

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

1242179

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 #:			ΙA	PI No. 15					
Name:		Spot Description:							
Address 1:			_		Sec Tv	vp S. R	East West		
Address 2:		Feet from North / South Line of Section							
City:	State:	Zip:+	_	Feet from East / West Line of Section Footages Calculated from Nearest Outside Section Corner:					
Contact Person:			F						
Phone: ()				NE	NW	SE SW			
Type of Well: (Check one)	Oil Well Gas Well	OG D&A Cathod	ic C	ounty.					
Water Supply Well	Other:	SWD Permit #:		Lease Name: Well #: Date Well Completed:					
ENHR Permit #:	Gas Sto	orage Permit #:							
s ACO-1 filed? Yes	No If not, is we	Il log attached? Yes		•			(Date)		
Producing Formation(s): List	All (If needed attach anothe	r sheet)	by	y:		(KCC I	District Agent's Name)		
Depth t	o Top: Botto	om: T.D	— _P	lugging Commer	nced.				
Depth t	o Top: Botto	om: T.D		Plugging Commenced:					
Depth t	o Top: Botto	om:T.D		.uggg cop.o.	· · · · · · · · · · · · · · · · · · ·				
Show depth and thickness of	all water, oil and gas form	ations.							
Oil, Gas or Wate	er Records		Casing Reco	ord (Surface, Con	ductor & Produ	oduction)			
Formation	Content	Casing	Size	Settin	ng Depth	Pulled Out			
cement or other plugs were u	ised, state the character of	ged, indicating where the muc i same depth placed from (bot	ttom), to (top)) for each plug se	et.				
City:			St	tate:		Zip:	+		
⁵ hone: ()									
Name of Party Responsible for	or Plugging Fees:								
State of		,	SS.						
				Employee of	of Operator or	Operator on a	bove-described well,		

Submitted Electronically

(Print Name)

the same are true and correct, so help me God.

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



27/406

LOCATION 0 + + que q FOREMAN Alan Made

PO Box 884, Chanute, KS 66720 620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT CEMENT

DATE	CUSTOMER#	WEL	L NAME & NUM	IBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-23-14	4448	Carty	uright	KR-5	NE 23	18	21	M:
CUSTOMER	1 4-1-					SECTION AND SECTION		
MAILING ADDRE	SS '		EXD	-	7.30	DRIVER	TRUCK#	DRIVER
9393	w 1/0	13			310	Min Mad	Satet	Neet
CITY	110	STATE	ZIP CODE	┨	220	Wik Dag	-	_
Duerla	nd Park	25	66210		503	TICA HOC		
JOB TYPE		HOLE SIZE	57/8	┙ _ HOLE DEPTI	1 521	CASING SIZE & V	MEIGHT	
CASING DEPTH		DRILL PIPE_		_TUBING /	7 320	CASING SIZE & I	OTHER	/
SLURRY WEIGH	т	SLURRY VOL_		WATER gal/s		CEMENT LEFT in		
DISPLACEMENT		DISPLACEMEN	IT PSI	MIX PSI_10			an	
REMARKS: He	Id Me.	edias	Washe	d 1"	to hole	TD. N		2
pumpe	2 50	SK 30	150 C	ement	+ plus à	Pogel o	1/24	Phono
scal.	Pulle	l' 1"	to 2	95'	Nixed	o pum	sed 1	9 sk
Cem	et. C:1	an late	& cen	nent:	to Sur	ace.	Pulled	1 1
out .	+ topp	ed of	I we	11.				
	, , , ,					1.00		
								1
					out of the table on the table		11 ()	
Lack	LJackn	ign				len	/Viao	
						John .		
CODE	QUANITY	or UNITS	DE	SCRIPTION of	SERVICES or PRO	DUCT	UNIT PRICE	TOTAL
5705N		1	PUMP CHARG	3F	0.866.00	368		10850
5406			MILEAGE			0.3		1000
5407	1/2	nin	ton	miles	•	368		10400
55026	11/	2	800			370		15000
00020	(,	<i></i>	000	46		510		130
1124	64	1	50/50	7 cen	rent		79350	
11186	116	II,	981				25.52	
11074	35	#		nosca	1		47.25	
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					naterial Liess	1002	255.88	
					40.07	307	271,88	1.1.29
					mater	igl to	14	60.39
	Mex e							
								
								
							201 01	
					22 0000	inind	2351.54	
					7 600	15151	CALCOTAV	411 300
avin 3737	NO	Compau	14 100	,			SALES TAX ESTIMATED	46.38
	1.	000	7 7				TOTAL	2071.77
UTHORIZTION_	Jim	UKB		TITLE			DATE	