



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

KANSAS CORPORATION COMMISSION 1184097
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.

(Print Name) Employee of Operator or Operator on above-described well,

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



265385

TICKET NUMBER 43060

LOCATION Oakley KS.

FOREMAN Damon M.

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

**FIELD TICKET & TREATMENT REPORT
CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
1-15-14	5659	LUTERSA 1-20/SNOOGRASS #1	20	15S	15W	TREGO
CUSTOMER MULL DRILLING			WARRNEY S 20 mi E INTO			
MAILING ADDRESS 1700 N WATERFRONT			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY WITCHITA			399	DANE R		
STATE KS.			530-T-127	COBY R.		
ZIP CODE			460	JEREMY R		

JOB TYPE OHP HOLE SIZE ~~2 7/8~~ HOLE DEPTH _____ CASING SIZE & WEIGHT 5 1/2
 CASING DEPTH 2085 DRILL PIPE _____ TUBING 2 7/8 OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: SAFETY MEETING RIG UP ON WELL PLUG AS ORDERED 230 SKS 60/40 4% GEL #14 #10
201 SKS TO SURFACE
15 SKS BACKSIDE 150#
14 SKS TOP OFF

THANK YOU DAMON & CREW

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405N	1	PUMP CHARGE	1395.00	1395.00 ✓
5406	20	MILEAGE	5.25	105.00 ✓
5407	9.9	TON MILEAGE DELIVERY (MIN)	430.00	430.00 ✓
1131	230 SKS	60/40 P02	15.86	3647.80 ✓
1188	791#	BETONITE	.27	213.57 ✓
1107	58#	FLOSEAL	2.97	172.26 ✓
1105	300#	COTTONSEED HOLES	.58	174.00 ✓
1111	200#	SALT	N/C	N/C ✓
			SUBTOTAL	6137.63 ✓
			LESS 10%	613.76 ✓
			SUBTOTAL	5523.87 ✓
<input checked="" type="checkbox"/> completed				
			SALES TAX	289.70 ✓
			ESTIMATED TOTAL	5813.57 ✓

Revin 3737

AUTHORIZATION [Signature] TITLE Prod. Foreman DATE 7-1-05

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.