



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

KANSAS CORPORATION COMMISSION 1163214  
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



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



# Invoice

DATE	INVOICE #
6/21/2012	21395

BILL TO
Murfin Drilling Co Inc P. O. Box 130 Hill City, KS 67642-0130
USED FOR _____
APPROVED _____

- Acidizing
- Cement
- Tool Rental

*PA*  
*J.T.H.*

TERMS	Well No.	Lease	County	Contractor	Well Type	Well Category	Job Purpose	Operator
Net 30	#4-1	NLU	Rooks		Oil	Workover	PTA	Dave
PRICE REF.	DESCRIPTION				QTY	UM	UNIT PRICE	AMOUNT
575W	Mileage - 1 Way				50	Miles	6.00	300.00T
576W-P	Pump Charge - PTA				1	Job	1,000.00	1,000.00T
290	D-Air				2	Gallon(s)	35.00	70.00T
275	Cotton Seed Hulls				2	Sack(s)	25.00	50.00T
328-4	60/40 Pozmix (4% Gel)				170	Sacks	11.50	1,955.00T
581W	Service Charge Cement				200	Sacks	2.00	400.00T
583W	Drayage				419.5	Ton Miles	1.00	419.50T
	Subtotal							4,194.50
	Sales Tax Rooks County						6.30%	264.25
PA101	5801.0005.1	4458.75	PTA	#4-1				
<b>We Appreciate Your Business!</b>							<b>Total</b>	<b>\$4,458.75</b>



Services, Inc.

CHARGE TO: MURKIN DEC  
 ADDRESS: \_\_\_\_\_  
 CITY, STATE, ZIP CODE: \_\_\_\_\_

TICKET No 21395

PAGE 1 OF 1

SERVICE LOCATIONS: HKS  
 WELL/PROJECT NO.: 41 LEASE: NLV COUNTY/PARISH: BOYD STATE: LA CITY: \_\_\_\_\_ DATE: 06-21-12 OWNER: \_\_\_\_\_  
 TICKET TYPE:  SERVICE  SALES CONTRACTOR: \_\_\_\_\_ RIG NAME/NO.: \_\_\_\_\_ ORDER NO.: \_\_\_\_\_  
 WELL TYPE: OIL WELL CATEGORY: Above JOB PURPOSE: DM WELLS PERMIT NO.: \_\_\_\_\_  
 INVOICE INSTRUCTIONS: \_\_\_\_\_

PRICE REFERENCE	SECONDARY REFERENCE PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE	AMOUNT
		LOC	ACCT	DF		QTY.	UM		
575					MILEAGE #112	50	mi	6.20	300.00
576-P					Pen Service	1	ea	1000.00	1000.00
575					DM	2	hr	35.00	70.00
588-4					HO-40 Ace 4 1/2" SS	170	sq ft	11.50	1955.00
581					Service CMC CRT	200	sq ft	2.00	400.00
583					DM/TK	419.5	hr	1.00	419.50

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: 06-21-12 TIME SIGNED: 02:30  A.M.  P.M.  
 REMIT PAYMENT TO:  
 SWIFT SERVICES, INC.  
 P.O. BOX 466  
 NESS CITY, KS 67560  
 785-798-2300  
 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?  YES  NO  
 CUSTOMER DID NOT WISH TO RESPOND

SWIFT OPERATOR: Dave APPROVAL: \_\_\_\_\_  
 CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES: The customer hereby acknowledges receipt of the materials and services listed on this ticket.  
 TOTAL: 4458.75  
 Tax: 26.4  
 Total: 4485.15  
 Thank You!

**JOB LOG**

**SWIFT Services, Inc.** **FILE**

DATE 06-21-12 PAGE NO. 1

CUSTOMER MURKIN DRLC

WELL NO. 41

LEASE N.L.V. PTA

TICKET NO. 2185

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL/GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0730							ON LOCATION CMT: 200 60-40 4% Gel 2 7/8 @ 3085 5 1/2 to 3330, 8 5/8 @ 185
	0820	40	0	/		0		START CMT
			18.0	/				START HULLS 75'
			23.8	/				CMT ON TD
	0830		36.0	/				END TBL DNUAC!
	0835				/		200	PSI TEST 8 5/8
	0845	30	0	/		0		START CMT ON TBL 4' HULLS 75'
		30	7.0	/		100		LOAD
		10	10.0	/		200		
	0850			/		200		
								CMT DOWN TBL 170 SWS 4' 150' HULLS
								8 5/8 @ FULL
	0930							THANK YOU! DAVE JASH DOUG