



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

KANSAS CORPORATION COMMISSION 1251995
OIL & GAS CONSERVATION DIVISION
WELL PLUGGING RECORD
 K.A.R. 82-3-117

Form CP-4
 March 2009
Type or Print on this Form
Form must be Signed
All blanks must be Filled

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

5/20

Elite Cementing & Acidizing of KS, LLC

810 E 7th, PO Box 92
Eureka, KS 67045



Date	Invoice #
5/5/2015	2216

Bill To	
Colt Energy Inc. PO Box 388 Iola, KS 66749	
Customer ID#	1003

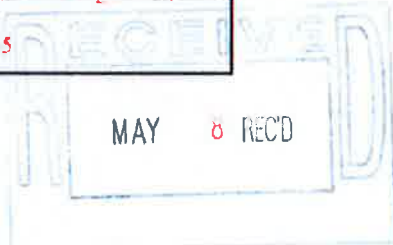
Job Date	5/4/2015
Lease Information	
Reichart 13-2	
County	Miami
Foreman	SM

Item	Description	Qty	Terms	Net 15
			Rate	Amount
C105	Cement Pump-Plug (old well)-1st well	1	500.00	500.00T
C107T	Pump Truck Mileage-taxable	35	3.95	138.25T
C203	Poznix Cement 60/40	65	12.75	828.75T
C206	Gel Bentonite	220	0.20	44.00T
C108AT	Ton Mileage (min. charge)-taxable	1	200.00	200.00T
C214	Cottonseed Hulls	45	0.45	20.25T
D101	Discount on Services		-41.91	-41.91T
D102	Discount on Materials		-44.65	-44.65T

We appreciate your business!

Phone #	Fax #	E-mail
620-583-5561	620-583-5524	rene@elitecementing.com

Send payment to:
Elite Cementing & Acidizing of KS, LLC
PO Box 92
Eureka, KS 67045



Subtotal	\$1,644.69
Sales Tax (7.65%)	\$125.82
Total	\$1,770.51
Payments/Credits	\$0.00
Balance Due	\$1,770.51

360000267

APPROVED JA 5/11/2015

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



Cement or Acid Field Report

Ticket No. **2216**

Foreman Steve Mead

Camp Eureka

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State
5-4-15	1003	Relchart 13-3				Miami	KS
Customer <u>Cal Energy Inc.</u>			Safety Meeting	Unit #	Driver	Unit #	Driver
Mailing Address <u>P.O. Box 388</u>				<u>102</u>	<u>Chris B</u>		
City <u>Topeka</u>							
State <u>KS</u>		Zip Code <u>66749</u>					

Job Type PA Sidwell Hole Depth _____ Slurry Vol. _____ Tubing 2 3/4
 Casing Depth 585' Hole Size _____ Slurry Wt. _____ Drill Pipe _____
 Casing Size & Wt. 5 1/2 Cement Left in Casing _____ Water Gal/SK _____ Other _____
 Displacement _____ Displacement PSI _____ Bump Plug to _____ BPM _____

Remarks: Safety Meeting. Rig up to 2 3/4 Tubing. Break Circulation w/ Fresh Water. Wash Tubing down to bottom. Mix 60/40 Pozmix Cement w/ 4% Gel to surface. Pullout Tubing. Top well off. Pressure up to 200#. Shut well in 100". Total 65sk Cement.
Job Complete Rig down

Thank you

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C105	1	Pump Charge 1 st well of 5	500.00	500.00
C107	35	Mileage	3.95	138.25
C203	65skcs	60/40 Pozmix Cement	12.75	828.75
C206	220 [#]	Gel 4%	.20	44.00
C108A	2.79 tons	Ton mileage bulk truck	M/C	200.00
C214	45 [#]	Cottonseed Hulls	.45	20.25
<div style="border: 1px solid black; border-radius: 50%; padding: 10px; width: fit-content; margin: 0 auto;"> 590 293.87 \$1710.51 </div>				
			Sub Total	1731.25
			Sales Tax	132.44
Authorization Witness by <u>Rick</u> Title <u>Co. Rep</u>			Total	1863.69

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.