

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

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

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1243255

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 #:			AF	PI No	. 15	
Name:				oot D	escription:	
Address 1:			_		Sec Tw	/p S. R East West
Address 2:			_		Feet from	North / South Line of Section
City:	State:	Zip:+ +	_		Feet from	East / West Line of Section
Contact Person:			Fo	otag	es Calculated from Neares	st Outside Section Corner:
Phone: ()					NE NW	SE SW
Type of Well: (Check one)	Oil Well Gas Well	OG D&A Cathodi	ic C	ountv	r:	
Water Supply Well	Other:	SWD Permit #:		-		Well #:
ENHR Permit #:	Gas Sto	rage Permit #:				
Is ACO-1 filed? Yes	No If not, is well	l log attached? Yes				oved on: (Date)
Producing Formation(s): List A	All (If needed attach another	sheet)	by	r:		(KCC District Agent's Name)
Depth to	Top: Botto	m: T.D	_{PI}	uaair	na Commenced:	
Depth to	Top: Botto	m: T.D		00	·	
Depth to	Top: Botto	m:T.D		33	0 1	
				—		
Show depth and thickness of		ations.				
Oil, Gas or Water	Records		_	ord (S	Surface, Conductor & Produc	tion)
Formation	Content	Casing	Size		Setting Depth	Pulled Out
Describe in detail the manner cement or other plugs were us	. 00					ds used in introducing it into the hole. If
Plugging Contractor License #	<i>t</i> :		Name:			
Address 1:			Address 2: _			
City:			St	ate: _		Zip:+
Phone: ()						
Name of Party Responsible fo	r Plugging Fees:					
State of	County, _		,	SS.		
	(Print Name)		[[Employee of Operator or	Operator on above-described well,

Submitted Electronically

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



عدرالاكا				TREATM	ENT REPORT					
Acid &	Cement 图							Acid Stag	e No.	
					Type Treatment:	Amt.	Type Fluid	d Sand S	ize Pou	nds of Sand
Date 12/	11/2014 Distri	ct	F.O. N	lo. 42346	Bkdown	Bbl./Gal.				
Company G	Grady Bolding									
Well Name &	No. LeRoy #1									
Location			Field			Bbl./Gal.				
County B	Barton		State KS		Flush	Bbl./Gal.				
					Treated from		ft. to	ft.	No. ft.	0
Casing:	Size 4 1/2	Type & Wt.		Set at	ft. from		ft. to	ft.	No. ft.	0
Formation:			Perf.	to	from		ft. to	ft.	No. ft.	0
Formation:			Perf.	to	Actual Volume of Oil					Bbl./Gal.
Formation:			Perf.	to						
Liner: Size	Type & Wt.				ft. Pump Trucks. No	. Used: Std.	320 Sp		Twin	
Ce	emented: Yes 🔻	Perforated fr	rom		ft. Auxiliary Equipment			327		
Tubing: Si	ize & Wt.		Swung at		ft. Personnel Greg Jor	dan Scott				
THE PLANT	Perforated from		ft. to		ft. Auxiliary Tools					
Lan against					Plugging or Sealing M	aterials: Type				
Open Hole Size	e	T.D	ft. P.	B. to	ft.			G	als.	lb.
Company Repr	resentative		Mike I		Treater		Gre	eg C.		
TIME	PRESSURI	ES								
a.m./p.m.	Tubing	Casing	Total Fluid Pumped			REMARKS				
10:30				On Location						
				Duman into 4.4.	2 -+ 2 4 /2 DD14	200# 64	1001			
Pump into 4 1/				2 at 3 1/2 BPM 300# @1400'						

Company Rep			Mike	K Treater	Greg C.		
TIME PRESSURES		Total Fluid Pumped	REMARKS				
a.m./p.m.	Tubing	Casing					
0:30				On Location			
				Pump into 4 1/2 at 3 1/2 BPM 30	0# @1400'		
				Pump 40 sks of 60/40 4% cement	: @1400'		
_				Pump 100 sks of 60/40 4% cemer	nt @780'		
		MERIC AL		D			
				Pump 115 sks of 60/40 4% cemer	11 @380		
_			-	Dump 50 sks of 60/40 40/ someont	- A401		
				Pump 50 sks of 60/40 4% cement	. @40		
2:45				Job Complete			
43				30b Complete			
					Series Control of the		
	1 1 1 1 1				_ 2 5 When V Velocity		
		re Via					