

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

1082569

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 #:			AP	I No. 15							
Name:											
Address 1:					Sec Tw	/p S. R East West					
Address 2:					Feet from	North / South Line of Section					
City:	State:	Zip:+	_								
Contact Person:			Foo	otages Calc	ulated from Neare	st Outside Section Corner:					
Phone: ()					NE NW	SE SW					
Type of Well: (Check one)	Oil Well Gas Well	OG D&A Cathod	ic Co	untv:							
Water Supply Well	Other:	SWD Permit #:		-		Well #:					
ENHR Permit #:	Gas Sto	orage Permit #:									
Is ACO-1 filed? Yes	No If not, is wel	I log attached? Yes			•	oved on: (Date)					
Producing Formation(s): List A	All (If needed attach another	r sheet)	by:			(KCC District Agent's Name)					
Depth to	Top: Botto	om: T.D	Plu	ıaaina Com	menced:						
Depth to	Top: Botto	om: T.D		00 0							
Depth to	Top: Botto	om:T.D		.999							
Show depth and thickness of	all water, oil and gas forma	ations.									
Oil, Gas or Water	r Records		Casing Record (Surface, Conductor & Production)								
Formation	Content	Casing	Size	S	etting Depth	Pulled Out					
Describe in detail the manner cement or other plugs were us						ds used in introducing it into the hole. If					
Address 1:			Address 2:								
City:			Sta	ite:		Zip:++					
Phone: ()											
Name of Party Responsible fo	or Plugging Fees:										
State of	County, _		, s	s.							
	/B			Employ	ee 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

BASIC 10244 NE Hwy. 61 P.O. Box 8613 Pratt, Kansas 67124

FIELD SERVICE TICKET

1718

A

0 000			SERVICES Pho PING & WIRELINE	ne 620-6	72-1201			DATE	TICKET NO.					
DATE OF 3-1	7-20	12 0	DISTRICT PRATT, K	ls.		MEN 🖎 C	VELL F	PROD [] INJ	I 🗆 WDW	□ S	USTOMER RDER NO.:			
CUSTOMER Z	LLING, INC	LEASE E	1.	EC. 1.	NC.		WELL NO.	-/4						
ADDRESS		COUNTY	TAF	FORD	STATE	K	5,							
CITY	STATE	SERVICE CR	EW LE	SLEY, M	PARQUEZ	14	AWRENCE							
AUTHORIZED B				HRS		JOB TYPE: (
EQUIPMENT	#	HRS	EQUIPMENT#	JIPMENT#	HRS	TRUCK CAL	20	12	PM /0:0	20				
19889-19843								ARRIVED AT	TJOB 3-16 RATION 3-1		2 AM 4:2	20		
19832-210	210		-					FINISH OPE		7-10	AM 5	20		
					- 1		RELEASED	5		AM (0,0				
				1			1	MILES FROI	M STATION TO	WELL	45	14.1		
become a part of th	of and only those terms and of the written consent of an off	ervices LP,		IGNED:	Zin	, CONT	RACTOR OR AG	ENT)						
REF. NO.	0	.W	IATERIAL, EQUIPMENT	AND SER	VIÇES US	DED .	CV	QUANTITY	UNIT Phil) <u>_</u>	3 IEO	100		
PIME	750	N/M	ON CEMEN	T			SK	175.		- X	2,800			
CC 102	CEL	4-	FLAKE	inite.			16	88			325	(ac		
CC 109	CAL	CIO	M CHLORIDE		- F7	//	16	825			Elde	25		
CF 105	TOI		BUSER CMT. H	WG,	878		EA	100		-	200	90		
EIGS	DICI	行信	MUFAGE				WI TIP	42		+	191	告		
E 101	HEA	VY	EQUIPMENT	MIL	EAGE		MI	90			630	00		
€ 113	Buc	KD	-LIVERY CHA	RGE			TM	743			1, 1881	00		
CE 201	DEI	TH	CHARGE 50	1-10	20-		HR	1-4		-	1,200	20		
CEEOU	DI	Sa C	ONTAINER CH	LHAK	175	-	DK-	350		+	350	~		
503	SE	ZVIC	E SUPERIUS	VR.			EA				175	00		
			CR. Affect (B) (Miles											
								1		-				
					-					-				
					-									
										10	6	00		
CH	EMICAL /	ACID DA	ATA:			ı			SUB T	OTAL,	9,235	7		
				3		RVICE & EQUIP	MENT		X ON \$		1			
					MA	TERIALS		%ТА	X ON \$	OTAL				
										OTAL				

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY:

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

SERVICE

REPRESENTATIVE

FIELD SERVICE ORDER NO.



TREATMENT REPORT

Customer /	D DOIL	11/2	10	Lease No.					Date					
Lease Z	1 4 1	NIP	()(·	Well # /_ /4				3-19-2012						
Field Order #	Station	PRATO	Ks.		Casing	5/8" Depth	1	ZD	State K5					
Type Job CNW - 85/8"5, P.						Fermation	Bla	5	Legal D	escription_	1-14			
PIPE DATA PERFORATIN				IG DATA	FLUID	USED		TRI	EATMENT	RESUME				
Casing Size	asint/Size ₁ / Tubing Size Shots/Ft			PMT 10955HS A-CON			RATE PRESS			ISIP				
Depth-9//	Depth	From	То		Pre Pad	2.47 CUFT	Max			5 Min. 10 Min.				
Volume, BB	Volume	From	_	117-	Pad 1755K5 (COMMON	Min	Min						
Max Press	Max Press	From	To		Frac /.	20 CUFT	Avg			15 Min.				
Well Connection	Annulus Vol		То)			HHP Usec			Annulus	Pressure			
Plug Depth/	Packer Dept		Te)	Flush 53	.5 H2	Gas Volun	те	Total Load		ıd			
Customer Rep	resentative J	m-PETA	RUMARK	Statio	n Manager 🔎 .	SCOTT		Treater	KILE	SLELJ				
Service Units	37586 1	1889	1984	3 198	32 21016	>								
Driver Names	ESLEY 1	MARQUEZ		CAWRE	ENCE		E							
Time	Casing Pressure	Tubing Pressure	Bbls. P	umped	Rate		Service Log							
12:00 AM	5990					UNL	OCATI	WN -			ETING			
3.00Am		n				RUND	/ JTS.	8%	XX#	259.	70			
3.45Am					-	656	04/	30710	ist)					
1:00AM						HOOK	UPTO	099	/ISRE	AK CIR	C. W/RIG			
4:25AM	200		5	5	6	H20	HHER	1/2		200				
4: 2loAm	200		7	7	(0	MIXI	155K5.	A-CO		JPH	2			
4:39Am	100		3	1	6	MILIT	155KS	COMI	non Ca	1516	PHG			
4:45am						SHUT	DOWN	<u> </u>	KODI	100				
4:48Am	0			2	5	STHE	TD	15PCF	CENTE	· NT				
4:57Am 5:00Am	200		4	5	3	Sua	NKF	ITE	01.00		200-1-10			
5:00Am	250		53	.5	_3_	PLUC	7100	JV1-0	CLOSE	DIM	HTHEAL			
	- '-					CIRC.	THR	U JO.	5		ATHEAD			
						CIRC	O BI	SL 10	217/1					
								1 2-	7 6	N	T			
								201	COM	WELL	ESCEY			
(1)									1. HAIL	185	150150			
									KE	VEN!	BULY			
						-								
-			F	-					-		19			



10244 NE Hwy. 61 P.O. Box 8613 Pratt, Kansas 67124 Phone 620-672-1201

FIELD SERVICE TICKET 1718 05612 A

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

	PRESSUF	RE PUMF	PING & WIRELINE		DATE TICKET NO								
DATE OF JOB	77-1	5 D	ISTRICT KONSO	S	NEW OLD PROD INJ WDW CUSTOMER ORDER NO.:								
CUSTOMER	0	0	illing In		LEASE L 1 C 1-14 WELL NO.								
ADDRESS			0	×	COUNTY S + offered 14-2-STATE KANS.								
CITY			STATE		SERVICE CREW Allen, M. K. STEVE								
AUTHORIZED B	Y	1.5			JOBTYPE: P+A CNW								
EQUIPMENT	T#	HRS	EQUIPMENT#	HRS EC	UIPMENT#	HRS	HRS TRUCK CALLED 7 -23-12 PM TIME						
# 24443				ARRIVED AT	JOB J-23	-12 F	M Z	O					
19832-19				START OPE	3 013		P 90	0					
11222	0,0	2/1					FINISH OPE	RATION 3-2		AM PM	30		
		F					RELEASED	3-23		AMP / 2	0		
							MILES FROM	M STATION TO W	ELLY >	5-101/-	-5		
products, and/or su	polies inc	rized to e	FRACT CONDITIONS: (This obsecute this contract as an agof and only those terms and of the written consent of an office.)	gent of the customer. conditions appearing of	As such, the under on the front and bac	signed agre k of this do	ees and acknow cument, No addi SIGNED:	ledges that this contr	rms and/o	r conditions	shall		
FEF. NO.		M	IATERIAL, EQUIPMENT	AND SERVICES U	SED	UNIT	QUANTITY	UNIT PRICE	3	S AMOUN	Т		
CP103	60	140	P02			SK	200		B	2400	00		
	/		- 1			1/							
CC142	01	11	Ince			15	344-		B	12	2/2		
C 200	Ce	mer	x7 6 ell			12	2.44			40	00		
£100	in	1	· lease cha	P. U.		Mi	45		K	191	25		
FIOL	Hea	1.254	Frul mil	ease cles		mi	90	X 11 -	5	630	0 (
6113	Bu	119	Not Chr.	2		Tm	387		\$	619	20		
CE 704	Do	oth	Chg. 300	1. 4000		Shows		29	-	2160	00		
CF240	Ste.	nich	of Im. xing	Secure	shy	5/2	200		4	280	00		
C	-	-	-	C . + C1	/ / =	60	7 1		el	125	00		
5003		W C P	Jef Plancol	de la Carta.	18 000 600	2.0		-		4 3 30	-		
				75-		_							
	-				200								
					13			SUB TOT	AI				
СН	EMICAL	ACID DA	ATA:					4/	DE	53/3	.9		
		ERVICE & EQUI	PMENT		X ON \$	- 200	62-ACTIONS						
				. M	IATERIALS	Lq., I u	%TA	X ON \$	0.1				
								тот	AL				
									I.		f.		
		0	1 1	THE ABOVE 111	EDIAL AND OFF	OVICE		Ž			1.		
SERVICE REPRESENTATIV	VE /	100	f(E) and	THE ABOVE MAT ORDERED BY CU	ISTOMER AND SEP	RECEIVE	D BY:	1	4				

FIELD SERVICE ORDER NO.

GLOUD LITHO - Abiene, TX



TREATMENT REPORT

		,										
Customer	Drillin	INC	Lease No.				Date					
Lease	100	NC	Well#	14		3-23-12						
Field Order #	order # Station Pratt Ks			Casing Depth			County	fford State				
Type Job P	+A			CNW	Formation	5800	1	Legal De	escription ススー	14		
PIPE	DATA	PERFORA	ATING DATA	NG DATA FLUID USED			TREATMENT RESUME					
Casing Size	Tubing Size	Shots/Ft	200	Acid. 60	140 P	12 4	RATE PR	ESS 1/c/	JSIP_,	F 13.2 H		
Depth	Depth	From	То	Pre Pad				1	5 Min.			
Volume	Volume	From	То	Pad		Min			10 Min.			
Max Press	Max Press	From	То	Frac		Avg			15 Min.			
Well Connection	Annulus Vol.	From	То			HHP Use			Annulus I	Pressure		
Plug Depth	Packer Depth	From	То	Flush	tr.	Gas Volu	me		Total Load			
Customer Repr	esentative M	TP"	Station	Manager A	15		Treater	Hen				
Service Units	28443 1	9903 19	905 198.	3224010								
Driver Names	Allen 1	ike Ma	Hal 5+	er youry								
Time		Tubing ressure Bb	ls. Pumped	Rate			Ser	vice Log				
230 A	41 3				ON LO	c. Di	SCUSE	rately	Soty	2 PlANTO		
			31		RUNN.	NS 6	J.P. B	nck	inh	1012		
1,71					1st P	lus -	3790-	w/a	5051	Ks.		
915			10	3	Pump	101	3B1s -	H'JC)	1		
			12.	_3	Mix +	pum	P50.	s Ks	cont			
		- 7	4	3	Pump	2. 4	BBL	H20	<i>II</i>			
		<i>,</i>			Disp	w/	4815	31 m	ud.			
1045					2nd 1	7/69	860	w/5	01/	2		
		-	7/0	_3	Rump	10-13	BISTA	20		1 - N- Jr. 1 - N- 1		
-			12.7	7	MIX	+ pu	BBL	051	3 CA	1.		
					Pame	01	13 15 1	SMO	× •			
				7	200	7145	BB1 1	120	50	sks cont		
			177	7	and i'v	10.	SBI	V	۴	+ 5		
			1	-3	P	2 /	BRI	ND	0	1 t		
11.25					4+4	Plus	60'	Tusu	e face	20 sKc		
1130			7 1/2		5+6	Pluc	30	sks	RAT	Hule		
1145			1/2		Was	440	Fauip	a RA	Kw.			
1230					VI06	Chm	plete					
- 3-4 W					tha	NKS	DIL	w. N	1iK+			
				· de	64.5			- F				
						100						