

**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

### 1271459

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

			API No.	15					
ıvame:				scription:					
Address 1:				Sec T\	wp S. R East Wes				
Address 2:				Feet from	North / South Line of Section				
City:	State:	Zip:+		Feet from	East / West Line of Section				
Contact Person:			Footage	s Calculated from Neare	est Outside Section Corner:				
Phone: ( )				NE NW	SE SW				
Type of Well: (Check one)	Oil Well Gas Well	OG D&A Cathod	c County:						
Water Supply Well C	Other:	SWD Permit #:			Well #:				
ENHR Permit #:	Gas Sto	rage Permit #:							
Is ACO-1 filed? Yes	No If not, is well	l log attached? Yes	1		oved on: (Date				
Producing Formation(s): List A	All (If needed attach another	sheet)	by:		(KCC <b>District</b> Agent's Name				
Depth to	•	m: T.D	Pluggind	Commenced:					
Depth to	Top: Botto	m: T.D	1						
Depth to	Top: Botto	m:T.D		, ,					
Show depth and thickness of a		ations.							
Oil, Gas or Water	Records		Casing Record (Su	g Record (Surface, Conductor & Production)					
Formation	Content	Casing	Size	Setting Depth	Pulled Out				
1									
	in which the well is always		Cuid was also ad au						
Describe in detail the manner cement or other plugs were us	. 00		•		ds used in introducing it into the hole.				
cement or other plugs were us	sed, state the character of	same depth placed from (bot	tom), to (top) for ea	ch plug set.					
cement or other plugs were us	sed, state the character of	same depth placed from (bot	tom), to (top) for ea	ch plug set.					
Plugging Contractor License # Address 1:	sed, state the character of	same depth placed from (bot	Name:Address 2:	ch plug set.					
Plugging Contractor License # Address 1:	sed, state the character of	same depth placed from (bot	Name:Address 2:	ch plug set.					
Plugging Contractor License # Address 1: City:)	sed, state the character of	same depth placed from (bot	Name:Address 2:	ch plug set.					
cement or other plugs were us  Plugging Contractor License #	t:	same depth placed from (bot	Name: Address 2: State:	ch plug set.					

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.



250 N. Water, Ste 200 - Wichita, Ks 67202

## **HURRICANE SERVICES INC**

104 Prairie Plaza Parkway - Garnett, Ks 66032

Customer	Production Maintenance Service 405 N. East st. P.O. Box 275			stomer Name:	Mike McClenning		Ticket No.:	100653 http://disc.			
Address:				AFE No.			Date:				
City, State, Zip:	Tyro, Ks. 67364					Plug To Abandon TD @ 1030' 6 3/4" hole					
Service District:	name & No. Howard JH-2										
Well name & No.				Well Location:	2-33s-13	County:	Montgomery	Kansas			
Equipment #	Driver	Equipment#	Driver	Equipment#	Hours	TRUCK CALLED					TIME
201	Jerry	30	Brad			ARRIVED AT JOB					
203	Mark					START OPERATION				AM PM	
	Bryan					FINISH OPERATION				AM PM	
						RELEASED			AM PM		
						MILES FROM STATION TO WELL					

#### Treatment Summary

Set cement plugs as following: 15 sks @ 1020', 15 sks. @ 700', 57 sks. @ 250' to surface Note: Gel spacers between cement plugs

Product/Service Code	Description	Unit of Measure	Quantity	List Price/Unit	Gross Amount			Net Amou
c20101	Cement Pump	ea	1.00	\$790.00	\$790.00			\$592.
p01603	60/40 Pozmix Cement	sack	87.00	\$12.00	\$1,044.00			\$730.
p01607	Bentonite Gel	lb	299.00	\$0.30	\$89.70			\$62.
001607	Bentonite Gel	lb	400.00	\$0.30	\$120.00			\$84.0
20300	Cement Bulk Truck	tm	215.00	\$1.30	\$279.50			\$209.6
				***************************************				
	ice unless Hurricane Services Inc has approved credit prior to sale.							
redit terms of sale for approved accounts are total invoice due on or before the 30th day from the date of invoice. Past due accounts may pay interest on the balance past due at the rate of 1 % per month or the maximum allowable by applicable state or federal laws if such laws limit terest to a lesser amount. In the event it is necessary to employ an agency and/or attorney to fect the collection of said account, Customer hereby agrees to pay all fees directly or indirectly curred for such collection. In the event that Customer's account with HSI becomes delinquent, SI has the right to revoke any and all discounts previously applied in arriving at net invoice use. Upon revocation, the full invoice price without discount will become immediately due and wing and subject to collection. Authorization below acknowledges receipt and acceptance of		Total	Taxable	Gross: \$ 877.59	\$ 2,323.20 Tax Rate:	Net: 6.150%	\$	1,679.72
		Frac and Acid se	ervice treatments des	Tax Nate.	Sale Tax:	\$	53.97	
			wells are not taxable.	Total: \$			1,733.69	
			Date of Service:					
X	including the Standard Terms of Sale.		Representative: I	Thank You				
^	CUSTOMER AUTHORIZED AGENT	Customer	Representative:					
	Customer Comments or Concerns:							