

**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

1261318

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 #:			1	API No. 15	5				
Name:					Spot Description:				
Address 1:					SecTwp S. R East West				
Address 2:					Feet from	North / South Line of Section			
City:					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 #:  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.					County: Well #: Well #: (Date Well Completed: (FCC District Agent's Name)  by: (KCC District Agent's Name)  Plugging Commenced: Plugging Completed:				
Show depth and thickness of a	all water, oil and gas forma	ations.							
Oil, Gas or Water	Records		Casing I	Casing Record (Surface, Conductor & Production)					
Formation	Content	Casing	Size		Setting Depth	Pulled Out			
Describe in detail the manner cement or other plugs were us						ods used in introducing it into the hole.			
Plugging Contractor License #: Nam				э:					
Address 1: Ad				dress 2:					
City:				State: +					
Phone: ( )				_					
Name of Party Responsible fo	r Plugging Fees:								
State of	County, _				nlovee 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.

(Print Name)

## **ELMORE'S INC.**

Box 87 - 776 HWY99 Sedan, KS 67361

8-11-15

Cell: (620) 249-2519 Eve: (620) 725-5538

<b>~</b> '.	0.1			
City	State	Zip		- 7,
Qty.	Description	Price	Amou	ınt
3 1	or Pulling Unit	1,30,00	360,	00
1 1	er Water Truck	85.00	85,	00
	h- Cement Pump	110,00	110,	00
1120	1" Tubia	.10	112,	06
	SKS Cement	12,00	192.	OE
	Sk Gel	16,00	8.	06
1	Baulk Tank ( 1/2 Price)	85,00	42,	
	h- Backhoe	85,00	42,	50
		100000	952.	06
	Plug Job	Tax	80	92
	Patterson/Agosto #16		1032,	9
	Ran 1" Tubin To 1120'			
	sel Hole Spotted 25KS	Comput	<u>,</u>	
F	alled Up to 700' Spotte	0/2		
ک	Escement Pulled Up to	2251		
	emported To Surface Wi	HL 12		
	KS Comento	9 27 57		

Thank You - We appreciate your business!

Rec'd.	hv			
TICC U.	Dy			

TERMS: Account due upon receipt of services. A 11/2% Service Charge, which is an annual percentage rate of 18% will be charged to accounts after 30 days.