

**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

1052513

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 #:			AI	PI No. 1	15					
OPERATOR: License #:					Spot Description:					
Address 1:			_		Sec Tw	vp S. R East West				
Address 2:				Feet from North / South Line of Section Feet from East / West Line of Section Footages Calculated from Nearest Outside Section Corner:						
City:	State:	Zip:+	_							
Contact Person:			Fo							
Phone: ( )					NE NW	SE SW				
Type of Well: (Check one)	Oil Well Gas Well	OG D&A Cathod	ic C	ountv: _						
Water Supply Well C	Other:	SWD Permit #:		Lease Name: Well #:  Date Well Completed:						
ENHR Permit #:	Gas Sto	orage Permit #:								
Is ACO-1 filed? Yes	No If not, is wel	I log attached? Yes			•	oved on: (Date)				
Producing Formation(s): List A	All (If needed attach another	r sheet)	by	/:		(KCC <b>District</b> Agent's Name)				
Depth to	Top: Botto	om: T.D	<sub>PI</sub>	uaaina	Commenced:					
Depth to	om: T.D									
Depth to	Top: Botto	om:T.D		333						
Show depth and thickness of a	all water, oil and gas forma	ations.								
Oil, Gas or Water	r 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						ds used in introducing it into the hole. If				
Plugging Contractor License #:										
Address 1:			Address 2: _							
City:			St	ate:		Zip:+				
Phone: ( )										
Name of Party Responsible fo	or Plugging Fees:									
State of	County, _		,	SS.						
	(8.1.11			En	mployee 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



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LOCATION Ocklay KS
FOREMAN P. + Houster

PO Box 884, Chanute, K\$ 66720 620-431-9210 or 800-467-8676

## FIELD TICKET & TREATMENT REPORT

620-431-9210	or <b>600</b> -467-867	6	•	CEME	ENT:				
DATE	CUSTOMER#	WE	LL NAME & NUM	BER	SECTION	TOWNSHIP	RANGE	COUNTY	
2-8-11 CUSTOMER	5659	Alber	3 4-17		17	175	230	ness	
	IN- CO. T		•		Supply the state of				
MaiLing Addre	H.Z.		-	TRUCK#	DRIVER	TRUCK#	DRIVER		
				1	456-710	chad sn			
CITY		ZIP CODE	┥ .	525 T127	Mailes Sla				
			<b>~~~</b>			Josh bert		:	
JOB TYPE P	TI A		010	J , `	L.,	Kelly Get			
		HOLE SIZE			лн <u> 4575′</u>	CASING SIZE & V	VEIGHT		
ASING DEPTH DRILL PIPE		<del></del>	TUBING				OTHER		
SLURRY WEIGHT SLURRY VOL. DISPLACEMENT DISPLACEMENT		OBJETT LE				In CASING			
		DISPLACEME		MIX PSI		RATE			
EMOTORS:	Fety Ma	eties i	Plug as	ande	se-	-			
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50 5Ks					. / 46		* -		
80 Ste		<del></del>	22	20 sk	5 6940 prod	8% (al, 14	#15/c-Con		
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ACCOUNT						Pata	ever	<u> </u>	
CODE		or units	. DE	SCRIPTION	of SERVICES or PRO	DOUCT	UNIT PRICE	TOTAL	
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5406	20		MILEAGE	<u> </u>			500	13250	
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<del></del>	<del></del>							4195.29	
VVI 3737					<u> </u>		SALES TAX	219.54	
VVI 4/4/		, //			200	R12	ESTIMATED	4415, 33	

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form