1091016

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

WELL PLUGGING RECORD

K.A.R. 82-3-117

Form CP-4
March 2009
Type or Print on this Form
Form must be Signed
All blanks must be Filled

OPERATOR: License #: 33051
Name: C. D. OIL, Inc.
Address 1: 3236 VIRGINIA RD
Address 2:
City: WELLSVILLE State: KS Zip: 66092 + 8563
Contact Person: Clay Hughes
Phone: (913) 963-9127

Type of Well: *(Check one)* ☑ Oil Well ☐ Gas Well ☐ OG ☐ D&A ☐ Cathodic
☐ Water Supply Well ☐ Other: ☐ SWD Permit #:
☐ ENHR Permit #: ☐ Gas Storage 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.
Depth to Top: Bottom: T.D.
Depth to Top: Bottom: T.D.

API No. 15 - 15-059-01405-00-00
Spot Description:
SE - SW - NW - NE Sec. 20 Twp. 16 S. R. 21 ☑ East ☐ West
4150 Feet from ☐ North / ☑ South Line of Section
1990 Feet from ☑ East / ☐ West Line of Section
Footages Calculated from Nearest Outside Section Corner:
☐ NE ☐ NW ☑ SE ☐ SW
County: Franklin
Lease Name: HOSTETTER Well #: OW-5
Date Well Completed:
The plugging proposal was approved on: *(Date)*
by: *(KCC **District** Agent's Name)*
Plugging Commenced: 5/16/2012
Plugging Completed: 5/16/2012

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
		Surface	8.6250	20	
		Completion	2.8750	300	

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.

Pumped cement through 1" from bottom to surface. Remove 1" pumped 50 sacks of cement to T.D.

Plugging Contractor License #: 6084 Name: McMullin, Douglas
Address 1: 4397 K68 Address 2:
City: WELLSVILLE State: KS Zip: 66092 + _ _ _ _
Phone: (785) 883-4343
Name of Party Responsible for Plugging Fees: Clay Hughes

State of _____ County, _____ , ss.

_____ ☐ Employee of Operator or ☐ Operator on above-described well,
(Print Name)

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

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202