

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

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	o. 15			
Name:							
Address 1:				Sec	Twp S. R	East West	
Address 2: State: Zip: +				Feet from North / South Line of Section Feet from East / West Line of Section			
Phone: ( )							
Type of Well: (Check one)	Oil Well Gas We	II OG D&A Catl	hodic				
Water Supply Well	Other:	SWD Permit #:				Well #:	
ENHR Permit #:		as Storage Permit #:					
Is ACO-1 filed? Yes	No If not, i	s well log attached? Yes		Date Well Completed: (Date)  The plugging proposal was approved on: (KCC District Agent's Name)			
Producing Formation(s): L		_					
	•	Bottom: T.D					
•	•	Bottom: T.D	Pluggi				
		Bottom: T.D	Pluggi	ng Completed:			
Show depth and thickness	s of all water, oil and gas	formations.					
	/ater Records		Casing Record (	Surface, Conductor & Prod	duction)		
Formation	Content	Casing	Size	Setting Depth	Pulled Out		
Tomaton	Content	Odomig	OIZC	Cetting Deptin	1 diled out		
		plugged, indicating where the r ter of same depth placed from	•				
Plugging Contractor License #:			Name:				
Address 1:			Address 2:				
City:			State:		Zip:	_+	
Phone: ( )							
Name of Party Responsib	le for Plugging Fees:						
State of	Cou	ınty,	, ss.				
		•		Employee of Operator of	or Operator on above	-described well	
	(Print Na			Employee of Operator of		acsonbed 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 #

258914

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 (785)883-4057

BALDWIN WEST B-3

41907 1-15-20 05-16-2013 KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	70.00	11.5000	805.00
1118B	PREMIUM GEL / BENTONITE	118.00	.2200	25.96
Description 369 80 BBL VACU 510 MIN. BULK D 666 P & A NEW W 666 EQUIPMENT M	UM TRUCK (CEMENT) ELIVERY ELL	Hours 3.00 1.00 1.00	Unit Price 90.00 .00 1085.00 4.20	Total 270.00 .00 1085.00 .00

830.96 Freight: Parts: .00 Tax: 60.67 AR 2246.63

Labor:

.00 Misc:

Sublt:

.00 Supplies:

.00 Total:

2246.63

.00 Change:

.00

Signed

Date



258914

TICKET NUMBER_	41907
LOCATION OHOL	ua.KS
FOREMAN Case,	Kennedy

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

FIELD TICKET & TREATMENT REPORT

020 401 3210 (	JI 000-401-0010	!		CEMEN	4.1			
DATE	CUSTOMER#	WELL	NAME & NUME	BER	SECTION	TOWNSHIP	RANGE	COUNTY
5/16/13	3244	Baldwin	Unit#	B-3	SWI	15	20	DG
CUSTOMER Altavist	e Energy				TRUCK#			
MAILING ADDRE					481	Casken	TRUCK#	DRIVER
Po B	0x 128				Colece	Garmoo		
CITY		STATE	ZIP CODE		570	SetTuc		<del></del>
Wellsvil	le	KS	66092		369	Der Mas		
JOB TYPE pl.		HOLE SIZE	ł	I HOLE DEPTH		CASING SIZE & 1	WEIGHT 47	2 4
CASING DEPTH_	10001	DRILL PIPE		TUBING			OTHER	<u> </u>
SLURRY WEIGH	т	SLURRY VOL		WATER gal/s	k	CEMENT LEFT in	-0	(1
DISPLACEMENT		DISPLACEMENT	r PSI	MIX PSI		RATE 26 pu		
REMARKS: he	ld satisfy	meeting	, establish	hed circ	wation th	,	1.	erhed
down to		~ - 1 /	red + pu		50 sks 5%	50 Poznú		tw/ 2%
remign	Gel per	St, cey		urtare,	Pulled 1"	telorna fre	77	tapped
	o 5 des	concert,	mixed	+ pump	ed 15 st			r metias
shut in c	rsing.		- N-100	· ·			-	100
	· · · · · · · · · · · · · · · · · · ·					1 ()		
						12	7	
						$\supset'$	/	
ACCOUNT						/	(	
CODE	QUANITY o	or UNITS	DES	CRIPTION of	SERVICES or PRO	DDUCT	UNIT PRICE	TOTAL
5405N			PUMP CHARGE					1085.00
5406	fac		MILEAGE					
5467	@ 'win'	inoun(n/c)	ton mi	leage				0-
2205	3 h	rs	80 Vac					270.00
				× - +				
		-						
1124		sles	5%5 F	omix	cement			805.00
11183	118 4	<u> </u>	Premio	m Gel				25.96
								- 1
						paragrams.	(A) ASMA	alad
						**		
						Reputituite	4	
vin 3737						7.3%	SALES TAX	60.67 2246.63
							ESTIMATED TOTAL	2546 62
UTHORIZTION_	Vo Co. Re	pouloca	tion T	TTLE			DATE	(U.W.)

l 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.