

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

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:					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 Cathoo	dic						
Water Supply Well Other: SWD Permit #:					Lease Name: Well #:				
ENHR Permit #:	Gas	Storage Permit #:		Date Well Completed:					
Is ACO-1 filed? Yes	No If not, is	well log attached? Yes	No	The plugging proposal was approved on:					
Producing Formation(s): List	All (If needed attach and	other sheet)		by: (KCC <b>District</b> Agent's Name)					
Depth	to Top: E	Sottom: T.D		Plugging Commenced:					
Depth	to Top: E	Sottom: T.D							
Depth	to Top: E	Sottom:T.D		Plugging	Completed:				
Show depth and thickness o	f all water, oil and gas f	ormations.							
Oil, Gas or Wate	er Records		Casing R	Record (Surface, Conductor & Production)					
Formation	Content	Casing	Size		Setting Depth	h Pulled Out			
		lugged, indicating where the muer of same depth placed from (bo							
Plugging Contractor License #:									
Address 1:			Address	2:					
City:				State:		Zip:	_+		
Phone: ( )									
Name of Party Responsible	for Plugging Fees:								
State of	County,			_ , SS.					
					nployee of Operator o	r Operator on above	a-described well		
	(Print Nam			_ <u> </u>	inhioyee of Operator o	Delator on above	-uescribed 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



LOCATION D + tau q
FOREMAN Alan Made

PO Box 884, Chanute, KS 66720 620-431-9210 or 800-467-8676

## FIELD TICKET & TREATMENT REPORT CEMENT

				<del></del>				
DATE	CUSTOMER#	WELL	NAME & NUM	BER	SECTION	TOWNSHIP	RANGE	COUNTY
7-9-12	1828	Colour T	rust Ex	772	NE 21	22	17	CF
CUSTOMER	وسو		,	(853)	A subject of the subj	delle (C-150), tale, a	ing Marine .	<b>高品牌等</b> 第二
MAILING ADDRE	Energ	· <del>/</del> — —		16000	TRUCK#	DRIVER	TRUCK#	DRIVER
0 2	<u> </u>	<i>'</i>			210	//an/lan	Ty Ty	Meet
CITY	Oox 3	88 ISTATE	ZIP CODE	-	368	MAIN	MM	
Ipla		155	66749		370	Ke: Car	KC	ļ
	1	HOLE SIZE			16127	Set Juc		<u> </u>
JOB TYPE_D					H <u>1437</u> 23/8	CASING SIZE & W		
CASING DEPTH		DRILL PIPE					OTHER	
	T			WATER gal/s	3K	CEMENT LEFT IN	-	
	er a company a succession and a successi		-	MIX PSI	- X - A/1.	RATE 7 6		
						xed + Prou		
Circle		70340	rrace.	waix		logger		+ pump
13 GK 3		mant y			Pulled	<u>casing</u>	0 1080	
Pumped	15 3 K			LOGO P	// Ed >	abine)	0 500	
Nixel	+ pumper		cemen	ru/	lear the	Ding Tp	7500	f://od
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Washea	oux 1	u Bi'ns			21 -1- 1 /	1		
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1 NOT TON	W. W.	3, COLT	Lulling	<del>}</del>			Marke	ars.
ACCOUNT			$\overline{}$	· · · · · · · · · · · · · · · · · · ·				· ·
CODE	QUANITY	or UNITS	DE	SCRIPTION o	f SERVICES or PR	ODUCT	UNIT PRICE	TOTAL
5405N	)		PUMP CHARG	SE.				1030,00
5406	5	0	MILEAGE					200.00
5407	Mi	n	DO SOY	W tou	miles			ر مسر وسنر
5502C	3	40	80	1161				330,00
			<b>———</b>					450.00
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1118,13	40	84	60/	1	ceman	4-		886 95
11183	70	0#	gelle	1 /2 -	le			85.68
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Pavin 3737			<u> </u>				SALES TAX	70,54
	T +	, 1.	///			. •	ESTIMATED TOTAL	322017
AUTHORIZTION_	/elt.	Such	rs.	TITLE			DATE 7/	2/200
acknowledge :	that the nave	m Tormo unio	es specifica		In welling	- 4	-	12012

I acknowledge that the payment forms, 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

<u>251178</u>