

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

1146194

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

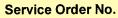
OPERATOR: License #:				API No. 15						
Name:				Spot Description:						
Address 1:				Sec Twp S. R East _ West						
Address 2:				Feet from North / South Line of Section						
City:				Feet from Fast / West Line of Section						
Contact Person:				Footages Calculated from Nearest Outside Section Corner:						
Phone: ()				NE NW SE SW						
Type of Well: (Check one)				County:						
Water Supply Well		SWD Permit #:		Lease Name: Well #:						
ENHR Permit #:	_	orage Permit #:	-, I	Date Well Completed:						
Is ACO-1 filed? Yes	—	ell log attached? Yes	No	The plugging proposal was approved on: (Date)						
Producing Formation(s): List				by:		(KCC Dis	t rict Agent's Name)			
Depth to	•	om: T.D		Plugging Commenced:						
•	•	om: T.D		Plugging	Completed:					
Depth to	o Top: Bott	om: T.D								
			I							
Show depth and thickness of		nations.								
Oil, Gas or Wate	r Records		Casing F	Record (Sur	face, Conductor & Prod	luction)				
Formation	Content	Casing	Size		Setting Depth	Pulled Out				
		ged, indicating where the muc f same depth placed from (bo		•		ods used in introducing	it into the hole. If			
Plugging Contractor License #:			Name: _							
Address 1: A				lress 2:						
City:				State:		Zip:	+			
Phone: ()				-						
Name of Party Responsible for	or Plugging Fees:									
State of	County,			, SS.						
	•				anlovee of Operator of	r Operator on abo	vo-described well			
(Print Name)				=[1	inproyee or Operator of	Detailed on abo	re-uescribed 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



Acid &	Cement 🕮		TREATMEN	T REPORT		Acid Stage No
Aciu o	Cement -					Acid otage No.
				Type Treatment: Amt.	Type Fluid	Sand Size Pounds of Sand
1) 5-16	6-13 District		O. No. 38575	BkdownBbl./Gal.		
Company	LLLD Drice	LN9		Bbl. /Gai.		
Well Name &	NO MAURICE 1-4			Bbl. /Gal.	***************************************	
Location		Field		Bbl. /Gal.		
County RA	RTON	State E		FlushBbl./Gal.	***************************************	
004110				Treated from	.ft. to	ft. No. ft
Cusing: Sixe	Type & Wt		Set at	from	.ft. to	ft. No. ft
	· · · · · · · · · · · · · · · · · · ·			from	ft. to	ft. No. ft
				Actual Volume of Oil/Water to Le	and Wales	Phi foot
Liner: Sixe	Type & Wt	Top atf	t. Bottom atft.	Pump Trucks. No. Used: 8td	> / 8 8թ	Twin
	nented: Yes/No. Perforated fro			Auxiliary Equipment 3/7:		
	≜ Wt			Packer:		Set utft.
	forated from			Auxiliary Tools		
				Plugging or Scaling Materials: Ty	pe	***************************************
Open Hole Six	ке т.D.		В. toft.	1		Galelb.
				K		
Company 1	Representative			_ Treater_ IncaClon		
TIME	PRESSURES	Total Fluid		REMAI	KS	
a.m /p.m.	Tubing Casing	Pumped				
8:30			ON LOCA	TION		
:						
			Pamp 100	sts 60/40 4% +	100 thalk	9+ 2000
-:			,			
:			Dame 50	sts 60/404%	+ 100 hall	54 1000
:						
:			Circulate		rface u/	60 565 60/40
				951ng + MIX 100		6434 concurre
:			Coment to	saifer out Su	rface	
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0025

Zip

Date _____

State



Company

Billing Address

513 Rochester St. • Pratt, Kansas 67124 • 620-388-5676

Lease & Well #		Field Name					Legai I	Description (c	escription (coordinates)	
County Fluid Level (surface)		State					Casing	ng Weight		
		Reading from	Cus	Customer T.D.				Excel Wireline T.D.		
Engineer Schmeider		Operator		Operator			Unit#			
Product Code		Description		Qty	Unit Price	From		th To	\$ Amount	
	1 × 4 sof			4		1500		501	1100.00	
	1 x 4 50f			4		1000	1	1001	1100.00	
		10.1 FG								
								, to		
		1141								
Н		₹ 								
		0/					_			
	Service	Cherye					1		950.00	
		V								
	ove service according to the ead and to which we hereby	e terms and conditions specified below agree.	ow,			SUBTO	TAL	31	50.00	
Customer			 :			DISCO	ТИГ	-130	0.00	
(1) All accounts	are to be paid within the terms t	neral Terms and Conditions fixed by Excel Wireline invoices and should	these term	s not be obse	rved,	SUBTO	TAL	185	00 0	
interest at th and other fe	e rate of 1.5% per month will be es will be added to accounts turn	charged from the date of such invoice. Int ned over to collections.	erest, Attor	ney, Court, Fil	ing		ГАХ	12	5 15	
by the custo	the uncertain conditions existing mer that Excel Wireline cannot of property damage in the performa	in a well which are beyond the control of E guarantee the results of their services and v ance of their services.	will not be h	eld responsibl	e for			100	5,05	
(3) Should any customer ag	of Excel Wireline instruments be grees to make every reasonable	lost or damaged in the performance of the effort to recover same, and to reimburse E	xcel Wirelin	s requested, the for the value	ne	NET TO	TAL	148	5.05	

(4) It is further understood and agreed that all depth measurements shall be supervised by the customer or its employees,

(5) The customer certifies that it has the full right and authority to order such work on such well, and that the well in which the work to be done by Excel Wireline is in proper and suitable condition for the performance of said work.

and customer hereby certifies that the zones, as shot, were approved.

(6) No employee is authorized to alter the terms or conditions of this agreement.

