



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

KANSAS CORPORATION COMMISSION 1159447
OIL & GAS CONSERVATION DIVISION
WELL PLUGGING RECORD
 K.A.R. 82-3-117

Form CP-4
March 2009

Type or Print on this Form
Form must be Signed
All blanks must be Filled

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

Acidizing cc: WF



P. O. Box 466
Ness City, KS 67560
Off: 785-798-2300



Invoice

DATE	INVOICE #
6/7/2013	24288

BILL TO
Murfin Drilling Co Inc PO Box 661 Colby, KS 67701-0661

- Acidizing
- Cement
- Tool Rental

TERMS	Well No.	Lease	County	Contractor	Well Type	Well Category	Job Purpose	Operator
Net 30	#1-3	Cahoj A	Rawlins	Company Tools	Oil	OWWO	PTA	Nick
PRICE REF.	DESCRIPTION				QTY	UM	UNIT PRICE	AMOUNT
575W	Mileage - 1 Way				120	Miles	6.00	720.00T
576W-P	Pump Charge - PTA - 3426 Feet				1	Job	1,000.00	1,000.00T
275	Cotton Seed Hulls				12	Sack(s)	30.00	360.00T
290	D-Air				5	Gallon(s)	42.00	210.00T
328-4	60/40 Pozmix (4% Gel)				450	Sacks	11.50	5,175.00T
581W	Service Charge Cement				450	Sacks	2.00	900.00T
583W	Drayage				2,260.5	Ton Miles	1.00	2,260.50T
	Subtotal							10,625.50
	Sales Tax Rawlins County						8.05%	855.35
	USED FOR				PIA			
	APPROVED				JR	R		
PA101	1045.0003.1	11480.85				PTA #1-3		
We Appreciate Your Business!							Total	\$11,480.85



Services, Inc.

CHARGE TO: Murkin Dely Car Inc
 ADDRESS
 CITY, STATE, ZIP CODE

TICKET No. **24288**

PAGE 1 OF 1

1. <u>Hays Ks.</u>	WELL/PROJECT NO. #1-3	LEASE <u>Cahoy #11</u>	COUNTY/PARISH <u>Rawlins</u>	STATE <u>Ks</u>	CITY	DATE <u>6-7-13</u>	OWNER <u>same</u>
2. <u>Ness City, Ks.</u>	TICKET TYPE <u>CONTRACTOR</u>	CONTRACTOR <u>Co Tools</u>	RIG NAME/NO.	SHIPPED VIA <u>Truck</u>	DELIVERED TO <u>Location</u>	ORDER NO.	
3.	WELL TYPE <u>Oil</u>	WELL CATEGORY <u>Oil</u>	JOB PURPOSE <u>PTA</u>	WELL PERMIT NO.		WELL LOCATION	
4.	REFERRAL LOCATION	INVOICE INSTRUCTIONS					

PRICE REFERENCE	SECONDARY REFERENCE PART NUMBER	ACCOUNTING			DESCRIPTION	QUANTITY			UNIT PRICE	AMOUNT
		LOC	ACCT	DF		QTY.	UM	QTY.		
575					MILEAGE #111	120mi			6.00	720.00
576P					PAID Charge (PTA)	120	3426'		1200.00	14400.00
275					Co Housed Balls	1254			30.25	3800.00
290					D-Air	5801			42.00	2436.00
328-14					Cell Repair 4% gr	452	shs		11.50	5175.00
581					Cement Service Charge	450	shs		2.00	900.00
583					Drayage	200	shs		1.10	220.00

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

DATE SIGNED 6-6-13 TIME SIGNED 1350 AM PM

DATE SIGNED 6-6-13 TIME SIGNED 1350 AM PM

REMIT PAYMENT TO:
 SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY

OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?	AGREE	UN-DECIDED	DIS-AGREE
WE UNDERSTOOD AND MET YOUR NEEDS?			
OUR SERVICE WAS PERFORMED WITHOUT DELAY?			
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?			
ARE YOU SATISFIED WITH OUR SERVICE?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	

CUSTOMER DID NOT WISH TO RESPOND

PAGE TOTAL 10,555.50

TOTAL 11,480.85

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR Mich Kordak APPROVAL

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE 6-6-13 PAGE NO. 1

CUSTOMER: *Murphy Oil Co Inc* WELL NO. # *1-3* LEASE: *Cabaj "A"* JOB TYPE: *PTA* TICKET NO. *24288*

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1030							on loc/set up Trks
								2 7/8" x 5 1/2" TD 4150'
								Top of fish 3446'
								Perf 3918' - 4121'
								New Perf 2900', 2115', 235'
								1st Plug 3425'
								25 sks 60% Perm 4% gel
	1100	5	0			100		Start Cement
		5	25/0			100		start wtr
	1105		5					Balanced
								2nd Plug 2495'
	1130	5	0			100		start 150 sks 60% Perm 4% gel w/ 100# Hulls
		5	40/0			100		start wtr
	1140		3					Balanced
								3rd Plug 1786'
	1210	5	0			100		Start 150 sks 60% Perm 4% gel w/ 100# Hulls
		5	60/0			100		start wtr
	1225		3					Balanced
								4th Plug 893' 100# Hulls
	1255	5	0			100		Start Cement 60% Perm 4% gel
		5	15/0			150		circ cement start wtr
	1300		1					Balanced
								TOOH
	1340	1	1					Top of PP 5 1/2" 5 sks 60% Perm 4% gel
	1325	1.5	6					Hookup to 8 5/8" 25 sks 60% Perm 4% gel
								well Plugged
								425 sks down a 5 1/2"
								25 sks down 8 5/8"
								Thank you
								Nick, David B. & Flint