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** 

1082845

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:	Sec Twp 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 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 #:       No         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.       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:
Depth to Top:         Bottom:T.D            Depth to Top:         Bottom:T.D	Plugging Completed:

Show depth and thickness of all water, oil and gas formations.

Oil, Gas or Water Records		Casing Record (Surface, Conductor & Production)			
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:						
City:		State:	Zip:	+				
Phone: ( )								
Name of Party Responsible for Plug	gging Fees:							
State of	County,	, SS.						
	(Print Name)		or or Operator on abo					
haing first duly sugars an asthe says	That I have be availed as a fith a factor	statements, and matters barain contained, and the l	on of the chour departhed	wall in an filed and				

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

CONSOLIDATED Oil Well Services, LLC	<b>REMIT TO</b> Consolidated Oil Well Ser Dept. 970 P.O. Box 4346 Houston, TX 77210-	MAIN OFFICE P.O. Box 884 Chanute, KS 66720 620/431-9210 • 1-800/467-8676 Fax 620/431-0012		
INVOICE ====================================			Invoice #	248847 ====== ge 1
KINNEY OIL COMPANY 1401 17TH ST, SUITE 870 DENVER CO 80202 (303)295-1770	HAMI 364 36-2	4ES 1-36 L1 25-13E )5-12		
				anna anna anna anna anna anna anna ann
Part Number Descrip 1131 60/40 P 1118B PREMIUM Description 467 P & A NEW WELL 467 EQUIPMENT MILEAGE (ONE 502 TON MILEAGE DELIVERY	OZ MIX GEL / BENTONITE	130.00 448.00	.2100 Unit Price 1030.00 4.00	Total 1631.50 94.08 Total 1030.00 680.00 1273.40

V20763 0113100017 7360

 Parts:
 1725.58 Freight:
 .00 Tax:
 125.97 AR
 4834.95

 Labor:
 .00 Misc:
 .00 Total:
 4834.95

 Sublt:
 .00 Supplies:
 .00 Change:
 .00

Signed					I	Date	
BARTLESVILLE, OK	EL DORADO, KS	EUREKA, KS	Ponca city, Ok	OAKLEY, KS	OTTAWA, KS	THAYER, KS	GILLETTE, WY
918/338-0808	316/322-7022	620/583-7664	580/762-2303	785/672-2227	785/242-4044	620/839-5269	307/686-4914

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O Box 884, C	hanute, KS 6672 or 800-467-8676		_D TICKET	& TREA	TMENT REF T APJ #	PORT 15-131-2023,	/	
DATE	CUSTOMER #		NAME & NUME		SECTION	TOWNSHIP	RANGE	COUNTY
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ACCOUNT	QUANIT	Y or UNITS	Thanks D		of SERVICES or F	Crew M		TOTAL
CODE				<u></u>			1030.00	1030.00
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5406	/ 7	0	WILLEAGE	2000		<u></u>		
1/7/	120	SKS	60/40	Pormi	X Cemen	L-	12.55	1631.50
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AUTHORIZTI	ON	-		TITLE			DATE	

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form