



Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

KANSAS CORPORATION COMMISSION 1243209
OIL & GAS CONSERVATION DIVISION

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.
 _____ 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

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



Cement or Acid Field Report
 Ticket No. 2089
 Foreman Rick Ladford
 Camp FUCKE KS

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State
1-22-15	1003	Wolf R-25				Allen	Ks
Customer Colt Energy Inc.			Safety Meeting RL CB DC	Unit #	Driver	Unit #	Driver
Mailing Address P.O. Box 388				102	Chris B.		
City Iola				110	Dave G.		
State Ks							
Zip Code 66749							

Job Type _____	Hole Depth _____	Slurry Vol. _____	Tubing <u>2 7/8" @ 895'</u>
Casing Depth _____	Hole Size _____	Slurry Wt. <u>14[#]</u>	Drill Pipe _____
Casing Size & Wt. _____	Cement Left in Casing _____	Water Gal/SK <u>5.2</u>	Other _____
Displacement _____	Displacement PSI _____	Bump Plug to _____	BPM _____

Remarks: Safety meeting- Rig up to 1" hydrill @ 895' inside 2 7/8" tubing. Mixed 35 sacks class A cement w/ 10% cacl2 @ 14[#] / gal. pull 1" out, topped well off. Job complete Rig down.

..Thank You..

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C105.2	1	Pump Charge	500.00	500.00
C107	2	Mileage 2 nd well of 2	n/c	n/c
C200	35 sacks	class A cement	15.00	525.00
C205	35 #	10% cacl2	.60	21.00
C188A	1.65	ton mileage bulk truck (second well)	n/c	200.00
<div style="border: 1px solid black; border-radius: 50%; padding: 10px; display: inline-block;"> 590 < 66.91 > \$ 1271.29 </div>				
			Subtotal	1746.00
			Sales Tax	92.20
Authorization <u>witnessed by Rick</u> Title <u>Co Rep</u>			Total	1338.20

I agree to the payment terms and conditions of services provided on the back of this job ticket. Any amendments to payment terms must be in writing on the front of this job ticket or in the Customer's records at ELITE's office.