



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

KANSAS CORPORATION COMMISSION 1159459  
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

Accty - cc: WF



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



# Invoice

DATE	INVOICE #
3/19/2013	23950

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

- Acidizing
- Cement
- Tool Rental

Colby Sandy

TERMS	Well No.	Lease	County	Contractor	Well Type	Well Category	Job Purpose	Operator
Net 30	#27-12A	Cahoj #	Rawlins		Oil	Workover	PTA	Josh
PRICE REF.	DESCRIPTION				QTY	UM	UNIT PRICE	AMOUNT
575W	Mileage - 1 Way				120	Miles	6.00	720.00T
576W-P	Pump Charge - PTA				1	Job	1,000.00	1,000.00T
275	Cotton Seed Hulls				14	Sack(s)	25.00	350.00T
290	D-Air				5	Gallon(s)	35.00	175.00T
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				2,265.3	Ton Miles	1.00	2,265.30T
	Subtotal							10,585.30
	Sales Tax Rawlins County						8.05%	852.12
	USED FOR				PIA			
	APPROVED				[Signature]			
PA101	1095.0038.1	11,437.42	PTA #27-12A					
<b>We Appreciate Your Business!</b>							<b>Total</b>	<b>\$11,437.42</b>



CHARGE TO: Murphy  
 ADDRESS  
 CITY, STATE, ZIP CODE

TICKET No 23950

PAGE 1 OF 1

WELL PROJECT NO. 27-12 A LEASE Cchoja COUNTY/PARISH Reynolds STATE KS CITY \_\_\_\_\_ DATE 3-19-13 OWNER \_\_\_\_\_  
 SERVICE LOCATIONS H445ks TICKET TYPE  SERVICE  SALES CONTRACTOR \_\_\_\_\_ RIG NAME/NO. \_\_\_\_\_ SHIPPED VIA CT DELIVERED TO Locust-DH ORDER NO. \_\_\_\_\_  
 2. Ness (044ks) WELL TYPE 0:1 WELL CATEGORY WorKover JOB PURPOSE Plug to Abandon WELL PERMIT NO. \_\_\_\_\_ WELL LOCATION \_\_\_\_\_  
 3. \_\_\_\_\_  
 4. REFERRAL LOCATION \_\_\_\_\_ INVOICE INSTRUCTIONS \_\_\_\_\_  
McDonald Ks 1E / 345 End

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING		DESCRIPTION	QTY.	UM	QTY.	UM	DIS- AGREE	UN- DECIDED	DIS- AGREE	UNIT PRICE	AMOUNT
		LOC	ACCT										
575		1			120	mi						6.00	720.00
576P		1		MILEAGE # 112	1	ks						1000.00	1000.00
275		1		Pump Charge PTA	14	SKS						25.00	350.00
290		1		Latron Seed Hulls 11SD#	5	gal						35.00	175.00
				D-A-C									
328-4		2		60/40 Pozmix 4% Gel	450	SKS						11.50	5175.00
581		2		Service Charge Cement	450	SKS						2.00	900.00
583		2		Overage	2265	BO	TM					1.00	2265.30
REMIT PAYMENT TO: <b>SWIFT SERVICES, INC.</b> P.O. BOX 466 NESS CITY, KS 67560 785-798-2300												PAGE TOTAL	10585.30
LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, <b>PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY</b> provisions. MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS X _____ TIME SIGNED <u>0945</u> <u>3-19-13</u> <u>5</u> P.M. DATE SIGNED												SURVEY OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN? 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 type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND	TOTAL 11,437.42

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES - The customer hereby acknowledges receipt of the materials and services listed on this ticket.  
 SWIFT OPERATOR: [Signature] APPROVAL  
**Thank You!**

JOB LOG

SWIFT Services, Inc.

DATE 3-19-13 PAGE NO.

CUSTOMER Murphy WELL NO. 27-12A LEASE Cahaja JOB TYPE PTA TICKET NO. 23950

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0945							on location
								1st Plug @ 3160
			12	✓				Start H <sub>2</sub> O
			13	✓				Start Cement 50 sks
			33	✓				Start Cement 125 sks w/450 <sup>#</sup> Halls
			42	✓				Circulating on 5 1/2
			50	✓				Circulating on 8 5/8
			6	✓				Pump 6 bbl H <sub>2</sub> O
	1125							2nd Plug @ 1592
			40	✓				Start Cement w/halls 150 sks 450 <sup>#</sup> Halls
			1	✓				pump 1 bbl H <sub>2</sub> O
			41	✓				circulated 1 bbl at end
	1145							3rd Plug @ 682
			16	✓				Start cement 60 sks
			1	✓				suck 1 bbl H <sub>2</sub> O
			1	✓				circulated 1 bbl at end
	1225							4th Plug @ 357
			18	✓				Start Cement 65 sks
			5	✓				circulated on 5 1/2
								close 5 1/2
								circulate on 8 5/8 no cement
								out of cement
	1330				✓			3 sec Down
	1400							5 sec Down
								450 sks 60/40 4 <sup>#</sup> Halls
								1050 <sup>#</sup> Halls
	1400							Job complete
								Thank You
								Dush, Brian, Rob