

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

1209975

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. 15	5											
Name:				Spot Desc	ription:											
Address 1:					Sec 7	wp S.	R East West									
Address 2:				Feet from North / South Line of Section Feet from East / West Line of Section Footages Calculated from Nearest Outside Section Corner:												
									Phone: ()					NE NW	SE	SW
									Type of Well: (Check one)	Oil Well Gas Well	OG D&A Cathodi	ic	County:			
Water Supply Well	Other:	SWD Permit #:		-			Well #:									
ENHR Permit #:	Gas Sto	rage Permit #:					vveii #									
Is ACO-1 filed? Yes	No If not, is well	l log attached? Yes	No				(Date)									
Producing Formation(s): List A	All (If needed attach another	sheet)					(KCC District Agent's Name)									
Depth to	o Top: Botto	m: T.D		•												
Depth to	o Top: Botto	m: T.D														
Depth to	o Top: Botto	m:T.D		Plugging C	completea:											
Show depth and thickness of	all water, oil and gas forma	ations.														
Oil, Gas or Water	r Records		Casing I	Record (Surfa	ace, Conductor & Prod	uction)										
Formation	Content	Casing	Size		Setting Depth	Pulled Out	t									
cement or other plugs were u	sed, state the character of	same depth placed from (bot	ttom), to (top) for each	n plug set.											
Plugging Contractor License #:			Name: _	me:												
Address 1:			Address	2:												
City:				State:		Zip:	+									
Phone: ()				-												
Name of Party Responsible for	or Plugging Fees:															
State of	County, _			, ss.												
	,				ployee of Operator or	05	or on above-described well,									
	(Print Name)			_ <u></u> Em	pioyee of Operator of	Operato	n 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

ELMORE'S INC.

Box 87 - 776 HWY99 Sedan, KS 67361

Cell: (620) 249-2519 Eve: (620) 725-5538

				9
Date				3 T
from	1	11	121	
-	1	7 -	17	

Custom	ner Kansas Energy						
Addres				14			
City	State Zip						
Qty.	Description	Price	Amou	ınt			
4	ha Coment Pump	120	440.	00			
1	Bank Tank	85,00	85.	00			
145	SKS Coment	11,00	1595	00			
2	Sks Gel	16,00	32,	00			
2	Perforations	200,00	400	00			
			2552,	00			
v	Dumham Lemon #21	Tax	20%	99			
	Plug Jeb	8,	259	99			
	Ran 1" Togso Gel Hole						
	Spotted 20 Sks Comput						
t a	Pulled I" Out Pertovated						
	Casing A+ 700' + 350' Ran						
	I" IN Well To 200' Spots	00					
	20 Sts Coment Pulled Upto)					
		W: 44					
	105 SKS Coment,						
				9			

TERMS: Account due upon receipt of services. A 11/2% Service Charge, which is an annual percentage rate of 18% will be charged to accounts after 30 days.

STAPLES STORE #0501 (918) 335-9135

Rec'd. by

Ref. No: G 571400776