

Employee of Operator or Operator on above-described well,

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

Address 1:	NE NW y: Name: Vell Completed: ugging proposal was app	Twp S. R East West North / South Line of Section East / West Line of Section rest Outside Section Corner: SE SW Well #:			
Address 2:	Feet from Feet from ges Calculated from Near NE NW W: Name: Vell Completed: ugging proposal was app	North / South Line of Section East / West Line of Section rest Outside Section Corner: SE SW Well #:			
City: State: Zip: + Footage Phone: ()	ges Calculated from Near NE NW NY: Name: Vell Completed: ugging proposal was app	East / West Line of Section rest Outside Section Corner: SE SW Well #:			
Contact Person:	ges Calculated from Near NE NW NY: Name: Vell Completed: ugging proposal was app	rest Outside Section Corner: SE SW Well #:			
Phone: ()	NE NW y: Name: Vell Completed: ugging proposal was app	SE SW Well #:			
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.	y: Name: Vell Completed: ugging proposal was app	Well #:			
Water Supply Well Other: SWD Permit #: Lease ENHR Permit #: Gas Storage Permit #: Date W The plu Producing Formation(s): List All (If needed attach another sheet) Depth to Top: Bottom: T.D. County Lease Date W The plu by:	Name: Vell Completed: ugging proposal was app	Well #:			
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Depth to Top: Bottom: T.D	Plugging Commenced:				
Depth to Top: Bottom: T.D	ng completed				
Show depth and thickness of all water, oil and gas formations.					
Oil, Gas or Water Records Casing Record (S	Casing Record (Surface, Conductor & Production)				
Formation Content Casing Size	Setting Depth	Pulled Out			

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.

_____ Address 2: ____

_____ County, ________, , ss.

Plugging Contractor License #: ______ Name: ____

(Print Name)

Name of Party Responsible for Plugging Fees: ____

CEMENTING CO., LLC. 039080

Federal Tax 1 Dc# 20-5975804 SERVICE POINT O BOX H RUSSELL, KANSAS 67665 IOD FINISH ON LOCATION CALLED OUT RANGE Gu Sa LOCATION OF KL WELL # 16- 6 OLD OR NEW (Circle one) OWNER CONTRACTOR TYPE OF JOB Trusca for a CEMENT T.D. HOLE SIZE amount ordered DEPTH CASING SIZE DEPTH Tubing Size DEPTH DRILLPIPE DEPTH TOOL COMMON MINIMUM SHOE JOINT MEAS, LINE CEMENT LEFT IN CSG CHLORIDE. PERFS. ASC 🚣 DISPLACEMENT EQUIDMENT 0 PUMP TRUCK CEMENTER HELPER 423 0.53.6.5 BULK TRUCK # 396 DRIVER BULK TRUCK HANDLING 100 DRIVER MH. EAGR LOGRER SE // MITTE o talaya REMARKS: BROWN WERE BOUNDED WITH BUT TO CHEST SERVICE DEPTH OF JOB. PUMPTRUCK CHARGE EXTRA FOOTAGE. 0 @_ 1158 CHARGE TO MAK STREET PLUG & FLOAT EQUIPMENT STATE CITY. 220 The fire of the party of the state of the st To Allied Cementing Co., LLC You are hereby requested to tent comenting equipment and furnish comenter and helper(s) to assist owner or contractor to do work as is listed. The above work was TOTAL ... AND THE PROPERTY OF BUILDING done to satisfaction and supervision of owner agent on contractor. I have read and understand the "GENERAL SALES TAX (If Any) -TERMS AND CONDITIONS" listed on the reverse side. TOTAL CHARGES to come the manufacture control of the control of th maker to be that the best of the first the fir JE RAID IN 30 DAY. and the second of the second of the second of PRINTED NAME The Court of SIGNATURE MEDICAL APPLIANCE AND SERVICE AN The state map through the above the trade of the first first of the state of the st " and the state of the state of

ALLIED CEMENTING CO., LLC. 044453

Federal Tax I D. a 20-507680

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