

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

1221165

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.

(Print Name) ☐ Employee of Operator 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.

Submitted Electronically

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

DATE	JOB#	SEC	TWP	RANGE	LEASE	WELL#
8/26/14		29	30	16	Unit 1	WW 24A

CUSTOMER:		AX&P Inc.		FSL	COUNTY	Wilson
MAILING ADDRESS		P.O. Box 1176		FEL	STATE	Kansas
CITY & STATE		Independence		ZIP CODE		67301

CEMENTING & ACID						
TYPE OF JOB	plugging	CASING SIZE		PLUGS	PLUG SIZE	
SURFACE		FT 30'	6.25"	BOTTOM 850'	10sks 50'	
PRODUCTION		TD none		MIDDLE 600'	10sks 50'	
HOLE DATA		TOP 0-250'				45sks
TOTAL DEPTH	850'				MAX PRESSUR	300#
HOLE SIZE	5 1/8"				TREAT	150#
WASH					ADMIXES	

PULLING UNIT - DRILLING & HOLE CLEAN UP - HEATER TRUCK					
TYPE OF JOB	PULLING	WASHING	CEMENTING	PWR SWIVEL	DOZER
JOB START					
STOP					

COMMENTS:

Circ. Gel from 850' to surf., spot 10 sks. cement at 850'
Pull drill pipe up to 600', spot 10 sks cement at 600'
Pull drill pipe up to 250', circ, cement from 250' to surface, pull drill pipe out, top off well w/cement.
Well plugged. Total cement used 65 sks.

SUPERVISOR:

Rick House

FIELD REPORT

PUMP CHG:	
WATER: (80 Vac.)	
PULLING UNIT:	
TRANSPORT:	
CEMENT SACKS @	
ADMITES:	
EQUIPMENT:	
HEATER:	
POWER SWIVEL:	
DOZER:	
OTHER:	
SUBTOTAL	
SALES TAX	
TOTAL	