

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

1168667

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 #:				API No. 15		
Name:				Spot Description:		
Address 1:				Sec Twp S. R East West		
Address 2:				Feet from North / South Line of Section		
City:				Feet from East / West Line of Section		
Contact Person:				Footages Calculated from Nearest Outside Section Corner:		
Phone: ()				NE NW SE SW		
Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic						
Water Supply Well	SWD Permit #:					
ENHR Permit #:	orage Permit #:		Date Well Completed:			
Is ACO-1 filed? Yes No If not, is well log attached? Yes No				The plugging proposal was approved on: (Date)		
Producing Formation(s): List All (If needed attach another sheet)				by:(KCC District Agent's Name)		
Depth to Top: Bottom: T.D				Plugging Commenced:		
Depth	om: T.D		Plugging Completed:			
Depth	to Top: Botto	om:T.D		g Completed		
Show depth and thickness o	of all water, oil and gas form	ations.				
Oil, Gas or Water Records			Casing Record (Su	ing Record (Surface, Conductor & Production)		
Formation	Content	Casing	Size	Setting Depth	Pulled Out	
ement or other plugs were	used, state the character of	f same depth placed from (bot	ttorn), to (top) for ea	cn plug set.		
Plugging Contractor License #:						
Address 1:			Address 2:			
City:			State:			
Phone: ()						
Name of Party Responsible	for Plugging Fees:					
State of County,			, SS.			
			F	mplovee of Operator or	Operator on above-described well,	
	(Print Name)				operate. on above accombod 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

70802

From 1066 H O Ahe #05 SEKAICE **TOTAL KEMYKKZ:** MILEAGE 7.0 OOH HYNDLING DKINEK # 0 BULK TRUCK 0 #3 d d - 110 DKINEK 0 BULK TRUCK 0 HELPER Cesor 0 CEMENTER **PUMP TRUCK** 0 0 Light Weight 400 EQUIPMENT 0171.05 562 0 YZC DISPLACEMENT 0 CHLORIDE *PERFS* 0 CEF CEMENT LEFT IN CSG 0 POZMIX SHOE 10INT MEAS. LINE 50 110 COMMON MINIMIM PRES. MAX DELLH LOOL DELLH DKILL PIPE 126 LUBING SIZE 23/8 DEPTH ANOUNT ORDERED 400 GOLLO UK CYZING ZIZE 2 DELLH HOFE SISE CEMENL **LXPE OF JOB** CONTRACTOR EXPRESS WELL SULENICE OMNEK OLD OR NEW (Circle one) COUNTY LOCATION Vec Wa Keeney K-S LEASE R'ELMELL# A - 2 J. 60 P.M. S E BYNGE Z P ON LOCATION CALLED OUT Liberal K.S. RUSSELL, KANSAS 67665 SERVICE POINT: REMIT TO P.O. BOX 31 Federal Tax I.D.# 20-5975804 ALLIED CEMENTING CO

TOTAL CHARGE TO: Sand I'm O' 1 Corp 0 0 Primped Censent on Back 5: de 0 **MANIFOLD** OPTO HO(MILEAGE EXTRA FOOTAGE 1185 PUMP TRUCK CHARGE 50# C 0398 DEPTH OF JOB CH 18801 O Behind

dIZ. STATE CILK STREET

TERMS AND CONDITIONS" listed on the reverse side. contractor. I have read and understand the "GENERAL done to satisfaction and supervision of owner agent or contractor to do work as is listed. The above work was and furnish cementer and helper(s) to assist owner or You are hereby requested to rent cementing equipment To Allied Cementing Co., LLC.

SIGNATURE SIGNATURE PRINTED NAME FLE & BAI BOL

as 846 65 10 b IF PAID IN 30 DAYS DISCOUNT TOTAL CHARGES 0055011 SALES TAX (If Any)

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STATE STATE

10B FINISH

PLUG & FLOAT EQUIPMENT