

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

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 #: _			API No.	15					
Name:				Spot Description:					
Address 1:				Sec Twp S. R East West					
Address 2:				Feet fror	m North /	South Line of Section			
City:	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 Wel	I OG D&A Cath	odic County:						
Water Supply Well	Other:	SWD Permit #:	I '	County: Well #:					
ENHR Permit #:	ENHR Permit #: Gas Storage Permit #:								
Is ACO-1 filed? Yes	No If not, is	s well log attached? Yes		Date Well Completed: (Date) The plugging proposal was approved on: (KCC District Agent's Name)					
Producing Formation(s): L	ist All (If needed attach an	other sheet)	' '						
Dept	th to Top: I	Bottom: T.D			,	,			
Dept	th to Top: I	Bottom: T.D	""						
Dept	th to Top: I	Bottom: T.D	Pluggino	g Completed:					
Show depth and thickness	of all water, oil and gas	formations.							
Oil, Gas or W	ater Records		Casing Record (Su	rface, Conductor & Prod	duction)				
Formation	Content	Casing	Size	Setting Depth	Pulled Out				
		Jana G		3 47					
		olugged, indicating where the mer of same depth placed from (	•						
Plugging Contractor License #:			Name:						
Address 1:			Address 2:						
City:			State:		Zip:	+			
Phone: ( )									
Name of Party Responsibl	e for Plugging Fees:								
State of	Cou	nty,	, SS.						
			F	mplovee of Operator of	or Operator on	above-described well,			
	(Print Nan			, 1,111.000.000					

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



LOCATION DAK FOREMAN Le()

**TOTAL** 

PO Box 884, Chanute, KS 66720	FIELD II
620-431-9210 or 800-467-8676	

**CKET & TREATMENT REPORT** 

620-431-9210 or 800-467-8676			CEMEN	T	mvoice:	#80449	345	
DATE	CUSTOMER#	WELL	NAME & NUMI	BER	SECTION	TOWNSHIP	RANGE	COUNTY
6-13-15	2777	Minne	x #1-1	A	1	5 <sup>3</sup>	36W	Rawlins
CUSTOMER	ulbreat		•	N TORGE W TORGE	了 TRUCK#	DRIVER	TRUCK#	DRIVER
CITY		STATE	ZIP CODE	9 +0 Rd 13 d 7 w to Rd 7 5 + w h to	693/	Rob		
JOB TYPE P	5A	HOLE SIZE		HOLE DEPTH	41320	CASING SIZE & W	/EIGHT	
CASING DEPTH		DRILL PIPE		TUBING			OTHER	
SLURRY WEIGH	IT 142	SLURRY VOL_		WATER gal/s	k	CEMENT LEFT in	CASING	
DISPLACEMENT		DISPLACEMENT	r PSI	MIX PSI		RATE		
REMARKS: So	fexx m	eet-ng	10101	1129	culatio	M, Mich	ce 9 +	d isplace
CEMEY	1+ Plug	5 95	19670	ed		- 1		
500								
100 @	2000							
50 6								
10 @	40							
30 €	ett	•						
					-		Theon	k You
							offelly	, drew
ACCOUNT CODE	QUANITY	or UNITS	DE	SCRIPTION of	SERVICES or PR	ODUCT	UNIT PRICE	TOTAL
5405N	ì		PUMP CHARG	E		LC0453 /	139500	139500
5400	Ľ	^	MILEAGE			CCOOD /	525	26250

				pelly	1000
ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICE	UNIT PRICE	TOTAL	
5405N	ì	PUMP CHARGE	LC0453	139500	139500
5406	50	MILEAGE	CC0002 -	535	26250
5407A	10.32+00	Ton mileage	CEOTIO	1 15	90300
					- 150
1131	2405K5	60/40 80Z	cc 5842	15 86	3806 40
11183	826# 60#	Bentonite	cc 5965	357	22302
1107	60th	F10-50a1	CC 6015/	21	17830
	,×				
i.a					
7.					
				<u> </u>	17/9/2
			*	SUD	6768.2
			Ten	2070	1353 b2
				otel)	300KS\$\$ 591 PS
Ravin 3737			Charles .	SALES TAX ESTIMATED	265.93

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.

TITLE TOO PUShop