

Employee of Operator or Operator on above-described well,

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

Name of Party Responsible for Plugging Fees: \_\_\_\_

# KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

#### 1273968

Form CP-4

March 2009

Type or Print on this Form

Form must be Signed

All blanks must be Filled

# WELL PLUGGING RECORD

API No. 15 - \_\_\_\_\_ OPERATOR: License #: Spot Description: \_-\_\_- Sec. \_\_\_ Twp. \_\_\_ S. R. \_\_\_ East West Address 1: \_\_\_ Feet from North / South Line of Section Address 2: \_\_\_ \_\_\_\_\_ 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 County: \_\_\_\_ Water Supply Well Other: SWD Permit #:\_ Lease Name: \_\_\_\_\_\_ Well #:\_\_\_\_\_ ENHR Permit #: \_\_\_\_\_ Gas Storage Permit #: \_\_\_\_ Date Well Completed: \_\_\_ Is ACO-1 filed? Yes No If not, is well log attached? Yes No The plugging proposal was approved on: \_\_\_\_ Producing Formation(s): List All (If needed attach another sheet) \_\_\_\_\_(KCC **District** Agent's Name) \_\_\_\_\_ Depth to Top: \_\_\_\_\_ Bottom: \_\_\_\_\_ T.D. \_\_\_ Plugging Commenced:\_\_\_\_\_ \_\_\_ T.D. \_\_\_ \_ Depth to Top: \_\_\_ Bottom: Plugging Completed:\_\_\_\_\_ \_\_\_\_\_\_ Depth to Top: \_\_\_\_\_\_ Bottom: \_\_\_\_\_ T.D. \_\_\_\_\_ Show depth and thickness of all water, oil and gas formations. Oil, Gas or Water Records Casing Record (Surface, Conductor & Production) Size Formation Content Casing 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. \_\_\_\_\_ Name: \_\_\_ Plugging Contractor License #: \_\_\_ 

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.

\_\_\_\_\_ County, \_\_\_\_\_\_ , ss.

(Print Name)

### STATEMENT

## ELMORE'S INC.

Box 87 - 776 HWY99 Sedan, KS 67361

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

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Addres	S			
City	State	Zip	and the second and the second and the second	
Qty.	Description	Price	Amou	nt
3	hr Pulling Unit	120,00	360,	00
3	hr Coment Pump	110,00	330,	00
3	hr Water Truck	85,00	255,	00
15	Sks Cement	12,00	180,	00
1	Sk Coel	16.00	16.	00
1	he Bock hoe	85,00	85,	00
900'		.10	90,	00
			1316.	00
		lax	111,	86
	Plue Job White 4xcou		1427	86
	2/2 Casing			
	Dug Pit Ran 1" To 960			
	Gel Hole Spotted 2 sks			
	Cement Pulled Up to 225	1		
(	Computed To Surface Wil	th		
	12 SKS Cement Sucked			
	Out Pit + Closed Pit			

Thank You - We appreciate your business!

Rec'd. by

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.