



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

**KANSAS CORPORATION COMMISSION 1056040**  
**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**

**Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202**



TICKET NUMBER 30779  
 LOCATION Chanute, KS  
 FOREMAN Fuzzy

PO Box 884, Chanute, KS 66720  
 620-431-9210 or 800-467-8676

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
5-3-11	1112	Hubert # 9	28	61 S	33 W	Leban

  

CUSTOMER	TRUCK #	DRIVER	TRUCK #	DRIVER
Pharos Energy	463	Wilms S.		
	558	Damon M.		
		Josh G.		

JOB TYPE ALP HOLE SIZE \_\_\_\_\_ HOLE DEPTH \_\_\_\_\_ CASING SIZE & WEIGHT 4 1/2  
 CASING DEPTH 1625' DRILL PIPE \_\_\_\_\_ TUBING 2 7/8 - 1625' OTHER \_\_\_\_\_  
 SLURRY WEIGHT 14.2 SLURRY VOL 1.40 WATER gal/sk 6.7 CEMENT LEFT in CASING \_\_\_\_\_  
 DISPLACEMENT \_\_\_\_\_ DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: Safety meeting on chaperone well service Pump 10 BBL water to clean tubing. Mix 175SK 60/40 499gal w/ 400# condensed hulls - circulate from 1625' to surface. Pull all the check B-side + formal cemented already. Mix 20SK cement to top of 4 1/2 casing

Thanks Fuzzy for u.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405A	1	PUMP CHARGE	790.00	790.00
5406	10	MILEAGE	50.00	500.00
5407	6.23	Ten Mileage Delivery (min)	135.00	410.00
1131	145	60/40	14.33	2080.2
118B	499#	Bentonite	1.24	1197.6
1105	400#	Condensed hulls	.52	208.00
		subtotal		3658.8
		consumables Sales Tax 7.5%		187.66
		subtotal		3846.46
		less 15% ad val		576.96
				3269.41
		241166		

SALES TAX \_\_\_\_\_  
 ESTIMATED TOTAL \_\_\_\_\_  
 AUTHORIZATION [Signature] TITLE Pro Sup. DATE 5-3-11

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.



**CONSOLIDATED**  
Oil Well Services, LLC

MAY 17 2011

MAIN OFFICE  
P.O. Box 884  
Chanute, KS 66720  
620/431-9210 • 1-800/467-8676  
FAX 620/431-0012

**REMIT TO**  
Consolidated Oil Well Services, LLC  
Dept. 970  
P.O. Box 4346  
Houston, TX 77210-4346

last will file

INVOICE Invoice # 241166

Invoice Date: 05/11/2011 Terms: 0/0/30,n/30 Page 1

ABERCROMBIE ENERGY  
5510 OIL CENTER ROAD SOUTH  
GREAT BEND KS 67530  
(620)793-8186

HUBERT #9  
30779  
28-11S-33W  
5-3-11  
KS

RECEIVED  
MAY 16 '11  
GB

Part Number	Description	Qty	Unit Price	Total
1131	60/40 POZ MIX	145.00	14.3500	2080.75
1118B	PREMIUM GEL / BENTONITE	499.00	.2400	119.76
1105	COTTONSEED HULLS	400.00	.5200	208.00

Sublet Performed	Description	Total
9999-130	CASH DISCOUNT	-361.28
9999-130	CASH DISCOUNT	-187.50

Description	Hours	Unit Price	Total
463 P & A OLD WELL	1.00	790.00	790.00
463 EQUIPMENT MILEAGE (ONE WAY)	10.00	5.00	50.00
558 MIN. BULK DELIVERY	1.00	410.00	410.00

VENDOR NUMBER \_\_\_\_\_  
 VOUCHER NUMBER \_\_\_\_\_  
 RECEIPT \_\_\_\_\_  
 ADD NUMBER AMOUNT  
1354050 \_\_\_\_\_  
HUBERUN \_\_\_\_\_  
PLUG WELL #9 \_\_\_\_\_  
 APPROVAL \_\_\_\_\_  
 VERIFIED ACCURACY \_\_\_\_\_ *MM*

Parts:	2408.51	Freight:	.00	Tax:	159.68	AR	3269.41
Labor:	.00	Misc:	.00	Total:	3269.41		
Sublt:	-548.78	Supplies:	.00	Change:	.00		

Signed \_\_\_\_\_ Date \_\_\_\_\_

BARTLESVILLE, OK 918/338-0808    EL DORADO, KS 316/322-7022    EUREKA, KS 620/583-7664    GILLETTE, WY 307/686-4914    OAKLEY, KS 785/672-2227    OTTAWA, KS 785/242-4044    THAYER, KS 620/839-5269    WORLAND, WY 307/347-4577