

**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

## 1164145

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	<sup>2</sup> l No. 15	5							
Name:				Spot Description:								
Address 1:			_		Sec Tw	vp S. R East West						
Address 2:					Feet from	North / South Line of Section						
City:	State:	Zip: +	_		Feet from	East / West Line of Section						
Contact Person:			Fo	otages (	Calculated from Neares	st Outside Section Corner:						
Phone: ( )					NE NW	SE SW						
	Other: Gas Sto  No If not, is well  All (If needed attach another  Top: Botto	SWD Permit #:  rage Permit #:  l log attached? Yes	Le Da No Th by:	ase Nar ate Well be pluggi : ugging C	me: Completed: ing proposal was appro	well #: (Date)  (KCC District Agent's Name)						
Depth to	Top: Botto	m:T.D										
Show depth and thickness of a		ations.										
Oil, Gas or Water				rd (Surfa	ace, Conductor & Produc	,						
Formation	Content	Casing	Size		Setting Depth	Pulled Out						
cement or other plugs were us						Is used in introducing it into the hole. If						
Plugging Contractor License #	<i>‡</i> :		Name:									
Address 1:			Address 2:									
City:			Sta	ate:		Zip:+						
Phone: ( )												
Name of Party Responsible fo	or Plugging Fees:											
State of	County, _		, s	SS.								
	(District Name )			Em	ployee 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

COMPONIDATED のなどを表を見る方としたの

FOREMAN Shannon Feck TICKET NUMBER LOCATION Foreka χ 38232

			MONT BED			
PO Box 884, Chanute, KS 66720 620-431-9210 or 800-467-8676	Ġ.	CEMENT	# 40t #	15-205-243	-24313	
DATE CUSTOMER#	WELL NAME & NUMBER	BER	SECTION	TOWNSHIP	RANGE	COUNTY
11-12-12   XIGO(0	Berck feldt #	#28	/2	295	341	wilson
CUSTOMER,	13 11 11	図				
Wilson County Holdings LLC	Holdings LLC		TRUCK#	DRIVER	TRUCK#	DRIVER
MAILING ADDRESS		Tones	520	John S		
III Congress F	Hue Ste 400		611	Joey K		
CITY /	N					
けつらかり	/ X 78701					
JOB TYPE P. T. A	HOLE SIZE	но <u>ге вертн</u> / 200/		CASING SIZE & WEIGHT	EIGHT	
CASING DEPTH	DRILL PIPE	TUBING		· · · · · · · · · · · · · · · · · · ·	OTHER	
SLURRY WEIGHT	SLURRY VOL	WATER gal/sk		CEMENT LEFT in CASING	CASING	
DISPLACEMENT	DISPLACEMENT PSI	MIX PSI		RATE		
REMARKS: Rig up to 1" Tubing inside	1" Tubing inside	of 23	" Tubing	of 25" Tubing, Break circula	40.14	mixed
50 SKS 60/ 90	50 SKS 60/40 POTMIN COMONY with 4% Gel. Plugged Solic	with	4% Gel.	Oligged	1	from
top to Bottom	top to Bottom, Keep Pipe full. Job complete.	706	omPlete.			

hanks

Shannon & CVEW

Revin 3737  AUTHORIZTION_									5407	1118B	//3/	0700		54h5A	ACCOUNT
Instrum Ruster			the same of the sa				The state of the s	6.	7 15 TOMS	175#	50 SKS	40	1/2	***************************************	QUANITY or UNITS
ппте	20 6			- The state of the				,	Ton uniferce by K Touck	@ 4%	60/40 POTMIX COMENT	MILENGE M/C OF COCEFION	,	DIMP CHARGE # 3 AF 6 walls	DESCRIPTION of SERVICES or PRODUCT
PATE 14-NOV-25/2	6.3% SALES TAX	Sub 76/41						7.0	m()	. 2)	12,55	10/10		475.00	UNIT PRICE
1531,10 W-2612	41.85	1489, 25						9	\$50.00	36.75	627. 50	Ċ		00 76.11	TOTAL

[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.