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** 

1242945

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

Form CP-4

## WELL PLUGGING RECORD K.A.R. 82-3-117

OPERATOR: License #:	API No. 15
Name:	Spot Description:
Address 1:	
Address 2:	Feet from North / South Line of Section
City: State: Zip: +	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ( )	NE NW SE SW
Type of Well: (Check one)  Oil Well  Gas Well  OG  D&A  Cathodic    Water Supply Well  Other:  SWD Permit #:  SWD Permit #:  SWD Permit #:    ENHR Permit #:  Gas Storage Permit #:  Gas Storage Permit #:  No    Is ACO-1 filed?  Yes  No  If not, is well log attached?  Yes  No    Producing Formation(s): List All (If needed attach another sheet)	County: Well #: 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	Formation Content		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:	Name:						
Address 1:		Address 2:							
City:		State:	Zip: +						
Phone: ( )									
Name of Party Responsible for Plugging	g Fees:								
State of	County,	, SS.							
	(Print Name)		or or Operator on above-described well						
haing first duly sugars an eath source. The	at I have knowledge of the factor	totomonto, and mottors harain contained, and the la	a of the choice described well is so filed on						

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

BUP Acid				TREATME	NT REPORT			Acid Stage No.		
					Type Treatment:	Amt.	Type Fluid	Sand Size	Poundi	of Sand
	the lands .	taula C.B.	50 N	a C42212	Bidown					
		JISURE 0.0.	F.O. N		1			1		
	LD Drilling	n 1			1					
	& No. Swanso		Field	autoren ander a	1					
	0		State KS		Flush					
County	Reno			States of the st	Trented from	ft.			No. ft.	0
				Set at ft.			to		No. tt.	0
Casing:			n 1	Set atft.	from		to		No. ft.	0
Formation						And a local distance of the local distance o		anti-soft distance of the		Bbl./Gal.
Formation				to	Actual Volume of C	)il / Water to Load Hole:	-			good out
Formation			Perf.	to					w	
	ze Type &	L Wt.	Top atft.	Bottom at ft.	1	No. Used: Std. 3	20 Sp		" Iwin	
			rom		Auxitiary Equipmen					
			Swung at			n Greg Jordan				
	Perforated 1	from	ft. to	ft.	Auxillary Tools					
Sector Sector					Plugging or Sealing	Materials: Type				
Open Hole	Size	T.D.	ft. P.	B. toft.				Gals.		lb.
-							_			
Company	Representative		Kelso		Treater		Nathan	<u>W.</u>	4	
TIME	PRE	SURES	Total Fluid Pumped			REMARK5				
a.m./p.m.	Tubing	Cesing								
9:00		5.5"		On Location.						
				designed to be a second of the	the second second second		1 17795 Fr			
				Mix 35sks 60/40	noz 4%gel a	+ 2500'				
				14117 33383 00/ 40	102 470Ber a					
				Mix 240sks at 80	Of Circulate	d comont to	urfaco			
				and the second s		the second s	juriace.			
				Wait to pull pipe	e. Hole stay	ea tuil.				
				Thank Youl						
				Nathan W.						
							-			
-										
					· · · · · · · · · · · · · · · · · · ·	······································		P		
	1 P.							And a statistic transmission		