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** 

1140666

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 #: Image: Constraint #: Image	County: Well #: Lease Name: Well #: Date Well Completed: The plugging proposal was approved on: (Date) by: (KCC District Agent's Name) Plugging Commenced: Plugging Completed:
Depth to Top: Bottom: T.D	

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)		or or Operator on above-described well,
haing first duly sugars an asthe source The	t I have knowledge of the facto at	stamanta, and matters barain contained, and the l	an of the choice described well is as filed and

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

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CONSOLIDATED Git Well Services, LLC	Consolidated Oi De P.O. I	<b>MIT TO</b> Well Services, LLC pt. 970 Box 4346 X 77210-4346	P.O Chanute, I 620/431-9210 • 1-800/	
INVOICE			「Invoice #	226769
Invoice Date: 10/22/2008 7	erms:		Page	
SUITE 150 1551 N. WATERFRONT PARKW WICHITA KS 67206 ( ) -	IAY	20255 10-21-08		
Part Number Descript			Unit Price	Tota:
1131 60/40 PC		60.00	11.3500	Tota 681.00 34.00

========				============	===========		
Parts:	715.00	Freight:	.00	Tax:	45.04	AR	2346.79
Labor:	.00	Misc:	.00	Total:	2346.79		
Sublt:	.00	Supplies:	.00	Change:	.00		
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LOCATION EUREKA	

20255

FOREMAN KEUN MEGAY

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

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## FIELD TICKET & TREATMENT REPORT

20-431-9270 (	07 800-467-8679	2		<b>VEMEN</b>				
DATE	CUSTOMER #	WELL	NAME & NUM	IBER	SECTION	TOWNSHIP	RANGE	COUNTY
10-21-08	3096	SACKett	# 1					Ale de la contraction de
CUSTOMER								and a standard a feature state on the state
	IX INC.				TRUCK #	DRIVER	TRUCK	DRIVER
MAILING ADDRESS			-Summit Delg.	445	Justin			
	. WAterFRO	st PARKWAY	STE ISO	DRIg.	515	JERRId		
CITY		STATE	ZIP CODE					
wichita	,	K	67206					
JOB TYPE <i>P.T. A.</i> HOLE SIZE 7 %			7 7/8	HOLE DEPTH		CASING SIZE & \	MEIGHT	
		DRILL PIPE				ATUER		
					/sk CEMENT LEFT in CASING			
SLURRY WEIG	HT	SLURRY VOL						
DISPLACEMEN	IT	DISPLACEMEN		_ MIX PSI	<u> </u>	KAIE	- CH	
REMARKS:	grety Mees	ting: Rigu	p to 4"	DRILL pipe.	Spot Cen	nent Plugs A	5 70/ Bann	<u>19.</u>
					<u> </u>			
		<u> </u>	KS @ 2	73	<u> </u>			
		25 5	ts 60 7	to SURFACE	·			
		<del>خيار المراجعة العربية ا</del>					<u> </u>	······
		60 5	ks 60/40	POZMIX				
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						· · · · · · · · · · · · · · · · · · ·		······································

ACCOUNT	QUANITY OF UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405 N		PUMP CHARGE	925.00	225.00
5406	95	MILEAGE	3.65	346.75
1131	60 sks	60/40 Pozmix Cement	11.35	681.00
1118 A	200 *	Gel 4%	.17*	37.00
5407	2.58 Tons	Ton Mikenge Buck TRUCK	M/G	315,00
		THANK YOU 6.3%	SALER TAX	25.04
Ravin 3737		Gox TITLE Summit DRlg / Toolpurter	ESTINA	2346.79
AUTHORIZTION	witnessed By DAN	Gox TITLE Summit DR19 / Tralpurter	DATE	