

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			
				Spot De	scription:			
Address 1:					Sec 1	Гwp S. R	East West	
Address 2:								
City:								
Contact Person:				Footages Calculated from Nearest Outside Section Corner: NE NW SE SW				
								Type of Well: (Check one)
Water Supply Well		SWD Permit #:		-				
ENHR Permit #:	Gas	Storage Permit #:		Lease Name:				
Is ACO-1 filed? Yes	No If not, is v	vell log attached? Yes		Date Well Completed:				
Producing Formation(s): List	— All (If needed attach anot	her sheet)						
Depth t	to Top: Bo	ottom: T.D						
Depth t	to Top: Bo	ottom: T.D		00 0	Commenced:			
Depth t		ottom: T.D		Plugging	g Completed:			
·								
Show depth and thickness of	all water, oil and gas for	rmations.						
Oil, Gas or Wate	er Records		Casing Re	cord (Su	urface, Conductor & Prod	uction)		
Formation	Content	Casing	Size		Setting Depth	Pulled Out		
		3 3 3			3 37			
cement or other plugs were u	ised, state the character	of same depth placed from (b	ottom), to (to	p) for ea	ch plug set.			
Plugging Contractor License #:			_ Name:					
Address 1:			_ Address 2	:				
City:				State:		Zip:	+	
Phone: ()								
Name of Party Responsible f	or Plugging Fees:							
State of	Count	у,		, SS.				
					mployee of Operator or	Operator on	ahovo-described well	
	(Print Name				inployee of Operator of	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

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 #

258906

Invoice Date:

05/20/2013

Terms: 0/0/30, n/30

Page

ALTAVISTA ENERGY INC 4595 K-33 HIGHWAY P.O. BOX 128 WELLSVILLE KS 66092

(785)883-4057

BALDWIN WEST E-3

41839 1-15-20 05-14-2013 KS

Part 1 1124 1118B	Number	Description 50/50 POZ CEMENT MIX PREMIUM GEL / BENTONITE	30.00		Total 345.00 11.00
369 510 666 666 666	Description 80 BBL VACUUM MIN. BULK DELIT P & A NEW WELL EQUIPMENT MILE CASING FOOTAGE	VERY AGE (ONE WAY)	Hours 1.00 1.00 1.00 .00 905.00	Unit Price 90.00 .00 1085.00 4.20 .00	Total 90.00 .00 1085.00 .00

Parts: 356.00 Freight: .00 Tax: 25.99 AR 1556.99

Labor: .00 Misc: .00 Total: 1556.99 .00 Supplies: .00 Change: .00

Signed

Date



TICKET NUMBER	41839
LOCATION Offan	
FOREMAN Case	Leunady

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

FIELD TICKET & TREATMENT REPORT CEMENT

020-701-3210	0, 000 40, 00, 0			OFINE				
DATE	CUSTOMER#	WEL	L NAME & NUME	BER	SECTION	TOWNSHIP	RANGE	COUNTY
5/14/13	3244	Buldwi	n Unit #	E-3	SWI	15	20	DG
CUSTOMER A LEV	ista Eue				TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRE	ESS	7			481	Casken		
PO B	361 xoc				leldo	Garteo		
CITY		STATE	ZIP CODE		510	SetTuc		
Wellsin	ille	KS	66092		369	DerMas		
JOB TYPE P	ver	HOLE SIZE		HOLE DEPTH	l	CASING SIZE & W	EIGHT 27/8	"EUE
CASING DEPTH	1905	DRILL PIPE		TUBING			OTHER	
SLURRY WEIGH	· нт	SLURRY VOL_		WATER gal/s	k	CEMENT LEFT in		<u> </u>
DISPLACEMENT	т	DISPLACEMEN	IT PSI	MIX PSI		RATE 2 bpr	1	
REMARKS: 1	old safet	neeting	establish	red circ	Station the	ach 1"til	sing at Ti) mixed
+ pumpe	1 25 6	ks 5950	Poznix	ceaner	t w/27	o gelox	de rome	ut to
sur tace	, pulled 1'	tubing ,	from we	le top	sed well	off 13/ 5	stes con	neut.
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ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405N	1	PUMP CHARGE		1085,00
5406	- onlease	MILEAGE		
5402	905'	casing tootage		
5407	minimum 1/6	80 Vac		
5502c	1 h/s	80 Vac		90.00
1124	30 803	50/50 Poznix rement		345.00
111813	50 #	Previous Gel		11.00
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				lod -
		V STATE OF THE STA		
			- Willips	*
				and a state of
		72	en calegray	25 99
Havin 3737		7.3	SALES TAX ESTIMATED	
and a second distriction and PREST TREES.			TOTAL	1556,99

AUTHORIZTION No Co Rep on location

TITLE_

DATE_