

**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

## 1077301

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 #:			A	NI No.	. 15	
Name:				pot De	escription:	
Address 1:			-		Sec Tw	/p 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:			F	ootage	es Calculated from Neares	st Outside Section Corner:
Phone: ( )					NE NW	SE SW
Type of Well: (Check one)	Oil Well Gas Well	OG D&A Cathod	ic C	County		
Water Supply Well	Other:	SWD Permit #:		-		Well #:
ENHR Permit #:	Gas Sto	rage Permit #:				
Is ACO-1 filed? Yes	No If not, is well	log attached? Yes				oved on: (Date)
Producing Formation(s): List A	All (If needed attach another	sheet)	b	y:		(KCC <b>District</b> Agent's Name)
Depth to	o Top: Botto	m: T.D	_	Pluggin	na Commenced:	
Depth to	o Top: Botto	m: T.D				
Depth to	o Top: Botto	m:T.D	'	luggiii	ig Completed.	
Show depth and thickness of	all water, oil and gas forma	ations.				
Oil, Gas or Wate	r Records		Casing Rec	ord (S	urface, Conductor & Produc	etion)
Formation	Content	Casing	Size		Setting Depth	Pulled Out
cement or other plugs were u	sed, state the character of	same depth placed from (bot	ttom), to (top	) for ea	ach plug set.	
Plugging Contractor License #	#:		Name:			
Address 1:			Address 2:			
City:			S	tate:_		Zip:+
Phone: ( )						
Name of Party Responsible for	or Plugging Fees:					
State of	County, _		,	SS.		
	(Print Name)			E	Employee 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

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

Ticket Number	100015	
Location	Madison	
Foreman	Brad Butter	

## **Cement Service ticket**

Date	Customer #	Well Name & Number	Sec./Township/Range		County
1-18-12		Knabe A #3 W			Johnson
Customer Kensas Resou	ices Exploration & Develo	Mailing Address	City	State	Zip

ob Type: Plu	19 To Abandon		Truck #	Driver	
			201	Kelly	
Hole Size:	Casing Size:	Displacement:	202	Jerry	
lole Depth:	Casing Weight:	Displacement PSI:	203	James	
Bridge Plug:	Tubing: 21%" 812> 750-	Cement Left in Casing:	104	Danny	
acker:	PBTD: Pufs: 700				
Quantity Or Units	Description of	f Servcies or Product	Pump charge	665.00	
0-	Mileage > 200 well	of Doy 1	\$3.25/Mile	NIC	
35 SACKS	60/40 Pozmin coment		10.90	381.50	
120 16s.	Gel 4%	.30	36.00		
	Hu11s	25.00 Bas	5.00		
2.5 Hows	water Truck		84.00 Auth.	210.00	
/.57 Tons	Bulk Truck > 35 miles	\$1.15/Mile	63,19		
	Plugs				
			Subtotal	1360,69	
			Sales Tax	31.26	
			Estimated Total /39/.95		

Remarks: Rig up To 278" Tubing, Pumpred into well with 650 RSI, STEPT Mixing cement - We had 12 sks cement

Mixed - Add Hulls To cement with Pressure of 500 PSI - Mixed 23 sks cement behind Hulls - Pressure got up to 1300 PSI

Shut down Pressure of 450 PSI - Stagged cement - Well Holding 1000 PSI

Close Tubing in with 1000 PSI

Job complete - Tear down

"Thank you"

Customer Signature