

**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

1105636

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 #: \_\_\_\_\_

Name: \_\_\_\_\_

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

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 - \_\_\_\_\_

Spot Description: \_\_\_\_\_

\_\_\_\_ - \_\_\_\_ - \_\_\_\_ Sec. \_\_\_\_ Twp. \_\_\_\_ S. R. \_\_\_\_ ☐ East ☐ West

\_\_\_\_\_ Feet from ☐ North / ☐ South Line of Section

\_\_\_\_\_ Feet from ☐ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☐ NE ☐ NW ☐ SE ☐ SW

County: \_\_\_\_\_

Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Date Well Completed: \_\_\_\_\_

The plugging proposal was approved on: \_\_\_\_\_ (Date)

by: \_\_\_\_\_ (KCC District Agent's Name)

Plugging Commenced: \_\_\_\_\_

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 Plugging Fees: \_\_\_\_\_

State of \_\_\_\_\_ County, \_\_\_\_\_, ss.

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

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**



**CONSOLIDATED**  
Oil Well Services, LLC

**REMIT TO**  
Consolidated Oil Well Services, LLC  
Dept. 970  
P.O. Box 4346  
Houston, TX 77210-4346

**MAIN OFFICE**  
P.O. Box 884  
Chanute, KS 66720  
620/431-9210 • 1-800/467-8676  
Fax 620/431-0012

INVOICE

Invoice # 255470

Invoice Date: 12/19/2012 Terms:

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CROSS BAR ENERGY LLC  
100 S. MAIN, SUITE 400  
WICHITA KS 67202  
(316) 239-6151

BURKETT D DW-15  
38394  
12-18-12  
KS

Part Number	Description	Qty	Unit	Price	Total
1131	60/40 POZ MIX	95.00		12.5500	1192.25
1118B	PREMIUM GEL / BENTONITE	325.00		.2100	68.25
1118B	PREMIUM GEL / BENTONITE	300.00		.2100	63.00
Description		Hours	Unit	Price	Total
485	P & A OLD WELL	1.00		695.00	695.00
485	EQUIPMENT MILEAGE (ONE WAY)	15.00		4.00	60.00
611	MIN. BULK DELIVERY	1.00		350.00	350.00

Parts:	1323.50	Freight:	.00	Tax:	96.61	AR	2525.11
Labor:	.00	Misc:	.00	Total:	2525.11		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed \_\_\_\_\_ Date \_\_\_\_\_

BARTLESVILLE, OK 918/338-0808	EL DORADO, KS 316/322-7022	EUREKA, KS 620/583-7664	PONCA CITY, OK 580/762-2303	OAKLEY, KS 785/672-2227	OTTAWA, KS 785/242-4044	THAYER, KS 620/839-5269	GILLETTE, WY 307/686-4914
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TICKET NUMBER 38394  
LOCATION Eureka  
FOREMAN Steve Neal

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

## CEMENT

N/A

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-18-12	2598	BURKETT D DW-15				Greenwood
CUSTOMER						
Crossbar Energy LLC						
MAILING ADDRESS			TRUCK #	DRIVER	TRUCK #	DRIVER
1005 Main St. 400			485	Alan M		
			621	Jeremy A		
CITY	STATE	ZIP CODE				
Virhita	KS	67302				

JOB TYPE <u>PSA</u>	HOLE SIZE _____	HOLE DEPTH _____	CASING SIZE & WEIGHT <u>5 1/2</u>
CASING DEPTH _____	DRILL PIPE _____	TUBING <u>2 3/8</u>	OTHER _____
SLURRY WEIGHT _____	SLURRY VOL _____	WATER gal/sk _____	CEMENT LEFT in CASING _____
DISPLACEMENT _____	DISPLACEMENT PSI _____	MIX PSI _____	RATE _____

REMARKS: Safety meeting. Rig up to 238 Tubing. Break Circulation w/ Fresh Water. Pump 300<sup>th</sup> Gel ahead SPOT 25 sks 60/40 Pozmix Cement AT 2050. Pull Tubing up to 900'. Break Circulation With Fresh Water. SPOT 25 sks AT 900'. Pull Tubing up to 150'. Break Circulation w/ Water Pump 43 sks 60/40 Pozmix cement 150' to surface. Circulated Cement Backside 5" casing. Top well off.  
Job Complete Rig down

Thank you

[illegible]

Ravin 3737

## AUTHORIZATION

**TITLE**

ESTIMATED TOTAL	3525.11
DATE	12-18-12

**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.**