

**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

#### 1222941

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			
			Spot Description:				
Address 1:			Sec Twp S. R East Wes				
Address 2:				Feet from North / South Line of Section			
City: State: Zip: +				Feet from East / West Line of Section			
Contact Person:			Footag	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	<i>r</i>			
Water Supply Well	Other:	SWD Permit #:	1	Lease Name: Well #:  Date Well Completed: (Date,			
ENHR Permit #:	Gas Sto	orage Permit #:					
Is ACO-1 filed? Yes	No If not, is well	I log attached? Yes	1				
Producing Formation(s): List	All (If needed attach another	r sheet)	by:		(KCC <b>District</b> Agent's Name)		
Depth to	o Top: Botto	om: T.D					
Depth to	o Top: Botto	om: T.D		Plugging Commenced:			
Depth to	o Top: Botto	om:T.D	Tidggii	ig Completed			
Show depth and thickness of	all water, oil and gas forma	ations.					
Oil, Gas or Wate	r Records		Casing Record (S	Surface, Conductor & Produc	ction)		
Formation	Content	Casing	Size	Setting Depth	Pulled Out		
zement of other plugs were u	Sed, State the Character Of	same depth placed from (bot	копт, ко (кор) юг е	acii piug set.			
Plugging Contractor License #:							
Address 1:			Address 2:				
•					Zip:+		
Phone: ( )							
Name of Party Responsible for	or Plugging Fees:						
State of	County, _		, SS.				
	(Drint Mana)			Employee of Operator or	Operator on above-described well,		
	(Duint Nove)						

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

## STATEMENT

11345

# ELMORE'S INC.

Box 87 - 776 HWY99 Sedan, KS 67361

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

Date				
9-	5	-14	/	

0 -1-10	er Southwinds		Language State	<u> </u>	
			70	A Th	
	State.	State Zip			
City	otato				
Qty.	Description	Price	Amount		
-	In Pulling Unit	120,00	360,0	00	
3	hr Water Truck	85.00	255,	00	
3_		110,00	330,	00	
	hr Comont Tump	8500	85,	00	
	Baulk lonle	.10	120.	00	
1200	1" Tubin	11.00	484.	00	
44	Sks Cement	16.00		00	
1	sk bel	/le:		David Contract	
			1650.	00	
-	Wiley # 1 4/2 Cosing	Tax	134,	48	
×	Day 1' To 1200' Gel Hol	e :	181784.	48	
	Ran 1 12 1/1 Co 1 P	1 1 1	7		
	110 to 850' Spotted 5 St	ks Comer	it		
	Bulled Usto 250' Coments	ed To			
	Surface With 29 SKS	one. In		-	
	Surface With a 1013				
		7.00			
17		t to the same			
		· brigin agg [			

Thank You – We appreciate your business!

Rec'd. by \_\_\_\_\_\_\_ 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

Ref. No. G 571400776