

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

1077286

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 #:				API No. 1	5		
Name:				Spot Desc	cription:		
Address 1:					Sec	Гwp S.	R East West
Address 2:					Feet from	North /	South Line of Section
City:	State:	Zip:+			Feet from	East /	West Line of Section
Contact Person:				Footages	Calculated from Near	est Outside S	Section Corner:
Phone: ()					NE NW	SE	sw
Type of Well: (Check one)	Oil Well Gas Well	OG D&A Cathod	lic	County:			
Water Supply Well Other: SWD Permit #: ENHR Permit #: Gas Storage Permit #:				Lease Name: Well #:			
				Date Well Completed:			
s ACO-1 filed? Yes	No If not, is well	l log attached? Yes	No				(Date)
Producing Formation(s): List A	All (If needed attach another	r sheet)		by:			(KCC District Agent's Name)
Depth to	o Top: Botto	m: T.D		Plugging	Commonand:		,
Depth to	o Top: Botto	m: T.D		Plugging Commenced:			
Depth to	o Top: Botto	m:T.D		r lugging v	Sompleted		
Show depth and thickness of	all water, oil and gas forma	ations.					
Oil, Gas or Water	r Records		Casing I	Record (Surf	ace, Conductor & Prod	uction)	
Formation	Content	Casing	Size		Setting Depth	Pulled Ou	ut
			+				
cement or other plugs were u	sed, state the character of	same depth placed from (bot	ttorn), to (top) for each	i piug set.		
Plugging Contractor License #:			Name: _				
Address 1:			Address	2:			
City:				State:		Zip:	+
Phone: ()				-			
Name of Party Responsible fo	or Plugging Fees:						
State of	County			SS.			
-					alama at C	. 🗆 🖺	tananahara da 9 1 9
	(Print Name)			Em	ipioyee of Operator of	Operat	tor 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

Hurricane Services, Inc. 3613 A Y Road Madison, KS 66860 Office # 620-437-2661 Brad Cell # 620-437-6765

Ticket Number_	100018	
Location	Madison	
Foreman B	rad Butter	

Cement Service ticket

Date	Customer #	Well Name & Number	Sec./1	Township/Range	County
1-18-12		Knahe M # 5	10-	14-22E	Johnson
Customer Konsas Resource Exploration & Development		Mailing Address	City	State	Zip

			Charles and the Charles of the Charl	The state of the s
lob Type: Plug To Abandon			Truck#	Driver
			201	Kelly
Hole Size: ?	Casing Size: 41/2"	Displacement:	202	Jerry
lole Depth:	Casing Weight:	Displacement PSI:	104	Danny
Bridge Plug:	Tubing:	Cement Left in Casing:		
acker:	PBTD:			
Quantity Or Units	Description of	of Servcies or Product	Pump charge	665.00
0 -	Mileage > 5th well of 0	\$3.25/Mile	N/C	
147 SACKS	60/40 Pozmino cemen		10.90	1602.30
505 /65.	Gel 4%		,30	151,50
	Hulls		25.00	5.00
2.5 Hous	water Truck		84.00	210.00
6.57 Tons	Bulk Truck > 35 miles		\$1.15/Mile	264.44
	Plugs			
			Subtotal	2898.24
			Sales Tax	130,15
			Estimated Tota	

	Sales Tax /30,15
	Estimated Total 3028,39
Remarks: Rig unto 1" Pipe - washed I" down on Backside To 285, mixed	I CEMENT Till we got good cement
TETWAS To Seyface > mixed with 10 Bbls water = 60 sks. cement	
Rig 45To 41/2" casing, Pumped into well with 200 BI - STAT mixing c	ement - we had 155Ks comment mixed The
Add Hulls To cement with Plassue at 150 PSI - mixed 720Ks. Cement behind	Hulls - Pressur up To 300 PSI -
got communication) Shut about - Job complete with casing & Backside	HERENE NEW HERENE
"Thank you"	
	iteracul he Brad

Customer Signature