

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

1219699

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. 1	5				
				Spot Des	cription:				
Address 1:					Sec	Twp S. R	East West		
Address 2:					Feet from	North / South	th Line of Section		
City:	State:	Zip:+			Feet from	East / Wes	t Line of Section		
Contact Person:				Footages	Calculated from Near	rest Outside Section Co	rner:		
Phone: ()					NE NW	SE SW			
Type of Well: (Check one)		= -		County: _					
Water Supply Well		SWD Permit #:		Lease Na	ame:	Well #:_			
ENHR Permit #:	_	orage Permit #:	-, I						
Is ACO-1 filed? Yes	—	ell log attached? Yes	No	The plug	ging proposal was app	proved on:	(Date)		
Producing Formation(s): List				by:		(KCC Dis	t rict Agent's Name)		
Depth to	•	om: T.D		Plugging	Commenced:				
•	•	om: T.D		Plugging Completed:					
Depth to	o Top: Bott	om:T.D							
			I						
Show depth and thickness of	all water, oil and gas form	nations.							
Oil, Gas or Wate	r Records		Casing F	Record (Sur	face, Conductor & Prod	luction)			
Formation	Content	Casing	Size		Setting Depth	Pulled Out			
		ged, indicating where the muc f same depth placed from (bo		•		ods used in introducing	it into the hole. If		
Plugging Contractor License	#:		Name: _						
Address 1:			Address	2:					
City:				State:		Zip:	+		
Phone: ()				-					
Name of Party Responsible for	or Plugging Fees:								
State of	County,			, SS.					
	•				anlovee of Operator of	r Operator on abo	vo-described well		
	(Print Name)			=[1	inproyee or Operator of	Detailed on about	re-uescribed 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

300 4011

810 E 7TH PO Box 92 EUREKA, KS 67045 (620) 583-5561 ノン- スククース 36 フケ



Cement or Acid Field Report

Ticket No. ______1612

Foreman Rick Led-Gold

Camp Evieno 1/5

			A 111 11 17			I no		· · · · · · · · · · · · · · · · · · ·			
Date	Cust. ID#	·	e & Well Number		Section	Tow	/nship	Range	Cou	inty	State
8/11/14	1003	Aller	/##J/	4	14	_2	6	14/	Wood	sou	15
Customer				Safety	Unit#		Driv	/er	Unit#		Driver
$-\alpha$	14 En .	249 V, Z	110	Meeting	102		Chi	5 B.			
Mailing Address	1 2.	- 		1 1/4	113		Shan	nen 7.		1 1	
P.O.	Bev 3	8-8-		10	MARTINARIA ATRIONIA AMANTENA ATRIONIA		17.		to the property of		
City,		State	Zip Code	7						orania de la composition della	
Ida		15	66749			$\overline{}$	<u>.</u>	•			
			L. 7.7.7	<u> </u>		<u>4</u>					
Job Type	7.0	Hole Der	oth <u>1399</u>	Managara da la sa	Slurry Vol				ubing 22	8	
Casing Depth		Holo Si-	e 63/4"		Slurry Wt.		,		orill Pipe		
Casing Debui	21/2		· · · · · · · · · · · · · · · · · · ·								-
Casing Size & W	11Z:/3.,.Z.	S_ZT/Cement L	eft in Casing	AMPAINMENT TO THE	Water Gal/SK	***************************************		C)ther		
Displacement		Displace	ement PSI	<u></u>	Bump Plug to	· <u></u>		E	3PM	· ·	
_ <	0.1		1 231-11				. ,				
Remarks:	ユニニュー・ベート	<u> </u>		rp:02	<u> </u>	Callana	Z	2//////	a	www.enioneen	
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Code	Qty or Units	Description of Product or Services	Unit Price	Total
(105-2		Pump Charge	500.00	500.00
(107	1	Mileage 314 well of 3	nle	11/4
		2 A AND AND AND AND AND AND AND AND AND A		Transminator Transminator
(203	50 343	100/40 Pormix rement	12.25	637.50
C20to	170"	4070 321	20	34.00
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yerranyonyonyonyon	eroter attentive times are times at the same sections.		Subtatel	1581.50
		7.15%	Sales Tax	113 43
Authoriz	nem -	R. Hille	Total	1699.93