

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

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 #:			API No. 1	15	
				scription:	
Address 1:				Sec	Twp S. R East West
Address 2:				Feet from	North / South Line of Section
City:	State: _			Feet from	East / West Line of Section
Contact Person:			Footages	Calculated from Nea	rest Outside Section Corner:
Phone: ()				NE NW	SE SW
Type of Well: (Check one)	Oil Well Gas Well	OG D&A Cathod	ic County:		
Water Supply Well	Other:	SWD Permit #:			Well #:
ENHR Permit #:	Gas	Storage Permit #:			
Is ACO-1 filed? Yes	No If not, is	well log attached? Yes		•	proved on: (Date)
Producing Formation(s): Lis	t All (If needed attach and	other sheet)	by:		(KCC District Agent's Name)
Depth	to Top:	Bottom: T.D	Plugging	Commenced:	
Depth	to Top: E	Bottom: T.D			
Depth	to Top: E	Bottom: T.D			
Show depth and thickness of	of all water, oil and gas f	ormations.			
Oil, Gas or Wat	ter Records		Casing Record (Sur	face, Conductor & Prod	luction)
Formation	Content	Casing	Size	Setting Depth	Pulled Out
		lugged, indicating where the muc er of same depth placed from (bot			ods used in introducing it into the hole. If
33 3					
Address 1:			Address 2:		
·					
Phone: ()					
Name of Party Responsible	for Plugging Fees:				
State of	Cour	nty,	, SS.		
	(Print Nam		Er	mployee of Operator o	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

810 E 7TH PO Box 92 EUREKA, KS 67045 (620) 583-5561

Cementing & Acidizing of Kansas, LLC

Cement or Acid Field Report
Ticket No. 1066
Foreman Levin McCoy
Camp Eureka

API # 15-001-22056

Date	Customer ID #	Leas	e & Well Number		Section	То	wnship	Range	County		State
1/30/14	/003	Wolfe	Rw-29		24	p	?55	19E	ALLEN		Ks
Customer				Safety	Unit#		Driv		Unit#		Driver
(OLT ENERGY	INC		Meeting	102		SHANN	on F.			
Mailing A	ddraee	/// 😅		Km	//0		Rudy	M.			
_	?o. 388			S-F RM			· ·			-	
City		State	Zip Code	7						<u> </u>	
I	OlA	Ks	66749			*****				,	
Job Type	P.T.A. Cold	سودد) Hole Dep	th		Slurry Vol			-	Tubing <u>2</u> ".		
	•	-	e		-				Orill Pipe		
•				•							
-				Nater Gal/SK Other							
Displace	ment	Displace	ement PSI		Bump Plug to			I	3PM		**************************************
Remark	s: <u>SAFety Mee</u>	ting: RAN	1" Tubing in	iside =	"Tobing	to e	975'	Pump	Solid Cemen	it Pl	1, 875°
to 5	URFACE. PULL	1" Tubing	TOD OFF WELL	6 w/ Ce	ment. Tot	6A1.	Cemen	1 to E	Nua WELL = e	?5" sx:3	60/40
	IX Cement w/								7		
		į		2							
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Code	Qty or Units	Description of Product or Services	Unit Price	Total
C 105-2	1	Pump Charge	500.00	500.00
C 107	9	Mileage IN Field 2 Nd well of 4	-	N/c
203	25 sks	60/40 POZMIX CEMENT	12.75	.318.75
206	85 #	Gel 4%	. 20	17.00
: 108 A	1.07 TONS	Ton MileAge	1/2 OF M/C	172.50
		,		
		·		
		THANK YOU 7.4%	Sub TotAL Sales Tax	1008.25
	7	S /////		74.61
Authoriz	ation	3 / tallfred Title	Total	1082.8