

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

1223438

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 #:			AF	² l No. 15	5						
Name:				ot Desc	cription:						
Address 1:			_		Sec Tw	vp S. R East West					
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					
	Other: Gas Sto No If not, is well All (If needed attach another Top: Botto	SWD Permit #: rage Permit #: l log attached? Yes	Le Da No Th by:	ase Narate Well in plugging C	me: Completed: ing proposal was appro	well #: (Date) (KCC District Agent's Name)					
Depth to	Top: Botto	m:T.D									
Show depth and thickness of a		ations.									
Oil, Gas or Water			Casing Record (Surface, Condu			· · · · · · · · · · · · · · · · · · ·					
Formation	Content	Casing	Size		Setting Depth	Pulled Out					
cement or other plugs were us						Is used in introducing it into the hole. If					
Plugging Contractor License #	<i>‡</i> :		Name:								
Address 1:			Address 2:								
City:			Sta	ate:		Zip:+					
Phone: ()											
Name of Party Responsible fo	or Plugging Fees:										
State of	County, _		, s	is.							
	(District Name)			Em	ployee of Operator or	Operator on above-described 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



10244 NE Hwy. 61 P.O. Box 8613 Pratt, Kansas 67124 Phone 620-672-1201

1718 **11307** A

Sagar.		MONTH (MICE) (MICE)	24	205	14 w		DATE	HUKET NO							
DATE OF JOB 8-27-14 DISTRICT					WELL (S	OLD	ROD INJ	□ WDW	□ S	USTOMER RDER NO.:					
CUSTOMER Z	.D. Dri	Hiau Inc			LEASE	inaroca	I hand of	Cottle	Inc	WELL NO	-74				
CUSTOMER L.D. Drilling Inc ADDRESS					COUNTY			STATE							
CITY	TY STATE						SERVICE CREW Scott, Part, Dale								
AUTHORIZED BY							to Ab			CNW					
EQUIPMEN'	T# HRS	EQUIPMENT#	HRS	EQL	IPMENT#	HPS	TRUCK CALL	ED.	DAT		ЛE				
38970	7.7			***************************************			ARRIVED AT								
	426 2.2						START OPER	<u> </u>		4 AM G:					
	860 2.2								267	14 & 11:2	50				
								RATION 8-2							
							RELEASED			14 🕅 Z:3	50				
			***				MILES FROM	STATION TO	WELL	Washinkan kilikan sa kika ma					
become a part of the	1	ut the written consent of an o					· · · · · · · · · · · · · · · · · · ·	R, OPERATOR,		1.500	apaideíl Hailtean				
REF. NO.		MATERIAL, EQUIPMENT	AND SERVI	CES USI	=D	UNIT	QUANTITY	UNIT PRIC	E	\$ AMOUN	T .				
CP103	60140			5K	220			- 12-11-11-11-11-11-11-11-11-11-11-11-11-1	00						
CC 200		of Gel				16	280			95	1 4000				
CC 131	Sugar					16	50			250	00				
E 100	Class	Milrage F	Pich 4	PS		MI	45			191	25				
E101	Heavy	Equipment	211/2	leag	<	MI	90			630	00				
E 1/3	thop t	DUIR Velive	ery Ch	rary	<u>'-</u> (TM	428		1	940	50				
CE 704	Depin		01-4000		4	4/10	/			_21(40)	00				
CE 246 S 003	Diendin	g + In/sing		fe_		SK Ea	<u> </u>			- <u>508</u> 17\$	00				
	Service	L Superilse				Eu				770					
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CHI	EMICAL / ACID D	ΑΥΔ	7					SUB TO)TAL						
Cit	- MORE / MOID L	11 14 1		SEE	VICE & EQUI	IPMENT	%TAX	ON \$			<u> </u>				
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								7	ነሆ		1				

SERVICE
REPRESENTATIVE
FIELD SERVICE ORDER NO.

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY:

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)



TREATMENT REPORT

	gyse	rvic	US, L.I												
Customer	D Dell	ling !	nc	Lease No.				Date		1					
Lease E/lin	wood	Lanel H	wHk	Well #					-27	-14					
Field Order	# Station	Pratt	•		Casing	Depti	2500	County R	crian		State AS				
Type Job	lug to	Abon	don	CW	W	Formation	220110000000000000000000000000000000000			escription 4 20 5	194				
	E DATA	PERI	FORATI	NG DATA	FLUID	USED		TREA	TMENT I	RESUME					
Casing Size	Casing Size Tubing Size Shots/Ft				Acid										
Depth 350	Depth	From	From		Pre Pad		Мах	Max 5 Min.							
Volume 146	Volume	From	То		Pad		Min								
Max Press	Max Pres	From	То		Frac		Avg			15 Min.					
Well Connecti	on Annulus V	/ol. From	То				HHP Used	HHP Used			Annulus Pressure				
Plug Depth	Packer De				Flush		Gas Volum			Total Load					
Customer Re	presentative	*		Station	Manager Kew	in Go	dkey	Treates	011 (-	rewe	<u> </u>				
Service Units	38970	19829	1986	,					_						
Driver Names	Scott	Pat	Dal	ح											
Time	Casing Pressure	Tubing Pressure	Bbis, F	Pumped	Rate	M 4000.11		Serv	rice Log						
9350						On Lo	cadio	a_S&	fely 1	nextin	Ria as				
11:20					······································			with.							
11:30	150		15	-	<u> 3.5 </u>	Pany	np HIO Spacer								
11:35	150		10	.68	_5	Mix	563KS	SKS 60/40 POZ at 14.8 pp							
11:38	100		5	.25	5	Pump	HID Spaces								
11:40	100		37	7	5	Pamp	mud		WALLES AND THE STATE OF THE STA						
11:48	Ø					Shul	down								
11:50							Drill	plpe	+0	870'					
12:45	50				<u> </u>	Pump	H20	Space							
12:46	100		17.0	29	4.8	Mix 803KS 60/40 PC				02 at	14.8 ppg				
12:50	50		Z			Pump	HO.	Spacer							
12:51	50		12		4.2	Pump	•								
12:55	8					Shut	• • •		_						
12,58						Pul)		pipe		70'	944 L				
1:09	Ø				5.1	Pamp	HO	space	<u>, , ,</u>						
/107	Ø		10.68		5.2	7//14	505KS 60/40 POZ a1 14.8 p								
130	e		حـــــ		3.5	Pump				•••					
1:12			75 60		7						10 40'				
130	_0		2.5		3				40 P	02 az	1 14.8 pp				
1/25	0		<i></i>	_	-		Dou				440 04-				
1:40	\mathcal{L}		6.)			_		_		140 POZ				
1:43	i NE Hiw	av 61 • F	O Ba	v 8613 e	Pratt, KS 6	5hu/	2 0 (60M	670-101	COM	169111	72-5383				
TO CIT		ay or a	O DU	X 0010 ,			マー(ログロ		A DECLY	(020)					