterprise Inc.
1111 S. Margrave
Fort Scott, KS 66701

| Date | Invoice # |
|------------|-----------|
| 11/26/2019 | 54872 |

48-1103536

| County | Due Date | Well # | API # |
|----------|------------|-------------|----------------------------|
| Crawford | 12/26/2019 | Oplotnik #7 | 22231 15-037-21657-0000 |

| Description | Qty | Rate | Amount |
|---|-----|--------|---------|
| Pump Charge Hook onto 2 7/8", pumped 1/2 barrel of water to establish rate. Pumped 19 sacks of cement and hulls. Shut in at 600 psi. | 1 | 500.00 | 500.00T |
| Cement | 19 | 12.50 | 237.50T |
| Vacuum Truck | 1 | 85.00 | 85.00T |

12/1/19
dc # 6633

| Phone # | E-mail |
|--------------|-------------------------|
| 620-433-7196 | rustypickle@hotmail.com |

| | |
|-------------------------|----------|
| Subtotal | \$822.50 |
| Sales Tax (7.5%) | \$61.69 |
| Total | \$884.19 |
| Balance Due | \$884.19 |