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

1125684

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

Form CP-4

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)	County: Well #: Uell #: 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	g Fees:		
State of	County,	, SS.	
	(Print Name)		or or Operator on above-described well
haing first duly sugars an eath source. The	at I have knowledge of the factor	totomonto, and mottors harain contained, and the la	a of the choice described well is so filed on

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





TICKET	NUMBER_	41326

FOREMAN STEVENAL

FIELD TICKET & TREATMENT REPORT

PO Box 884, Chanute, KS 66720 FIELD TICKET & TREAT 620-431-9210 or 800-467-8676 APL 15-205-0/130 CEMENT

DATE CUSTOMER# WELL NAME & NUMBER			SECTION	TOWNSHIP	RANGE	COUNTY		
					29	30	165	Wilson
3-15-13	1124	Mong K	moall			ALC: CONTRACT		and succession
CUSTOMER					TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDR	ESS			1	485	Allen B		<u> </u>
Par	1176				667	Chris B		
P.O.B.	A 1110	STATE	ZIP CODE	1	452/1103	Jim		
Indeper	dence	KS	67301					
JOB TYPE P	TA O	HOLE SIZE		HOLE DEPTH	l	CASING SIZE & V	VEIGHT_5%	
CASING DEPT		DRILL PIPE			¥4		OTHER	
		SLURRY VOL_				CEMENT LEFT in	CASING	
SLURRY WEIGHT SLURRY VOL WATER GAUSK DISPLACEMENT DISPLACEMENT PSI MIX PSI REMARKS: Safty ARELING: Risup 70 1" jubing 1			RATE					
	P-1 11-5	in Die		"Tubin	Mix 48	sks Cla	ss A Cams	nt w/
151 - 1	· · · · · · · ·	K. Marin	1 7.4	in- hic	UPIO 6	18 / aning		
2662101	Za Laller	1 Cal 191 (- 12	Cicculation	A Commi	Betwee	n Jubi	34 *
Closs A ce	meni 22	6 Get 170 C	ade	Cir Calar		5.1		/
Casing,	Circulat	ed Goad	Cemini	OUI 7	he Annul	us Side.		
Job Complete Riz down								
	- "	0						

Thankyud

ACCOUNT		DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CODE	QUANITY or UNITS		200	2
5609	1	PUMP CHARGE	60.00	200,00
		MILEAGE # 2 rewell N/C		
11045	loosks	Class A Cement	14.95	1495.00
	190 #	Gel 2%0	,21	39.90
11188	94*	Cacle 1º6	.94	69.56
nas	44.			
54074	4.7	Tonmilege Bulk Truck	mic	175.00
24204				
5501C	Zhrs	Water Transport	11200	224,00
		· · · · ·	12.30	41.25
1123	2500 sollens	City water		
			C 1771	2244.7/
			Subrotal	
		6.32	SALES TAX	103.68
Ravin 3737	1 , 1 ,	NG14941	TOTAL	2348.39
	Jom Hill.	acan TITLE	DATE	
AUTHORIZTION	10mx 1000			