



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

KANSAS CORPORATION COMMISSION 1226141
OIL & GAS CONSERVATION DIVISION

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.
 _____ Employee of Operator or Operator on above-described well,
 (Print Name)

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 5/2/2014 District Liberal # 21 Ticket No. 52755
 Company Ring Energy Rig Val #2
 Lease Wedel Trust Well No 33-1
 County Gray State KS

Location _____
 Field _____
 Casing Data Conductor PTA Squeeze Misc.
 Surface Intermediate Production Liner
 Size 8 5/8 Type _____ Weight 24# Collar _____

Casing Depths Top 0 Bottom 44

Drill Pipe:	BBLS/LIN. FT		LIN. FT/BBL	
Open Hole:	BBLS/LIN. FT		LIN. FT/BBL	
Capacity Factors:	BBLS/LIN. FT	<u>0.0637</u>	LIN. FT/BBL	<u>15.7</u>
Casing	BBLS/LIN. FT	<u>0.0637</u>	LIN. FT/BBL	<u>15.7</u>
Open Holes	BBLS/LIN. FT	<u>0.1458</u>	LIN. FT/BBL	<u>6.85</u>
Drill Pipe	BBLS/LIN. FT		LIN. FT/BBL	
Annulus	BBLS/LIN. FT	<u>0.0735</u>	LIN. FT/BBL	<u>13.6</u>
	BBLS/LIN. FT		LIN. FT/BBL	
Perforations	From _____	ft to _____	ft	Amt _____

CEMENT DATA

Spacer Type _____
 Amt. _____ Sks Yield _____ ft³/sk Density _____ PPG
 LEAD: Time _____ hrs. Type 60/40 4% Gel
 Amt. 200 Sks Yield 1.42 ft³/sk Density 13.8 PPG
 TAIL: Time _____ hrs. Type 60/40 4% gel
 Amt. 300 Sks Yield _____ ft³/sk Density _____ PPG
 WATER Lead 6.9 Gal/sk Tail _____ Gal/sk Total _____ BBLs

Pump Trucks Used: 549-550
 Bulk Equipment 456-251

Float Equipment: Manufacturer _____ Weather Ford
 Shoe: Type _____ Depth _____
 Float: Type _____ Depth _____
 Centralizers: Quantity _____ Plugs Top _____ Bottom _____
 Stage Collars _____
 Special Equipment _____
 Disp: Fluid Type _____ Amt _____ bbls Weight _____ PPG
 Mud Type _____ Weight _____

COMPANY REPRESENTATIVE _____

CEMENTER _____

Lenny Baeza

TIME	PRESSURES PSI		FLUID PUMPED DATA			REMARKS
	DRILL PIPE CASING	ANNULUS	TOTAL FLUID	PUMPED PER TIME PERIOD	RATE BBLs/MIN	
9:00pm						On location @ 9:00pm
9:30pm						Rigging up to well head
						Safety meeting with rig crew
10:34pm	200		10		5	Pumping 10 bbls of water ahead of cement
10:50pm	100		22		3	Mixing first plug of 200 sk total of 50.58 bbls of slurry @ 900'
10:54pm	100		45		5	Displacement of 7bbls
12:20am	120		95		4	300' from surface pumped 240sk
12:38am	100		116		4	Plugging rat and mouse hole
			116			
						Leaving location @ 2:00am
						THANK YOU !!!!!!!!!!!!!!!!!!!!!!!!!!!!!

FINAL DISP. PRESS. _____ PSI BUMP PLUG TO _____ PSI BLEEDBACK _____ BBLs THANK YOU