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

1260491

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 #: Is ACO-1 filed? Yes No Producing Formation(s): List All (If needed attach another sheet) Depth to Top: Bottom: T.D.	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	Content	Casing Size Setting Depth F			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 Plug	gging Fees:			
State of	County,	, SS.		
	(Print Name)		or or Operator on abo	
haing first duly sugars an asthe says	That I have be availed as a fith a factor	statements, and matters barain contained, and the l	on of the chour departhed	wall in an filed and

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

510 Е 7 ^{тн} РО Вох 92 JREKA, KS 67045 (620) 583-5561				SERVICE,				Ticket N	or Acid F o. <u>2:</u> D <u>Keuw M</u> Eureka	399	
Date	Cust. ID #	Lease	e & Well Number		Section	To	wnship	Range	County		State
8-4-15	1021	MAY F	Serry #1 00	NOR	27	23	35	13E	60		Ks
Customer	1 1 1 1	- ma s	~ / /	Safety	Unit #	STATUS AND	Driv	Construction of the second	Unit #		Driver
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Mailing Address				- KM SF	113		CLIFF				
	ARROwher	d DR.		CS	145	<u>a sen</u> Sen v	Keuin	11.			
City		State	Zip Code				Sugar Section	and companying			and the second
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Job Type P.T.A. Hole Depth _____ Slurry Vol. _____ Tubing ____

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Casing Depth	_ Hole Size	Slurry Wt.	Drill Pipe
Casing Size & Wt	_ Cement Left in Casing	Water Gal/SK	Other
Displacement	_ Displacement PSI	Bump Plug to	BPM
Remarks: <u>SAFety Meetin</u> Plug From 737 to 60/40 Pozmix Cement	9: 2" RegulAR TUBING SEt SURFACE. PULL 2" TUBING w/ 2% Gel to Plug well.	@ 737' INSIDE 31/2 LINER Top OF WELL W/ Cement	. Spot Solid Cement used TotAL OF 30 sks
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Code	Qty or Units	Description of Product or Services	Unit Price	Total
C 105		Pump Charge	750.00	750.00
C 107	30	Mileage	3.95	118.50
0.101				ing water and the
C 203	30 SKS	60/40 POZMIX CEMENT	12.75	382.50
C 206	50 #	Gel 2%	. 20 #	10.00
1 400	00	bu an		

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C 100 0	120 7000	Ton Milenge	M/C	345.00
C 108 H	1.30 1003	10~ minings	Region with a character	
C113	2.5 HRS	80 B66 VAC TRUCK	85.00	212.50
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			Personal and the provide of	
			Sub TotAL	1818.50
		7.5%	Sales Tax	136.39
	wither		Total	1954.89
Authori	zation	sed By BILL Cheever Title Contractor Mike HEFFERN KCC AGENT		
	Lagree to th	e payment terms and conditions of services provided on the back of this jo	b ticket. Any amendr	nents to
	payment	terms must be in writing on the front of this job ticket or in the Customer's	records at ELITE's of	mice.