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

## KANSAS CORPORATION COMMISSION

**OIL & GAS CONSERVATION DIVISION** 

1215965

March 2009 Type or Print on this Form Form must be Signed All blanks must be Filled

Form CP-4

## WELL PLUGGING RECORD K.A.R. 82-3-117

OPERATOR: License #:	Spot Description:
Address 1:	
Address 2:	Feet from North / South Line of Section
City: State: Zip:+	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ( )	NE NW SE SW
Type of Well: (Check one)  Oil Well  Gas Well  OG  D&A  Cathodic    Water Supply Well  Other:  SWD Permit #:  SWD Permit #:  SWD Permit #:    ENHR Permit #:  Gas Storage Permit #:  Gas Storage Permit #:  SWD Permit #:  SWD Permit #:    Is ACO-1 filed?  Yes  No  If not, is well log attached?  Yes  No    Producing Formation(s): List All ( <i>If needed attach another sheet</i> )  Storm:  T.D.  Storm:  T.D.	County: Well #: 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)			tion)
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:	Name:				
Address 1:		Address 2:					
City:		State:	Zip: +				
Phone: ( )							
Name of Party Responsible for Plug	ging Fees:						
State of	County,	, SS.					
	(Print Name)	Employee of Operato	r or Operator on above-described well,				

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.

FED ID# MC ID # Shop # Cellular # Office #	48-1214033 165290 620 437-2661 620 437-7582 316 685-5908	Hurricane Services, Inc. P.O. Box 782228 Wichita, KS 67278-2228	Servic	cid or Tools e Ticket 3451
Office Fax #	316-685-5926 3613A Y Road		date	-09
Madia	son, KS 66860	COUNTY Alles CITY	(	
	Southow? STO	COUNT CITY ST ST ST CITY ST ST CONTRACTOR		
			ZIP	
LEASE & WELL	NO. Drake #01	CONTRACTOR _Hu	Hican Servi, R	<u>'s *1</u>
	Dia Ala la 2	SEC TWP.		
DIR. TO LOC.		1struellof Day.3		OLD NEW
Quantity	MA	TERIAL USED	Serv. Charge	700,00
	Daylor char Ar	ement		650.00
94 Ibs	Cal 22			23.50
17 18	<u> </u>			
2 Hz	Water Truck	*193		160,00
				672.00
		Hoses		50.00
	BULK CHARGE		<u> </u>	131,45
2,39 Tous				NIC
	PUMP TRK. MILES			
	PLUGS			
· · · · · ·	FLOGO	6:	376 SALES TAX	42.43
		Owned a	TOTAL	1757.38
	NOTE ! City water			VOLUME
	· · · · · · · · · · · · · · · · · · ·			
			Tubing	
			D	
	$\mathcal{D}_{i} = I''_{i} \mathcal{D}_{i} = \mathcal{D}_{i}$	- QUD - Break a Unitation (7B)	12) - Ctreater 1.	cul clean
a 1 D	1 102 CJ +	Ill we got good CEMENT FETWAS > Mike	<u>20 V/ 6 000</u>	
	Commile Comment	ST. LAND - PLESSUE 95 600	Hale, Turne Al III	
hand 100	P <t< td=""><td>Used 50.sks. Regular Co</td><td>mut up 2 2 Gei</td><td></td></t<>	Used 50.sks. Regular Co	mut up 2 2 Gei	
NAME	V	UNIT NO. NAME	+91 T	193
Kelly	Kimbally	UNIT NO. NAME, 185 Jerry - Adde	n 11, Javou	
/	Brad Butter		OWNER'S REF	
	HSI REP.			

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2277451

FED ID # Shop # Cellular # Office # Office Fa MC ID # Shop Add	(620) 437-2661 ≭ (620) 437-7582 (316) 685-5908 x # (316) 685-5926 165290 dress: 3613A Y Road	Hurricane Services, In Cementing & Circulating Divis P.O. Box 782228 Wichita, KS 67278-2228	ion	CD OCT 1	<b>3</b> 2009
ATTN: A P O BOX OWENSI	RN STAR CENTRAL GAS CCTS PAYABLE 20010 BORO KY 42304	PIPELINE INC 0. 47608 3401200	Invoice Date Invoice # Lease Name Well # County: ここのん-ご		9/30/2009 14836 DRAKE 01 PIN #47608 ALLEN
Date 9/30/200	attached Service ticket a Regular Class A cen Gel 2% Equipment rental - 1 Water truck #193 - C Bulk truck mileage Pump charge Pump truck mileage Contrac	nent ' Swivel and hoses 'ustomer's account for water	Hrs/Qty 50.00 94.00 1.00 1.00 1.00	Rate 13.00 0.25 50.00 80.00 131.45 700.00	Total 650.00T 23.50T 50.00 160.00 131.45 700.00
			Sales Tax (	(6.3%)	\$42.43

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Total \$1,757.38

All invoices are due upon receipt. Interest at the rate of 1 1/2% per month may be charged on all invoices not paid within 30 days from date of invoice.

## WE APPRECIATE YOUR BUSINESS!

227745-1

FED ID # Shop#	(620) 437-2661	Hurricane :	•			
Shop Fax Office # Office Fa	(316) 685-5908	P.O. B	<b>cing Divisio</b> ox 782228 3 67278-2228		OCT 1 3	2009
Shop Add	lress: 3613A Y Road Madison, KS 66860					
ATTN: AC P O BOX OWENSE	RN STAR CENTRAL GAS CCTS PAYABLE 20010 DORO KY 42304	PIPELINE INC 0. 47608 34D18	L	nvoice Date Invoice # ease Name Well # みのの & County	01-1 -5053	9/30/2009 3806 DRAKE PIN #47608 576 ALLEN
Date		Description	<i>b</i> .	HRS/QTY	Rate	Total
9/29/2009 9/30/2009	Tripped in hole with 26 j plus or minus and TD at Out of cement and can't locked up. Drove to sho Drove to location. Starte cementers and waited o Tripped out of hole with Cemented top of well, pu loaded equipment and d	d up, held safety meeting a bints of 1" tubing to 847.27' 916.5'. Waited for trucks to get water. Shut down, capp o per attached work ticket # d rig and held safety meetir n water. Cemented well to s 1" tubing and loaded tubing essured up and closed in w rove to next location per att	Perfs at 840-47 get on location. bed well and 24390 of Rig #1. Ig. Hooked up surface at 847'. onto trailer. yell. Rigged down	3.50	140.00	490.00
	#24391 of Rig #1.			3.00	140.00	420.00
	Tubing trailer - Daily cha Working string of tubing	rge		1.00 847.00	250.00 0.50	250.00 423.50
	RFS 51	7 - CONTRACT #2006-505	3,1			
	SSC	00000177428				
			S	ales Tax (6	5.3%)	\$99.76
				Т	otal \$1	,683.26

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