



**Notice:** Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

KANSAS CORPORATION COMMISSION 1159427  
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 #: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Address 1: \_\_\_\_\_  
 Address 2: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_  
 Contact Person: \_\_\_\_\_  
 Phone: ( \_\_\_\_\_ ) \_\_\_\_\_  
 Type of Well: (Check one)  Oil Well  Gas Well  OG  D&A  Cathodic  
 Water Supply Well  Other: \_\_\_\_\_  SWD Permit #: \_\_\_\_\_  
 ENHR Permit #: \_\_\_\_\_  Gas Storage Permit #: \_\_\_\_\_  
 Is ACO-1 filed?  Yes  No If not, is well log attached?  Yes  No  
 Producing Formation(s): List All (If needed attach another sheet)  
 \_\_\_\_\_ Depth to Top: \_\_\_\_\_ Bottom: \_\_\_\_\_ T.D. \_\_\_\_\_  
 \_\_\_\_\_ Depth to Top: \_\_\_\_\_ Bottom: \_\_\_\_\_ T.D. \_\_\_\_\_  
 \_\_\_\_\_ Depth to Top: \_\_\_\_\_ Bottom: \_\_\_\_\_ T.D. \_\_\_\_\_

API No. 15 - \_\_\_\_\_  
 Spot Description: \_\_\_\_\_  
 \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West  
 \_\_\_\_\_ Feet from  North /  South Line of Section  
 \_\_\_\_\_ Feet from  East /  West Line of Section  
 Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
 County: \_\_\_\_\_  
 Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_  
 Date Well Completed: \_\_\_\_\_  
 The plugging proposal was approved on: \_\_\_\_\_ (Date)  
 by: \_\_\_\_\_ (KCC District Agent's Name)  
 Plugging Commenced: \_\_\_\_\_  
 Plugging Completed: \_\_\_\_\_

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.  
 \_\_\_\_\_  Employee of Operator or  Operator on above-described well,  
 (Print Name)

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

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202



**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 # 260862

Invoice Date: 07/25/2013 Terms: 10/10/30, n/30 Page 1

MURFIN DRILLING  
P.O. BOX 288  
RUSSELL KS 67665  
( ) -

HOOF #101 USED FOR P-A  
38012  
31-9-23  
07-23-2013 APPROVED [Signature]  
KS

Part Number	Description	Qty	Unit Price	Total
1131	60/40 POZ MIX	610.00	15.8600	9674.60
1118B	PREMIUM GEL / BENTONITE	2098.00	.2700	566.46
1105	COTTONSEED HULLS	450.00	.5800	261.00

Sublet Performed	Description	Total
9996-130	CEMENT MATERIAL DISCOUNT	-1050.21
9995-130	CEMENT EQUIPMENT DISCOUNT	-343.00

Description	Hours	Unit Price	Total
460 TON MILEAGE DELIVERY	1.00	1146.25	1146.25
463 P & A OLD WELL	1.00	875.00	875.00
463 EQUIPMENT MILEAGE (ONE WAY)	50.00	5.25	262.50
T-129 TON MILEAGE DELIVERY	1.00	1146.25	1146.25

PA101 3095.0002.1 13238.28 PTA #101

Amount Due 14709.21 if paid after 08/24/2013

Parts:	10502.06	Freight:	.00	Tax:	699.43	AR	13238.28
Labor:	.00	Misc:	.00	Total:	13238.28		
Sublt:	-1393.21	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 GILLETTE, WY 307/686-4914 CUSHING, OK 918/225-2650



**CONSOLIDATED**  
Oil Well Services, LLC

260862

TICKET NUMBER 38012  
LOCATION Onkley, KS  
FOREMAN Fuzz

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

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7-23-13	5406	Hoof #01	31	9	23w	Graham

  

CUSTOMER	TRUCK #	DRIVER	TRUCK #	DRIVER
Murphy Dalg	403	Timothy		
MAILING ADDRESS	460	Jack J		
CITY	528-129	Jordan		

  

CITY	STATE	ZIP CODE

JOB TYPE AWP HOLE SIZE \_\_\_\_\_ HOLE DEPTH \_\_\_\_\_ CASING SIZE & WEIGHT 5 1/2  
 CASING DEPTH \_\_\_\_\_ DRILL PIPE \_\_\_\_\_ TUBING 2 3/8 OTHER \_\_\_\_\_  
 SLURRY WEIGHT 13.8 SLURRY VOL 1.42 WATER gal/sk \_\_\_\_\_ CEMENT LEFT IN CASING \_\_\_\_\_  
 DISPLACEMENT \_\_\_\_\_ DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: Safety meeting on morning workover. Rig up and plug as ordered  
125 SKS cement w/ 250' hails @ 3780'  
125 SKS cement w/ 200' hails @ 2900' attempt to  
circ from 1700' to surface and 8 5/8 with 300 SKS cement. Wait on  
more cement. Matted up to 5 1/2 csg pumped 40 SKS cement filled  
csg + B-side press to 300' and released. Wait back to Hoof to  
topped off 5 1/2 csg with 20 SKS cement  
Total 590 SKS 60/40 pos 49 gal + 450' hails + 20 SKS on track well

Thanks Fuzz crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405A	1	PUMP CHARGE	875.00	875.00
5406	50	MILEAGE	5.25	262.50
5407A	26.2 ton	Tow mileage delivery	12.5	2292.50
1181	610 SKS	60/40 pos	15.85	9674.50
118B	2098	Band	1.27	586.46
1105	450	Condensed hails	15.8	261.00
		subtotal 1		13932.00
		tax 10%		1393.20
		subtotal 1		12538.85

**completed**

SALES TAX \_\_\_\_\_  
 ESTIMATED TOTAL 13238.88

AUTHORIZATION Wade King 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 for