



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

KANSAS CORPORATION COMMISSION 1206211
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

GLOBAL CEMENTING, L.L.C.

1321

REMIT TO 18048 170RD
RUSSELL, KS 67665

SERVICE POINT: Russell KS

DATE <u>5-8-14</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START <u>10:15am</u>	JOB FINISH <u>10:45am</u>	
LEASE <u>Page</u>	WELL #. <u>2</u>		LOCATION			COUNTY <u>MCOKS</u>	STATE <u>KS</u>	
OLD OR NEW (CIRCLE ONE)								

CONTRACTOR <u>Express Well Service</u>	
TYPE OF JOB <u>PTA</u>	
HOLE SIZE _____	T.D. _____
CASING SIZE <u>4 1/2</u>	DEPTH _____
TUBING SIZE <u>2 3/8</u>	DEPTH _____
DRILL PIPE _____	DEPTH _____
TOOL _____	DEPTH _____
PRES. MAX _____	MINIMUM _____
MEAS. LINE _____	SHOE JOINT _____
CEMENT LEFT IN CSG. _____	
PERFS _____	
DISPLACEMENT _____	
EQUIPMENT	
PUMP TRUCK _____	CEMENTER <u>with</u>
# <u>P1</u>	HELPER <u>Cody - Brock</u>
BULK TRUCK _____	
# <u>188</u>	DRIVER <u>Eric</u>
BULK TRUCK _____	
# _____	DRIVER _____

OWNER _____	
CEMENT AMOUNT ORDERED <u>3958 60/40 4% gel</u>	
COMMON _____	@ _____
POZMIX _____	@ _____
GEL _____	@ _____
CHLORIDE _____	@ _____
ASC _____	@ _____
_____	@ _____
_____	@ _____
_____	@ _____
_____	@ _____
_____	@ _____
_____	@ _____
_____	@ _____
_____	@ _____
HANDLING _____	@ _____
MILEAGE _____	@ _____
TOTAL	_____

REMARKS:
1st Plug @ 2700 - 1500' - 300' hulls
2nd Plug @ 1700 - 1500' and came out of hole and top off with 20' and more to backside pump disk - plug at 15' with 15'.

SERVICE

DEPTH OF JOB _____	
PUMP TRUCK CHARGE _____	
EXTRA FOOTAGE _____	@ _____
MILEAGE <u>26.22</u>	@ _____
MANIFOLD _____	@ _____
_____	@ _____
_____	@ _____
TOTAL	_____

CHARGE TO: Anderson
 STREET _____
 CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

_____	@ _____
<u>300' hulls</u>	@ _____
_____	@ _____
_____	@ _____
_____	@ _____
TOTAL	_____

Global Cementing, L.L.C.,
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side. THANK YOU!

PRINTED NAME _____
 SIGNATURE _____

SALES TAX (If Any) _____
 TOTAL CHARGES _____
 DISCOUNT _____ IF PAID IN 30 DAYS