

Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

the same are true and correct, so help me God.

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1046641

Form CP-4
March 2009
Type or Print on this Form
Form must be Signed
All blanks must be Filled

WELL PLUGGING RECORD K.A.R. 82-3-117

OPERATOR: License #:			AP	I No. 15	j				
Name:				Spot Description:					
Address 1:			_	- -	Sec Tw	vp S. R East West			
Address 2:			_		Feet from	North / South Line of Section			
City:					Feet from East / West Line of Section				
Contact Person:			Foo	otages (Calculated from Neares	st Outside Section Corner:			
Phone: ()					NE NW	SE SW			
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					County: Well #: Lease Name: Well #: Date Well Completed: (Date) The plugging proposal was approved on: (Date)				
• ,	,	m: T.D							
		m: T.D	Piu	Plugging Commenced:					
		m:T.D	Plu	gging C	Completed:				
Show depth and thickness of a	all water, oil and gas forma	ations.							
Oil, Gas or Water Records			Casing Record (Surface, Conductor & Production)						
Formation	Content	Casing	Size		Setting Depth	Pulled Out			
Describe in detail the manner cement or other plugs were us						Is used in introducing it into the hole. If			
Plugging Contractor License #:			Name:	ə:					
Address 1:			Address 2:						
City:			Sta	te:		Zip:+			
Phone: ()									
Name of Party Responsible fo	r Plugging Fees:								
State of	County, _		, s	S.					
	(Print Name)			_ Emp	ployee of Operator or	Operator on above-described well,			

Submitted Electronically

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

Total Field Pumped



Perforated from

Company Representative

m /p.m.

NT REPORT			Acid Stare	No
Type Treatment	: Amt	Type Fluid	Sand Size	Pounds of Ban
Bkdovn	The state of the s		The second secon	·
	BbL/Gal			
	Bbl. /Gal	•		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Bbi. /Oal		······································	**************
Piuch	Bbi. /Cal		· · · · · · · · · · · · · · · · · · ·	
Treated from		fl. to	ft. No. f	L
from		rı. to	ft. No. f	
from		fl. to	ft. No. f	L
	of Oll/Water to l	losd Hole:		Bbi./G
. Pump Trucks.	No. Used: 8td	Вр	Tw	in
Auxiliary Equip	ment			
. Parker:	••••••	**************************************	Bet at	************
. Auxiliary Tools	****************		······	
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