



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

KANSAS CORPORATION COMMISSION 1203356  
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



267441

TICKET NUMBER 47625

LOCATION Orkley, Mo.

FOREMAN Dawn Racotta

PO Box 884, Chanute, KS 66720  
 820-431-9210 or 800-467-8676

**FIELD TICKET & TREATMENT REPORT  
 CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
4/16/14	5659	Coberly Unit 1-20	20	13	27	Boone, Mo.

TRUCK #	DRIVER	TRUCK #	DRIVER
512	Cory		
460	Steven		
	Michael		
	Tyler		

CUSTOMER: Mall Drilling  
 MAILING ADDRESS: \_\_\_\_\_  
 CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
 JOB TYPE: PTA HOLE SIZE: \_\_\_\_\_ HOLE DEPTH: 4470 CASING SIZE & WEIGHT: \_\_\_\_\_  
 CASING DEPTH: \_\_\_\_\_ DRILL PIPE: 4 1/2 2059' TUBING: \_\_\_\_\_ OTHER: \_\_\_\_\_  
 SLURRY WEIGHT: 12.5 To 13 SLURRY VOL: \_\_\_\_\_ WATER gal/sk: \_\_\_\_\_ CEMENT LEFT in CASING: \_\_\_\_\_  
 DISPLACEMENT: \_\_\_\_\_ DISPLACEMENT PSI: \_\_\_\_\_ MIX PSI: \_\_\_\_\_ RATE: \_\_\_\_\_

REMARKS: Safety Meeting Rig up on well #8 Plug as ordered.

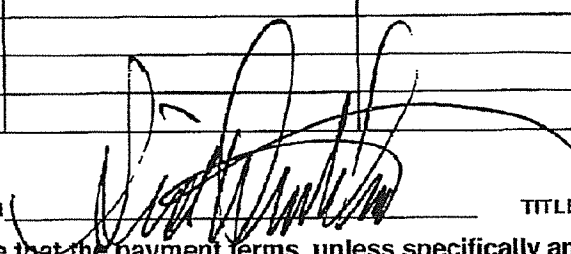
2059' - 25 SKS  
1087' - 100 SKS  
266' - 40 SKS 2059' 60/40 4% Gel 1/4" Flo Seal  
40' - 10 SKS  
Plug Rat hole 30 SKS

*Thanks Dawn + Crew*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405 N	1	PUMP CHARGE	\$1395. <sup>00</sup>	\$1395. <sup>00</sup>
5406	35	MILEAGE	\$5. <sup>25</sup>	\$183. <sup>75</sup>
5407A	8.82	Ton Privilege Delivery	\$1. <sup>75</sup>	\$540. <sup>22</sup>
1131	205 SKS	60/40 Poz mix	\$15. <sup>86</sup>	\$3251. <sup>30</sup>
1118 B	705*	Bentonite	\$0. <sup>27</sup>	\$190. <sup>35</sup>
1107	51"	Flo Seal	\$2. <sup>97</sup>	\$151. <sup>47</sup>
1111	100*	Salt	NC	NC
4432	1	8 3/8 Wooden plug	\$100. <sup>75</sup>	\$100. <sup>75</sup>
			SubTotal	\$5812. <sup>84</sup>
			Less 10%	\$581. <sup>28</sup>
			SubTotal	\$5231. <sup>56</sup>

**completed**

SALES TAX 262.64  
 ESTIMATED TOTAL 5494.20

AUTHORIZATION:  TITLE: \_\_\_\_\_ DATE: \_\_\_\_\_

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.