



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

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.

(Print Name) Employee of Operator or Operator on above-described well,

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

W & W Production Company

1150 Highway 39

Chanute, Kansas 66720-5215

Mobile: 620-431-5970

Phone: Office/Home 620-431-4137

4/20
Invoice

DATE	INVOICE NO.
4/11/2015	47494

BILL TO
Colt Energy C/O Rex Ashlock PO Box 388 1112 Rhode Island Rd. Iola, Kansas 66749

Woodhead Lease Well 48 Douglas County, Kansas

3/30/15

SERVICED	ITEM	DESCRIPTION	QTY	RATE	AMOUNT
4/6/2015	Pump Truck Cement	Pump Charge For plugging Ran 1" to T.D. 775' & Pump 28 sack Portland Cement to Surface.	1 28	500.00 12.00	500.00T 336.00T
DISCOUNT					
APPROVED JA 4/16/2015					
Sales Tax (7.15%)					\$59.77
Total					\$895.77

Fax #	Fed. I.D. 48-0843238
620-431-3183	carolwimsett4@yahoo.com

APR 15 RECD

Summary of Changes

Lease Name and Number: WOODHEAD 48

API/Permit #: 15-045-20809-00-01

Doc ID: 1250061

Correction Number: 1

Field Name	Previous Value	New Value
Approved Date	04/13/2015	04/17/2015
CasingRecordSetting_1	40	41
CasingRecordSetting_2	732	775
CasingRecordSize_1	7	6.25
Date Plugging Commenced	03/30/2015	04/06/2015
Date Plugging Completed	03/30/2015	04/06/2015
Plugging Description	RAN 1" TO TD 732' & PUMPED 28 SKS OF CEMENT TO	RAN 1" TO TD 775' & PUMPED 28 SKS OF CEMENT TO
Save Link	../..kcc/detail/operatorEditDetail.cfm?docID=1249335	../..kcc/detail/operatorEditDetail.cfm?docID=1250061

Summary of Attachments

Lease Name and Number: WOODHEAD 48

API: 15-045-20809-00-01

Doc ID: 1250061

Correction Number: 1

Attachment Name

PLUGGING TICKET