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

KANSAS CORPORATION COMMISSION

OIL & GAS CONSERVATION DIVISION

1082354

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. 15
Name:	Spot Description:
Address 1:	
Address 2:	Feet from North / South Line of Section
City: State: Zip: +	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	NE NW SE SW
Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic Water Supply Well Other: SWD Permit #: SWD Permit #: SWD Permit #: ENHR Permit #: Gas Storage Permit #: Gas Storage Permit #: SWD Permit #: SWD 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.	County: Well #: 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)		tion)	
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:	Address 2:			
City:		State:	Zip:	+		
Phone: ()						
Name of Party Responsible for Plu	ugging Fees:					
State of	County,	, SS.				
	(Print Name)	Employee of Operato				
		atotomonto, and matters barain contained, and the l				

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

al Tax I.D.# 20-28861 P.O. Box 32 Russell, I	KS 67665 N	o. 5469		
Graham K	State On Location	Finish 10:30 pm		
	Mine Rd, won Red	line Rel to 355H.		
Owner IN . 31	E. N/Tato	11-22-113-1		
To Quality Oilwell C	ementing, Inc.	nun - Ellenschmenn -		
You are hereby requirementer and helpe	uested to rent cementing equipmer to assist owner or contractor to	o do work as listed.		
Charge SL 11	1 Resources			
To Sheld	7 mesona ces			
Street	Choto			
City	State			
	The above was done to satisfaction and supervision of owner agent or contractor. Cement Amount Ordered $250 \le 60140 - 4\% 621 - 4\# 5.5$			
ud Cement Amount Or	dered a so sx 60140	4% Gel 4#F,S,		
151	7	- ICI CUMBERCOT		
Common / 50	2	<u> </u>		
P02. WIX	·			
Gel. 9				
Calcium		CALMENT COMMENT		
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Salt	TT			
Flowseal 624	t	<u>e e angele a i</u>		
Kol-Seal	Kol-Seal			
Mud CLR 48	Mud CLR 48			
CFL-117 or CD110	CFL-117 or CD110 CAF 38			
Sand				
Handling 259	Handling 259			
Mileage	Mileage			
- The second	OAT EQUIPMENT			
Guide Shoe	Guide Shoe			
Centralizer	n oʻzihyt i	THE PLAN		
Baskets				
AFU Inserts		entre abiente		
	Float Shoe			
Latch Down				
SX 1- DIM	hile aluce	A CHORESSION PR		
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