



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

KANSAS CORPORATION COMMISSION 1274959
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



DANIELS READY MIX
 2016 COUNTRY CLUB ROAD
 P.O. BOX 842 • WINFIELD, KANSAS 67156
 PHONE: (620) 221-9060 • FAX: (620) 221-7525

No. 3380

QUANTITY	LOAD TIME	DATE 8/21/15	ACCOUNT	CYLINDERS TAKEN	TRUCK	DRIVER	CONTROL NUMBER
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CUSTOMER NAME	DELIVERY ADDRESS
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PURCHASE ORDER	SALES ORDER	TAX	CREDIT		SLUMP
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LOAD QTY	PRODUCT	DESCRIPTION	CYLINDERS	ORDERED	DELIVERED	UNIT PRICE	AMOUNT
10							

LEAVE PLANT	ARRIVE JOB SITE	START DISCHARGE	FINISH DISCHARGE	ARRIVE PLANT
■	■	■	■	■

BY ACCEPTANCE OF THIS LOAD, THE PROPERTY OWNER, CONTRACTOR, SUB CONTRACTOR AND FINISHER AGREE TO THE FOLLOWING STATEMENTS (1-6).

Customer assumes responsibility for a suitable roadway on the public highway to point of delivery and is liable for damages to or by Seller's truck after leaving the highway. WARNING: CAUTION: Freshly mixed cement, mortar, concrete or grout may cause skin injury. Avoid contact with skin where possible and wash exposed areas promptly with water. If any cement mixtures get into eyes, rinse immediately and repeatedly with water and get prompt medical attention. KEEP OUT OF REACH OF CHILDREN. This concrete contains correct water content for strength mix indicated. We do not assume responsibility for strength test when water is added after truck leaves our plant. This concrete conforms to ASTM # -94. No change is allowed without authorized.

5. We do not guarantee the finished results obtained from this load of concrete. Too many factors not under our control can affect the ultimate results.
 6. KANSAS LIEN LAW INFORMATION (from K.S.A. 60-1103a(b)(1))
 Notice to Owners: If you pay the contractor for work or equipment, material, or supplies delivered without having received from the contractor a waiver of lien by all subcontractors, or other evidence of payment to all subcontractors a lien may be filed against your property by a subcontractor. You may request from the contractor a list of all subcontractors. If you received notice of filing a lien statement by a subcontractor, you may withhold from the contractor the amount claimed in the subcontractor's statement pending resolution of the dispute.

SUB TOTAL

TAX
 TOTAL
 PREVIOUS TOTAL
 GRAND TOTAL

TERMS: Invoices due on 10th of the month. A FINANCE CHARGE of 2% per Month, which is an Annual Rate of 24% will be charged on all accounts not paid by the following billing date.
 *Customer agrees to pay reasonable attorney and/or collection fees should it becomes necessary to refer this bill for collection.

Rec'd by Dan Lave

Gallons Water Added at Customers Request



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 PHONE: (620) 221-9060 • FAX: (620) 221-7525

No. 033812

QUANTITY	LOAD TIME	DATE	ACCOUNT	CYLINDERS TAKEN	TRUCK	DRIVER	CONTROL NUMBER
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CUSTOMER NAME <i>10/21/15</i>				DELIVERY ADDRESS			
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PURCHASE ORDER	SALES ORDER	TAX	CREDIT		SLUMP
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Delivered by *Dan Love*

Gallons Water Added at Customers Request