

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

1161753

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 #:			AF	PI No	. 15				
Name:				Spot Description:					
Address 1:			_		Sec Tw	/p S. R East West			
Address 2:				Feet from North / South Line of Section Feet from East / West Line of Section					
City:									
Contact Person:			Fo	Footages Calculated from Nearest Outside Section Corner: NE NW SE SW					
Phone: ()									
Type of Well: (Check one)	OG D&A Cathodi	ic C	County:						
Water Supply Well	Other:	SWD Permit #:		Lease Name: Well #:					
ENHR Permit #: Gas Storage Permit #:				Date Well Completed:					
Is ACO-1 filed? Yes	No If not, is well	l log attached? Yes	1	The plugging proposal was approved on: (Date)					
Producing Formation(s): List A	All (If needed attach another	sheet)	by	r:		(KCC District Agent's Name)			
Depth to	Top: Botto	m: T.D	_{PI}	uaair	na Commenced:				
Depth to	Top: Botto	m: T.D		Plugging Completed:					
Depth to	Top: Botto	m:T.D		33	0 1				
				—					
Show depth and thickness of		ations.							
Oil, Gas or Water	Records		_	Casing Record (Surface, Conductor & Production)					
Formation	Content	Casing	Size		Setting Depth	Pulled Out			
Describe in detail the manner cement or other plugs were us	. 00					ds used in introducing it into the hole. If			
Plugging Contractor License #	<i>t</i> :		Name:						
Address 1:			Address 2: _						
City:			St	ate: _		Zip:+			
Phone: ()									
Name of Party Responsible fo	r Plugging Fees:								
State of	County, _		,	SS.					
(Print Name)			[[Employee of Operator or	Operator on above-described 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



257995

TICKET NUMBER	41784
LOCATION D +	ava
FOREMAN Alga	Male

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

FIELD TICKET & TREATMENT REPORT CEMENT

TRUCK # DENVER TRUCK # DENVER NG ADDRESS 393 W 10th PICKAL Park 165 (bb210) PICKAL PARK 165 (DATE	CUSTOMER #	WELL	NAME & NUME	BER	SECTION	TOWNSHIP	RANGE	COUNTY
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