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

1153264

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: 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 #: Is ACO-1 filed? Yes 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: Plugging Plugg

Show depth and thickness of all water, oil and gas formations.

Oil, Gas or Water Records		Casing Record (Surface, Conductor & Production)			tion)
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 Fe	ees:						
State of	County,		, SS.				
,	Print Name)			or Operator on above-d			
he is a first during a second second the second The still	Is a set a se		a hanala anne ala an	المنتجا والأسم والمتحد والمتحد والمتحد والمتكر	to a file of a second		

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

4.2				
CONSOLIDATED Oil Well Services, LLC	REMIT TO Consolidated Oil Well S Dept. 970 P.O. Box 434 Houston, TX 7721	ا Chanul 620/431-9210 • 1-8	AIN OFFICE P.O. Box 884 le, KS 66720 00/467-8676 20/431-0012	
INVOICE			Invoice #	
Invoice Date: 07/09/2013	Ferms: 0/0/30,n/30			ige 1
ALTAVISTA ENERGY INC 4595 K-33 HIGHWAY P.O. BOX 128 WELLSVILLE KS 66092 (785)883-4057	42 1-	RY BELL A-3 113 15-20 -03-2013 S	1	
=======================================		=============		=========
	ion DZ CEMENT MIX GEL / BENTONITE	105.00	Unit Price 11.5000 .2200	
Description 369 80 BBL VACUUM TRUCK (CH 495 P & A NEW WELL 495 EQUIPMENT MILEAGE (ONE		2.00	Unit Price 90.00 1085.00 4.20	Total 180.00 1085.00 105.00

1.00

368.00

105.00

368.00

MIN. BULK DELIVERY

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558

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Parts:	1323.88	Freight:	.00	Tax:	94.66	AR	3156.54
Labor:	.00	Misc:	.00	Total:	3156.54		
Sublt:	.00	Supplies:	.00	Change:	.00		
========	==========		=========	=============			

Signed Date BARTLESVILLE, OK 918/338-0808 EL DORADO, KS 316/322-7022 EUREKA, KS 620/583-7664 PONCA CITY, OK 580/762-2303 OAKLEY, KS 785/672-8822 OTTAWA, KS 785/242-4044 THAYER, KS 620/839-5269 CUSHING, OK 918/225-2650 GILLETTE, WY 307/686-4914



260218

TICKET NUMBER 4211

LOCATION Othawa KS

FOREMAN Fred Mader

PO Box 884, 0	Cha	nute, KS	66720
620-431-9210	or	800-467-	8676

DATE	CUSTOMER #	WELL N	IAME & NUME	BER	SECTION	TOWNSHIP	RANGE	COUNTY
7.3-13	-3244	Mary Bell	# A	31	SW 1	15	20	DG
CUSTOMER								
HIta	vista Er	eron In			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRE	SS	15			712	Fre Mad		
P. o.	Box 12	8			495	Har Bec		
CITY		STATE Z	IP CODE		369	Dermas		
Wellsvi	1\e	KS	66092		558	wil mat		
JOB TYPE P	يل	HOLE SIZE	57/8	HOLE DEPTH	925	CASING SIZE & W	EIGHT N/A	
CASING DEPTH	NA	DRILL PIPE	<u></u>		TO		OTHER	
SLURRY WEIGH	Π	SLURRY VOL		WATER gal/sl	<	CEMENT LEFT in	CASING_ Jul	1
DISPLACEMENT	N/A	DISPLACEMENT F	vsi	MIX PSI		RATE 1.11/2		
REMARKS: K	ig run 1	" tubing	to T	D. Mix	* PUMO	50 SKS Les	ment	
<u>_</u>	1P 1" to	600 M	:XX PM	10	sus Can	nent. Pull	1" 70	
	01, F:11 +	o Surface	w/Ce	ment. 1	Pull TOM	amm 1"7	robily.	
	go off we	el.w/com	sit. 1	Dash or	1+ 1" TUL		0	
		· · · · ·				0		
	Total	105 SI	50/5	v Por M.	K Connent	6% (rel		

CEMENT

Tos Well Servis.

ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
SYETN	1	PUMP CHARGE Plus to Abandon 455		100500
5406	25mi	MILEAGE 495		2050
5407	Minimum	Ton miles 558	-	36800
5020	Zhrs	80 BBL Vac Truck 369		15000
1124	6053Ks	50/50 Por Mix Cement		120750
11183		Prension Cel		116 38
			a anna 1 - KA	. ÿ
		Ť		had
				le .
	······································	4		
Ravin 3737		7.15%		9464
	all the		ESTIMATED TOTAL	3156-4
AUTHORIZTION.	- samer	TITLE	DATE	

I 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.