



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

KANSAS CORPORATION COMMISSION 1204665
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

Hurricane Services, Inc.
 3613 A Y Road
 Madison, KS 66860
 Office # 620-437-2661
 Brad Cell # 620-437-6765



HURRICANE SERVICES INC
 OILFIELD SERVICES
 MADISON, KANSAS

Ticket Number 100418
 Location _____
 Foreman Dwayne / Joe

Cement Service ticket

Date	Customer #	Well Name & Number	Sec./Township/Range	County
4-15-14		McDonald KR-4	19-22-27	Linw
Customer KANSAS Resources		Mailing Address	City	State Zip

Job Type: Plug & Abandon

Job Type: <u>Plug & Abandon</u>			Truck #	Driver
1" Fill up POA			231	Tom
Hole Size: <u>5 7/8</u>	Casing Size:	Displacement:	240	Scott - Allen
Hole Depth: <u>650</u>	Casing Weight:	Displacement PSI:	108	Mitch
Bridge Plug:	Tubing: <u>1" 650</u>	Cement Left in Casing:	111	Aernold
Packer:	PBTD:		25	Dwayne

Quantity Or Units	Description of Services or Product	Pump charge	
25 mi	Mileage <u>All Ready on locations</u>	\$3.25/Mile	NC
25 mi	Foreman Pick up	1.50	NC
115 SK	50/50 Poz Mix	11.30	1299.50
193 LBS	2% IW Cement	.30	57.90
2400 Gal	Water	1.3 gal	31.20
2.25hr	water truck #108	84	189.00
2.25hr	water truck #111	84	189.00
4.83 Tons	Bulk Truck <u>MINIMUM charge</u>	\$1.15/Mile	300.00
	Plugs		
		Subtotal	2741.60
		Sales Tax	
		Estimated Total	

Remarks: Hooked onto 1" tubing Pumped 35 SK Cement Pulled 200 Ft tubing Hooked onto 1" tubing pumped 35 SK Cement. Pulled 200 Ft tubing Hooked onto 1" tubing Pumped 35 SK Cement Pulled Remaining 250 Ft 1" topped off with 10 SK Cement

2nd well charge