

Employee of Operator or Operator on above-described well,

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 #:				API No. 15	5				
Name:				Spot Desc	cription:				
Address 1:					Sec				
Address 2:				l	Feet from		South Line of Section		
City:					Feet from		West Line of Section		
Contact Person:				Footages Calculated from Nearest Outside Section Corner:					
Phone: ( )						SE SW			
Type of Well: (Check one)									
Water Supply Well		SWD Permit #:		· ·					
ENHR Permit #:		storage Permit #:		Lease Nai	me:	Wel	II #:		
	_	ell log attached? Yes			Completed:				
Producing Formation(s): List A		_	140	l			(Date)		
Depth to		tom: T.D		by:		(KCC	C <b>District</b> Agent's Name		
Depth to		tom: T.D		Plugging (	Commenced:				
Depth to	•	tom: T.D		Plugging (	Completed:				
Deptir to	о тор вос	.tom 1.D							
Show depth and thickness of	all water, oil and gas for	mations.							
Oil, Gas or Water	r Records		Casing	Record (Surfa	ace, Conductor & Prod	luction)			
Formation	Content	Casing	Size		Setting Depth	Pulled Out			
Describe in detail the manner cement or other plugs were u				•		ods used in introdu	cing it into the hole. I		
Plugging Contractor License #									
City:				_ State:		Zip:	++		
Phone: ( )						·			
Name of Party Responsible for	or Plugging Fees:								

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.

(Print Name)

810 E 7<sup>TH</sup> PO Box 92 EUREKA, KS 67045 (620) 583-5561



Cement or Acid Field Report
Ticket No. 1774
Foreman Shannon Feck
Camp £vyeka

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Date	Cust. ID#	Le	ase & Well Number		Section	Township	Range	County	State
10-3-14	1003	Pend	ley # 9		.22	26	14E	Woods	as ITS
Customer				Safety	Unit#	Dri	iver	Unit#	Driver
Coly	Ever	_ ,		Meeting	105	Shan	non F		
Mailing Address	ZXEF	)// /		S.F.	111	Kevi	n m		
	DOR	01 38	<u></u>	KM					
	, o, p.		A <b>v</b> ilogija. Avilogija semento speciologija.						
City		State	Zip Code			and the			
Lola		ITS	66749						
10-	o New		7.1.1					of H	1 -3, 1

Mailing Address P. O. By 388			KM		, Aev			
City	State AS	Zip Code 66749						
Job Type P.T.A Second Casing Depth Casing Size & Wt Displacement Remarks: Safety	Hole Si Cement I Displac	pth 14/11' ze 6 3/9 eft in Casing ement PSI	73/4"	Slurry Vol Slurry Wt Water Gal/SK Bump Plug to			Orill Pipe Other BPM	hrough 23/8"
Pump SKS				#10	1411	w/50	SKS.	
	F	ak (lad		#2 @ #3 @	500' 250' 1	w/ 15 v Sur	- 5.K.S Face w/s	Total
<	Thanne Shanne	ax you	rew					

Code	Qty or Units	Description of Product or Services	Unit Price	Ţotal
C103	1	Pump Charge	1050.00	1050.00
C107.	25	Mileage	3.95	98.75
203	115 sks	60/40 pozmix cement	12 75	1466.25
C 706	395#	Get @ 4%	, 20	79.00
108A	1.95 Ton	Ton mileage bulk Trk	m/c	345.00
C 2016	500 #	Gel-Spacer	. 20	100,00
		(690<160.83)		
		( 18.8 POS &		Carlo
				•
			Sub Total	3139.00
	1	7 159	Sales Tax	1/7 6
Authoriza	ition 1	2 R. Applied Title 7/3%	Sales Tax Total	3256