



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

KANSAS CORPORATION COMMISSION 1165344  
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



**CONSOLIDATED**  
Oil Well Services, LLC

*Stacy*

cc: WF  
cc: LR-1

KD

**REMIT TO**  
Consolidated Oil Well Services, LLC  
Dept. 970  
P.O. Box 4346  
Houston, TX 77210-4346

MAIN OFFICE  
P.O. Box 884  
Chanute, KS 66720  
620/431-9210 • 1-800/467-8676  
FAX 620/431-0012

INVOICE

Invoice # 243189

Invoice Date: 08/10/2011 Terms: 15/15/30,n/30 Page 1

MURFIN DRILLING  
P.O. BOX 288  
RUSSELL KS 67665  
( ) -

ROBERT 1-27  
28142  
27-2-42  
8-2-11  
KS

Part Number	Description	Qty	Unit Price	Total
1131	60/40 POZ MIX	360.00	14.3500	5166.00
1118B	PREMIUM GEL / BENTONITE	2838.00	.2400	681.12
1105	COTTONSEED HULLS	450.00	.5200	234.00

Sublet Performed	Description	Total
9999-130	CASH DISCOUNT	-912.17
9999-130	CASH DISCOUNT	-383.64

Description	Hours	Unit Price	Total
463 P & A OLD WELL	1.00	790.00	790.00
463 EQUIPMENT MILEAGE (ONE WAY)	60.00	5.00	300.00
T-127 TON MILEAGE DELIVERY	1.00	1467.60	1467.60

USED FOR PIA  
APPROVED JYR

Account	Unit	W	No.	Amount	Description
PA101	ZONE #	-27	6711	7771.93	CEMENT JOB #1-27

Amount Due 9143.45 if paid after 09/09/2011

Parts: 6081.12 Freight: .00 Tax: 429.02 AR **7771.93**  
Labor: .00 Misc: .00 Total: 7771.93  
Sublt: -1295.81 Supplies: .00 Change: .00

Signed \_\_\_\_\_

Date \_\_\_\_\_



**CONSOLIDATED**  
Oil Well Services, LLC

PO Box 884, Chanute, KS 66720  
820-431-9210 or 800-467-8678

TICKET NUMBER 28142

LOCATION Osley

FOREMAN Fuzzy

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
8-2-11	5406	Robert 1.27	27	2S	42W	Cherokee
CUSTOMER Mussins Dalg		St Francis 1W- N-27E W-27E 1/2S 4W-1/2W	TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS			463	John G.		
CITY			528	Danorum		
STATE			T-127			
ZIP CODE						

JOB TYPE AWP HOLE SIZE \_\_\_\_\_ HOLE DEPTH \_\_\_\_\_ CASING SIZE & WEIGHT 5 1/2  
 CASING DEPTH \_\_\_\_\_ DRILL PIPE \_\_\_\_\_ TUBING 2 7/8 - 4000' OTHER \_\_\_\_\_  
 SLURRY WEIGHT 14.2 SLURRY VOL 1.40 WATER gal/sk 6.7 CEMENT LEFT IN CASING \_\_\_\_\_  
 DISPLACEMENT \_\_\_\_\_ DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: Safety meeting on Murrin Workout Plus as ordered  
100SKS cement with 250# hulls @ 4000' Tail with 1600# gel  
50SKS cement with 100# hulls @ 3042'  
75SKS cement with 100# hulls @ 2942'  
50SKS cement - circulate from 400' to surface  
Top of 5 1/2 csg. with 10 SKS  
Pump 75SKS cement down B-side with about 50# perss

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405A	1	PUMP CHARGE	790.00	790.00
5406	60	MILEAGE	5.00	300.00
5407A	15.48 ton	Ton mileage Delivery	1.38	1467.60
1131	360 SKS	60/40 pos 4%	14.35	5166.00
118B	2838 #	Brandonite	1.24	681.12
110S	450 #	Cottonseed hulls	1.52	234.00
		Subtotal		8638.72
		less 1590 disc		1295.81
				7342.91
		243189		
			8.390	

Ravin 3737

AUTHORIZATION Book Sales TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
 SALES TAX 429.02  
 ESTIMATED TOTAL 7776.93

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.