

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

1078068

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	PI No.	15		
Name:				pot De	scription:		
Address 1:			_		Sec T	wp S. R	_ East West
Address 2:			_	Feet from North / South Line of Section			
City:				Feet from East / West Line of Section			
Contact Person:			F	ootage	s Calculated from Near	est Outside Section C	orner:
Phone: ()					□ NE □ NW □	SE SW	
Type of Well: (Check one)	oil Well Gas Well	OG D&A Cathod	ic c	ounty:			
Water Supply Well C	Other:	SWD Permit #:		•	ame:		
ENHR Permit #:	Gas Sto	rage Permit #:			ell Completed:		
Is ACO-1 filed? Yes	_	l log attached? Yes			gging proposal was appi		
Producing Formation(s): List A	II (If needed attach another	sheet)			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Depth to	Top: Botto	m: T.D			g Commenced:	•	,
Depth to	Top: Botto	m: T.D			Completed:		
Depth to	Top: Botto	m:T.D	「	iuggiriç	g Completed		_
Show depth and thickness of a	all water, oil and gas forma	ations.					
Oil, Gas or Water	Records		Casing Rec	ord (Su	rface, Conductor & Produ	uction)	
Formation	Content	Casing	Size		Setting Depth	Pulled Out	
Describe in detail the manner cement or other plugs were us	. 00						
Plugging Contractor License #	:		Name:				
Address 1:			Address 2:				
City:			S	tate:		Zip:	+
Phone: ()							
Name of Party Responsible fo	r Plugging Fees:						
State of	County			SS			
	Oounty, _						
	(Print Name)			E	mployee of Operator or	Uperator on ab	ove-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_	100054	
Location	Madison	_
Foreman	Brad Butle	

Cement Service ticket

Date	Customer#	Well Name & Number	Sec./	Township/Range	County
3-28-12		Hendrickson #C-1	17-	255 - 9E	Greenwood
Customer		Mailing Address	City	State	Zip
DaysTar	Petroleum Inc.				

Job Type: P/us	TALL		Truck #	Duivan
Job Type: 1749	To Albandon	<u> T</u>		Driver
Hole Size: 7%"	Casing Size: 51/2" - 2332 -	Displacement:	201	Kelly
Hole Depth:	Casing Weight:	Displacement PSI:	105	Jesus Jesus
Bridge Plug:	Tubing:	Cement Left in Casing:	102	Danny
Packer:	PBTD:		100	CLONY
Perso 2209	1'To 2214, 2269'To 2281"			
Quantity Or Units	Description of S	Servcies or Product	Pump charge	790.00
	Mileage Trkow Location		\$3.25/Mile	Ne
0.7				
87 SACKS	60/40 Poemix cement		10.90	948,30
300 /bs	Gel 470	***************************************	,30	90.00
650 1bs	GeL > Spacus bi	Tween Pluss	,30	195.00
				7.70
- · · · · ·			0.4	A
3 Hos.	water Truck		84.00	252.00
3 Hrs	water Truck > STORD	by	55,00	165,00
	Restationswivel (wash A	Hood)		50.00
4.21 Tons	Bulk Truck		\$1.15/Mile	75000
10113	Bulk Truck > Minimum ch	large		250.00
	Milege ON TIK. "290		1.50	22.50
	Plugs			-
			Subtotal	2762.80
			Sales Tax`	90.03
	The state of the s		Estimated Tota	
Domonko C - 1	V 0 //			7-0:-

marks: SET CEMENT Pluss o	25 Sollowing Along with Gel Spaces between Plugs
	20 sks of 2148
	20 sks of 2148 - 20 sks of 900 -
	47 Sts of 150 To Surface
	•
	"Thank you"
	witnessed by John.

Customer Signature