



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

KANSAS CORPORATION COMMISSION 1059476  
OIL & GAS CONSERVATION DIVISION

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 #: \_\_\_\_\_  
 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

**JOB LOG**

**SWIFT Services, Inc.**

DATE 06-08-11 PAGE NO. 1

CUSTOMER JOHN J JARRAH WELL NO. A-1 LEASE MICKEL JOB TYPE PTA TICKET NO. 19696

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1000							OP LOCATION CMT 455 SWS 60-40 PPSZ 4% GEL 10 SWS GEL, 900# HULLS 2 3/8 x 5/2 TO 4829, PPSZ @ 2950 8 5/8 275' TBL @ 4690 FT
	1030	40	0	/		0		START GEL 10 SWS LOADED
			7	-		500		
			26	-		400		CIRC OUT ANNS! DIR. WATER
			30	-				END GEL, START 75 SWS CMT w/ 300# HULLS
			51	-				END CMT
	1045		4	-				H2O, TBL ON SMALL VAC PULL TBL TO 2950 FT
	1150	40	0	/		0		START CMT 150 SWS CMT w/ 300# HULLS
			3	-		400		LOADED
			10	-				CIRC OUT ANNS WATER
			40	-				END CMT
	1200		2	-				H2O PULL TBL TO 1500 FT
	1240	40	0	/		0		START CMT 150 SWS CMT w/ 300# HULLS
			2	-		300		LOADED
			8	-				CIRC OUT ANNS WATER
			38	-				CIRC OUT ANNS CMT
			40	-				END CMT PULL TBL OUT
	1350		9.1	-		250		Hour on 8 5/8 35 SWS
	1410		6.0	-				TOP OFF 5/2 25 SWS 2 FT DOWN
								TOTAL CMT 435 SWS " HULLS 900 LBS " GEL 10 SWS = 30 LBS
	1500							JOB COMPLETE THANK YOU! DAVE JOSH, JOHN



Bad JTS



31-73 31-76  
31-64 31-76  
31-75  
30-66

# PIPE TALLY

## H2 PLAINS

NESS CITY, KS 785-798-3995  
ELLIS, GARDEN CITY, PRATT, GREAT BEND

Date of Tally \_\_\_\_\_

No. Jts. on Location \_\_\_\_\_

Tbg. Sz. \_\_\_\_\_ Thd. \_\_\_\_\_ Wt. \_\_\_\_\_ Gr. \_\_\_\_\_

Csg. Sz. \_\_\_\_\_ Wt. \_\_\_\_\_ Gr. \_\_\_\_\_

\* 31-72

WELL												DATE		
SIZE			WEIGHT			GRADE			THR.D.			CPLGS.		
Jt.	Length		Jt.	Length		Jt.	Length		Jt.	Length		Jt.	Length	
No.	Ft.	Ins.	No.	Ft.	Ins.	No.	Ft.	Ins.	No.	Ft.	Ins.	No.	Ft.	Ins.
1	30	60	31	31	76	61	31	75	91	31	75	121	31	72
2	31	74	32	31	74	62	31	72	92	31	71	122	31	75
3	31	71	33	31	75	63	31	73	93	31	75	123	31	75
4	31	70	34	31	22	64	31	73	94	31	73	124	31	77
5	31	69	35	31	74	65	31	71	95	31	75	125	32	45
6	31	70	36	31	73	66	31	73	96	31	75	126	31	75
7	31	71	37	31	72	67	31	73	97	31	72	127	31	76
8	30	62	38	31	72	68	31	75	98	31	75	128	31	75
9	31	68	39	31	73	69	30	30	99	31	73	129	31	46
10	31	61	40	31	75	70	31	73	100	31	75	130	31	70
11	31	70	41	31	70	71	31	30	101	31	53	131	31	73
12	31	70	42	31	75	72	31	71	102	31	73	132	31	75
13	31	69	43	32	45	73	31	73	103	31	73	133	31	72
14	31	73	44	32	50	74	31	71	104	31	72	134	31	75
15	31	72	45	31	55	75	31	72	105	31	73	135	31	53
16	31	72	46	31	63	76	31	70	106	31	72	136	31	75
17	31	72	47	31	46	77	31	71	107	31	75	137	31	73
18	31	72	48	31	56	78	31	73	108	31	75	138	31	75
19	31	53	49	31	75	79	31	72	109	31	73	139	31	76
20	31	73	50	31	73	80	31	73	110	31	73	140	31	77
21	31	75	51	31	75	81	31	76	111	31	72	141	31	72
22	31	75	52	31	74	82	31	73	112	31	71	142	31	60
23	31	74	53	31	73	83	31	75	113	31	73	143	31	75
24	31	75	54	31	73	84	31	73	114	31	61	144	31	73
25	31	73	55	31	70	85	31	73	115	31	76	145	31	72
26	31	73	56	31	73	86	31	71	116	31	73	146	31	73
27	31	75	57	31	73	87	31	74	117	31	73	147	31	70
28	31	75	58	31	73	88	30	67	118	31	73	148		
29	31	75	59	31	73	89	31	71	119	31	75	149		
30	30	88	60	31	72	90	31	73	120	31	96	150		

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14  
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TALLIED BY:

GRAND TOTAL