

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

1170624

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 #: | | | APIN | lo. 15 | | | | | |
|--|------------------------------|-------------------|---------------|---|--|--|--|--|--|
| Name: | | | | Spot Description: | | | | | |
| Address 1: | | | | Sec Twp S. R East West | | | | | |
| Address 2: | | | | Feet from North / South Line of S | | | | | |
| City: | State: | Zip:+ | | Feet from East / West Line of Section | | | | | |
| Contact Person: | | | Foota | Footages Calculated from Nearest Outside Section Corner: NE NW SE SW County: Lease Name: Date Well Completed: | | | | | |
| Phone: () | | | | | | | | | |
| Type of Well: (Check one) (Che | Other: Gas Sto | SWD Permit #: | Lease | | | | | | |
| Is ACO-1 filed? Yes | _ | log attached? Yes | | The plugging proposal was approved on: | | | | | |
| Producing Formation(s): List A | | | | | (KCC District Agent's Name) | | | | |
| • | • | m: T.D | I Plugo | ging Commenced: | | | | | |
| • | | m: T.D | Plugg | ging Completed: | | | | | |
| Depth to | 5 TOP BOILO | m: T.D | | | | | | | |
| Show depth and thickness of | all water, oil and gas forma | ations. | ' | | | | | | |
| Oil, Gas or Water | r Records | | Casing Record | (Surface, Conductor & Produ | uction) | | | | |
| Formation | Content | Casing | Size | Setting Depth | Pulled Out | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Describe in detail the manner cement or other plugs were us | . 00 | | • | | ods used in introducing it into the hole. If | | | | |
| Plugging Contractor License # | # : | | Name: | | | | | | |
| Address 1: | | | Address 2: | | | | | | |
| City: | | | State: | | Zip:+ | | | | |
| Phone: () | | | | | | | | | |
| Name of Party Responsible for | or Plugging Fees: | | | | | | | | |
| State of | County | | SS | | | | | | |
| - | | | | F | 0 | | | | |
| | (Print Name) | | | Employee 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





P. O. Box 466

Ness City, KS 67560

Off: 785-798-2300



Invoice

| DATE | INVOICE # | | | |
|----------|-----------|--|--|--|
| 4/7/2008 | 14013 | | | |

BILL TO

Murfin Drilling Co Inc PO Box 661 Colby, KS 67701-0661

- Acidizing
- Cement
- Tool Rental

| TERMS | Well N | o. Lease | County | Contractor | We | І Туре | W | ell Category | Job Purpose | e Operator |
|---|--------|---|---------------------------------|-----------------|--------------|--------|---|--------------|---|--|
| Net 30 | #1-6 | Cahoj B | Rawlins | Murfin Drilling | | Oil | | Workover | PTA | Dave |
| PRICE | REF. | | DESCRIPT | TION | • | QTY | , | UM | UNIT PRICE | AMOUNT |
| 575W 576W-P 275 278 279 290 328 581W 583W | | Mileage - 1 Way Pump Charge - PTA Cotton Seed Hulls Calcium Chloride Bentonite Gel D-Air Swift Light 60/40 Po Service Charge Cem Drayage Subtotal Sales Tax Rawlins C | ozmix (4% Gel) ent county | SED FOR | 57.4 11.4 | 2,20 | 1 9 1 5 2 335 350 2.38 | 1 * * * * 1 | 6.00 850.00 28.00 40.00 24.00 35.00 10.50 1.90 1.75 | 900.00T 850.00T 252.00T 40.00T 120.00T 70.00T 3,517.50T 665.00T 3,854.17T 10,268.67 646.93 |
| Thanl | k You | For Your | Busines | s! | | | | Tota | | \$10,915.60 |

| 100 | B | ^^ |
|-----|----|----|
| JOB | .L | UG |

SWIFT Services, Inc.

DATE 04/07-08 PAGE NO

| <u> 108 FO</u> | | | | | | | | ceo, inc. | 100407-03 10g | |
|--------------------|-----------------|--------------|------------------------------|--|--|--|--|--|----------------------|--|
| CUSTOMER MURFWIRLG | | WELL NO. | | | LEASE CAH | οŢ | JOB TYPE PTA | TICKET NO. 14013 | | |
| CHART NO. | TIME RATE (BPM) | | VOLUME PUMPS (BBL) (GAL) T C | | | PRESSUR TUBING | E (PSI) CASING | DESCRIPTION OF OPERATION AND MATERIALS | | |
| | 0900 | 1 | | | | | | DAROCKTION, SITUR, DISCH | <u>ಜ ರ</u> ಾಣ | |
| · . | | | | | | | | CMY: 350SIAS 60-40 per: 4% | ICE, 800 HAVES, ISAC | |
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| | 1050 | | 65 | _ | | 300 | | ENA CMT SYOSUS | CMTW/SDO# HULLS | |
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| | 1200 | | <i>5</i> .0 | | , | | /00 | HOW ON 85/8 21 | OSUS | |
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