

**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

1227431

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**

Global Cementing LLC


18048 I-70 Road  
Russell, KS 67665

# Invoice

Date	Invoice #
6/12/2014	1358

Bill To
Continental Operating PO BOX 52 HAYS, KS 67601

P.O. No.	Terms	Project
STULL	Net 30	

Quantity	Description	Rate	Amount
132	COMMON	15.50	2,046.00T
88	POZ	8.50	748.00T
8	GEL	23.50	188.00T
228	HANDLING	2.10	478.80
	BULK MILEAGE	601.92	601.92
1	TRI-PLEX PUMP CHARGE FOR PLUG	1,200.00	1,200.00
66	PUMP TRUCK MILEAGE	6.50	429.00
66	PICKUP	2.50	165.00
	DEDUCT 15% FROM TOTAL IF PAID WITHIN 30 DAYS OF INVOICE ROOKS CO	6.15%	183.39
			

Thank you for your business.

Phone #	Fax #	E-mail
785-324-2658	785-445-3526	

**Total** \$6,040.11



# GLOBAL CEMENTING, L.L.C.

1358

REMIT TO 18048 170RD  
RUSSELL, KS 67665

SERVICE POINT: Russell/KS

DATE <u>6-12-14</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START <u>4:00pm</u>	JOB FINISH <u>5:00pm</u>
LEASE <u>Stull</u>	WELL #.		LOCATION			COUNTY <u>Neosho</u>	STATE <u>KS</u>
<input checked="" type="radio"/> OLD OR NEW (CIRCLE ONE)							

CONTRACTOR CO TOOLS  
TYPE OF JOB PTA  
HOLE SIZE \_\_\_\_\_ T.D. \_\_\_\_\_  
CASING SIZE 7 DEPTH \_\_\_\_\_  
TUBING SIZE 2 7/8 DEPTH \_\_\_\_\_  
DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_  
TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_  
PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_  
MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_  
CEMENT LEFT IN CSG. \_\_\_\_\_  
PERFS \_\_\_\_\_  
DISPLACEMENT \_\_\_\_\_

## EQUIPMENT

PUMP TRUCK	CEMENTER <u>Heath</u>
# <u>P1</u>	HELPER <u>Colly</u>
BULK TRUCK	
# <u>B4</u>	DRIVER <u>Eric</u>
BULK TRUCK	
# _____	DRIVER _____

## REMARKS:

Run tubing down to 943' and hooked up and added 200sr - cement circulated to surface - come out of hole with tubing and top off 7 in casing with 20sr

CHARGE TO: Continental.  
STREET \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

Global Cementing, L.L.C.,  
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side. Thank You.

PRINTED NAME Rory Rader  
SIGNATURE \_\_\_\_\_

## OWNER

CEMENT  
AMOUNT ORDERED 220sr 60/40 40/gel

COMMON	@	_____
POZMIX	@	_____
GEL	@	_____
CHLORIDE	@	_____
ASC	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
HANDLING	@	_____
MILEAGE	@	_____

TOTAL \_\_\_\_\_

## SERVICE

DEPTH OF JOB	_____
PUMP TRUCK CHARGE	_____
EXTRA FOOTAGE	@ _____
MILEAGE <u>33v2</u>	@ _____
MANIFOLD	@ _____
_____	@ _____
_____	@ _____

TOTAL \_\_\_\_\_

## PLUG & FLOAT EQUIPMENT

_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____

TOTAL \_\_\_\_\_

SALES TAX (If Any) \_\_\_\_\_  
TOTAL CHARGES \_\_\_\_\_  
DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS