

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

1162239

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.

(Print Name) ☐ Employee of Operator or ☐ Operator on above-described well,

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



FOREMAN Walt Dunkel

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
8-21-12		Ryder 1-5	5	11S	23	Trego
CUSTOMER						
Charlotte Production, LLC						
MAILING ADDRESS			TRUCK #	DRIVER	TRUCK #	DRIVER
			463	Josh Gable		
			566	Calvin		
CITY						
STATE						
ZIP CODE						

JOB TYPE	Surface	HOLE SIZE	12 1/4	HOLE DEPTH	272'	CASING SIZE & WEIGHT	8 3/4 - 20'
CASING DEPTH	272'	DRILL PIPE		TUBING		OTHER	
SLURRY WEIGHT	15.2	SLURRY VOL		WATER gal/sk		CEMENT LEFT in CASING	20'
DISPLACEMENT	16.	DISPLACEMENT PSI		MIX PSI		RATE	5 BPM

REMARKS: Safety, Mastings, rig up an W-L #12. Circ casing on bottom
mix 175 sks com, 3% cc. 7% gel, Displace 16 BBL H₂O @ 200#
skirt in

Comment Did CMC

Approx 4 BBI to Dif

Thank You
WGH & crew

[illegible]

Revision 3737

AUTHORIZATION

TITLE

DATE 8-22-12

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.

FIELD TICKET & TREATMENT REPORT
CEMENT

TICKET NUMBER 37142
LOCATION Oakley HS
FOREMAN Miles Shaw

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
8-25-12	2582	Ruber #1-5	5	11S	23N	Trego
CUSTOMER Chalk Production						
MAILING ADDRESS						
CITY						
STATE						
ZIP CODE						
			TRUCK #	DRIVER	TRUCK #	DRIVER
			450 + 115	Bobby S		
			560	Mike m		

JOB TYPE <u>PTA</u>	HOLE SIZE <u>7 7/8</u>	HOLE DEPTH <u>3950</u>	CASING SIZE & WEIGHT
CASING DEPTH	DRILL PIPE	TUBING	OTHER
SLURRY WEIGHT <u>13.8</u>	SLURRY VOL <u>1.4</u>	WATER gal/sk	CEMENT LEFT in CASING
DISPLACEMENT	DISPLACEMENT PSI	MIX PSI	RATE

REMARKS: Safety meeting and rig up on WW Drilling #62 plugs as ordered

1 st	255 lbs @	3950 3950'
2 nd	255 lbs @	1840'
3 rd	110 lbs @	965'
4 th	40 lbs @	320'
		230 lbs Gelsol No. 2 - 99 gal 1/4" H ₂ O
Top	10 lbs @	40' water
RH	30 lbs	

Thanks m/s & crew

[illegible]

Raven 3751

AUTHORIZATION

TITLE

ESTIMATED
TOTAL

DATE 8-28-17

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.