1227122

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

WELL PLUGGING RECORD

K.A.R. 82-3-117

Form CP-4
March 2009
Type or Print on this Form
Form must be Signed
All blanks must be Filled

OPERATOR: License #: 5682
Name: Hughes Drilling Co, a General Partnership
Address 1: 122 MAIN
Address 2:
City: WELLSVILLE State: KS Zip: 66092 + 8522
Contact Person: Clay Hughes
Phone: (785) 883-2235

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 - 15-059-26800-00-00
Spot Description:
SW - NW - NE - SW Sec. 2 Twp. 16 S. R. 20 ☑ East ☐ West
2285 Feet from ☐ North / ☑ South Line of Section
3720 Feet from ☑ East / ☐ West Line of Section
Footages Calculated from Nearest Outside Section Corner:
☐ NE ☐ NW ☑ SE ☐ SW
County: Franklin
Lease Name: W. Broers Well #: 12
Date Well Completed:
The plugging proposal was approved on: *(Date)*
by: *(KCC **District** Agent's Name)*
Plugging Commenced: 8/26/2014
Plugging Completed: 8/26/2014

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
		Surface	7	24	
		Completion	2.8750	718	

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.

Rig ran drill pipe to T.D Spot 20sks cement @ TD. Pull drill pipe to 390. Spot 10sks cement 390. Pull drill pipe to 250. Fill to surface w/ cement. Pull remaining drill pipe. Top off well w/ cement. Wash out drill pipe.

Plugging Contractor License #: 33961 Name: Consolidated Oil Well Services LLC
Address 1: 1322 S GRANT Address 2: PO BOX 884
City: CHANUTE State: KS Zip: 66720 + _ _ _ _
Phone: (620) 431-9210
Name of Party Responsible for Plugging Fees: Clay Hughes

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