



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

KANSAS CORPORATION COMMISSION 1265018
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 #: _____
 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

Date: 09-02-2015 G-L

Ticket Number: 116-001246

CUSTOMER INFORMATION

Customer Name:
ENDEAVOR ENERGY RESOURCES L

Invoice Address:

Contact:
MIK GUS MYERS

Phone: _____ FAX: _____

WELL INFORMATION

Well Name:

Well ID:

Well Type:

Well Status:

Well Depth:

Well Location:

WELL BORE INFORMATION

Casing Size:

Drill Bit:

Drill Pipe:

Drill Collar:

Drill String:

Drill Pipe Connections:

Drill Collar Connections:

Drill String Connections:

SIGNATURE HERE IN IS ACCEPTANCE OF TERMS AND CONDITIONS PRINTED ON REVERSE SIDE

I hereby certify that all work performed was done in accordance with the terms and conditions as outlined on the reverse side of this invoice.

I have read and understand the terms and conditions as outlined on the reverse side of this invoice.

[Signature]

DESCRIPTION	AMOUNT
MAST TRAILER	
PERFORATED 2 HOLES IN 7.5" CASING AT 250'	
	975.00
2015 low oil p.c. discount	- 97.50
	\$877.50

PRICES SHOWN ARE ESTIMATES AND SUBJECT TO CHANGE BY ACCOUNTING DEPARTMENT DISCOUNTS DO NOT APPLY TO CHECKS RETURNED INSUFFICIENT FUNDS



REMIT TO: P.O. BOX 160 • SKIATOOK, OK 74070 • (918) 396-3331 • FAX (918) 396-3393

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



Cement or Acid Field Report

Ticket No. 2543
 Foreman Rob McCar
 Camp Eureka KS

Date	Cust. ID #	Lease & Well Number		Section	Township	Range	County	State	
9-17-15	1102	Stalnaker/Ruchler #2					Sumner	KS	
Customer				Unit #		Driver		Unit #	Driver
Endeavor Energy Resources				102		Chris S			
Mailing Address				112		Alan M.			
P.O. Box 40									
City	State	Zip Code							
Delaware	OK	74027							

Job Type 27A Hole Depth _____ Slurry Vol. _____ Tubing 2 3/8"
 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: Safety meeting - Rig up to 2 3/8" tubing. set 50 sks plug @ 2190' tapered cement @ 1800' pull up to 280' mixed 125 sks 60/40 Permiz cement w/ 4% gel pull tubing out tapered well off w/ 80 sks cement. Job complete Rig down.

Thank You!

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C105-2	1	Pump Charge	650.00	650.00
C107	0	Mileage	.395	N/C
C203	255 sks	60/40 Permiz cement	12.25	3251.25
C206	875#	4% gel	.20	175.00
C108B	10.96	tax mileage bulk truck	1.35	1183.68
			Subtotal	5259.93
			7% Sales Tax	368.20
Total				5628.13

Authorization Witnessed by Gus Jones Title Cody

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.