

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

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 County:				
Type of Well: (Check one) (Che	Other: Gas Sto	SWD Permit #:	Lease					
Is ACO-1 filed? Yes	_	log attached? Yes		The plugging proposal was approved on: (Date)				
Producing Formation(s): List A					(KCC District Agent's Name)			
•	•	m: T.D	I Plugo	Plugging Commenced:				
•		m: T.D	Plugg	ging Completed:				
Depth to	5 TOP BOILO	m: T.D						
Show depth and thickness of	all water, oil and gas forma	ations.	'					
Oil, Gas or Water	r Records		Casing Record	(Surface, Conductor & Produ	uction)			
Formation	Content	Casing	Size	Setting Depth	Pulled Out			
Describe in detail the manner cement or other plugs were us	. 00		•		ods used in introducing it into the hole. If			
Plugging Contractor License #		Name:	me:					
Address 1:			Address 2:					
City:			State:		Zip:+			
Phone: ()								
Name of Party Responsible for	or Plugging Fees:							
State of	County		SS					
-				F	0			
	(Print Name)			Employee 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



TICKET NUM	ABER	39549			
LOCATION	Detec	awa, Kr			
FOREMAN	17/4	Carpen			

PO Box 884, Cha 320-431-9210 or	anute, KS 66720 800-467-8676	CEME	· ·	:UK1		
DATE	CUSTOMER#	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11-27-12	79660 5	Beckmeyer #2	32	15	2/	ER_
رست. CUSTOMER	YHOTE		TRUCK.#	DRIVER	TRUCK#	DRIVER
MAILING ADDRES			669	Jim are	TROOK#	DIGUER
MAILING ADDICE	AW	7-1-2	666	-		- 44
CITY	$\frac{11}{\text{ISTA}}$	TE ZIP CODE		Set Tac		
		66.053	510	1007 140		
Louisha		E SIZE 821 HOLE DE	PTH 730	CASING SIZE & V	VEIGHT 2	
ЈОВ ТҮРЕ <u>/ / (.</u>		L PIPE TUBING		<u>, </u>	OTHER	
CASING DEPTH_			al/sk	CEMENT LEFT in		
SLURRY WEIGHT		PLACEMENT PSI MIX PSI	•	RATE	-	
DISPLACEMENT_ REMARKS:		ecting. Frablish		Mixand	oump /	595150
REMARKS:	Cement 2:	To bed Filling ins	ide of 2"	and ourse	de Plug	9149 1010
Bur	The Contraction	e. Pult 1's out and	1 top well	offto Sur	face	<i>'</i>
trom 1	CO DUITE					
				:		
					<u> </u>	
7	05 Wat	en		,		
				•		
ACCOUNT CODE	QUANITY or U	NITS DESCRIPTION	N of SERVICES or P	RODUCT	UNIT PRICE	TOTAL
5405N	/	PUMP CHARGE 1/4	g One we	<u>u </u>		103.00
5400	20 /2	MILEAGE fum	<i>y</i>			8000
5407	mon	Ton mle	44	. `		3500
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			-		SALES TAX	140.17
Havin 3737					ESTIMATED	2207 10

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.

DATE_