



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

KANSAS CORPORATION COMMISSION 1213249  
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

# COPELAND

Acid & Cement

POST OFFICE BOX 438  
 HAYSVILLE, KS 67060  
 (316) 524-1225  
 (316) 524-1027 FAX

**Invoice**

BURRTON, KS    ♦    GREAT BEND, KS  
 (620) 463-5161    (620) 793-3366  
 FAX (620) 463-2104    FAX (620) 793-3536

INVOICE NUMBER:  
**C42678-IN**

**BILL TO:**  
**CARMEN SCHMITT, INC.**  
**P.O. BOX 47**  
**GREAT BEND, KS 67530**

**LEASE: GAMBEL 9**

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE ORDER	SPECIAL INSTRUCTIONS	
07/31/2014	C42678		07/30/2014		NET 30	
QUANTITY	U/M	ITEM NO./DESCRIPTION		D/C	PRICE	EXTENSION
45.00	MI	CEMENT MILEAGE PUMP TRUCK		0.00	4.00	180.00
45.00	MI	CEMENT MILEAGE PU TRUCK		0.00	2.00	90.00
1.00	EA	CEMENT PUMP CHARGE		0.00	650.00	650.00
220.00	SAX	60-40 POZ MIX 2% GEL		0.00	10.00	2,200.00
4.00	SAX	2% ADDITIONAL GEL		0.00	22.00	88.00
224.00	EA	BULK CHARGE		0.00	1.25	280.00
444.60	MI	BULK TRUCK - TON MILES		0.00	1.10	489.06
<p>12380.0009                      7/10/43                      "Well File"</p>						
<b>REMIT TO:</b> P.O. BOX 438 HAYSVILLE, KS 67060		COP		Net Invoice:		3,977.06
		FUEL SURCHARGE IS NOT TAXABLE AND IS ADDED TO MILEAGE, PUMP AND OR DELIVERY CHARGES ONLY.		ROOCO Sales Tax:		39.98
RECEIVED BY _____		<b>NET 30 DAYS</b>		<b>Invoice Total:</b>		<b>4,017.04</b>

There will be a charge of 1.5% "per month" (18% annual rate) on all accounts over 30 days past due.

Copeland Acid & Cement is a subsidiary of Gressel Oil Field Service

Gressel Oil Field Service reserves a security interest in the goods sold until the same are paid for in full and reserve all the rights of a secured party under the Uniform Commercial Code.



TREATMENT REPORT

Acid Stage No. \_\_\_\_\_

Date 7/30/2014 District G.B. F.O. No. C42678
Company Carmen Schmitt
Well Name & No. Gambel #9
Location Field
County Rooks State KS

Type Treatment: Amt. Type Fluid Sand Size Pounds of Sand
Bkdown Bbl./Gal.
Flush Bbl./Gal.
Treated from ft. to ft. No. ft. 0

Casing: Size 5.5" Type & Wt. Set at ft.
Formation: Perf. to
Formation: Perf. to
Formation: Perf. to

Actual Volume of Oil / Water to Load Hole: Bbl./Gal.

Liner: Size Type & Wt. Top at ft. Bottom at ft.
Cemented: Yes Perforated from ft. to ft.
Tubing: Size & Wt. 2" Swung at ft.
Perforated from ft. to ft.

Pump Trucks. No. Used: Std. 320 Sp. Twin
Auxiliary Equipment 360/310
Personnel Nathan Greg Joe
Auxiliary Tools

Open Hole Size T.D. ft. P.B. to ft.

Plugging or Sealing Materials: Type Gals. lb.

Company Representative Curtis H. Treater Nathan W.

Table with columns: TIME, PRESSURES (Tubing, Casing), Total Fluid Pumped, REMARKS. Contains entries for 9:45 and 11:30 with remarks like 'On Location', 'Tie on 2" tubing...', 'Circulated cement to surface...', 'Shut in.', 'Total=220sk.', 'Thank You!', 'Nathan W.'