



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

KANSAS CORPORATION COMMISSION 1277092
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



CHARGE TO: Vincent D. J
 ADDRESS
 CITY, STATE, ZIP CODE

WELL/PROJECT NO. 1
 CONTRACTOR Breat B
 TICKET TYPE: SERVICE SALES
 WELL TYPE: oil
 COUNTY/PARISH: Kiowa
 RIG NAME/NO.:
 CITY: Greensburg
 STATE: KS
 DATE: 2/28/15
 ORDER NO.:
 DELIVERED TO: location
 WELL PERMIT NO.:
 WELL LOCATION: 3-29-18

FEDERAL LOCATION	PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING		DESCRIPTION	QTY.	UM	QTY.	UM	UNIT PRICE	AMOUNT
			LOC	ACCT							
	575		1		MILEAGE TRK 114	70	Mi			5.20	350.00
	576 P		1		Pump Charge	1	ea			800.00	800.00
	328-4		1		60/40 pizza (90 gal)	170	sk			10.25	1742.50
	279		1		Bentonite gel	12	sk			25.00	300.00
	581		1		Service charge	180	sk			1.50	270.00
	583		1		Drygas	1578	lb	55	2.77	0.77	419.88
	290		1		D-AIR	1	gal			42.00	42.00

REMIT PAYMENT TO:
 SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?
 WE UNDERSTOOD AND MET YOUR NEEDS?
 YOUR SERVICE WAS PERFORMED WITHOUT DELAY?
 WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?
 ARE YOU SATISFIED WITH OUR SERVICE?
 YES NO

CUSTOMER DID NOT WISH TO RESPOND

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions.
 MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

DATE SIGNED: _____ TIME SIGNED: _____
 A.M. P.M.

SWIFT OPERATOR: _____ APPROVAL: _____

JOB LOG

SWIFT Services, Inc.

DATE 28 OCT 15 PAGES 1
TICKET NO. 28863

CUSTOMER Vladimir Oj WELL NO. # 1 LEASE Brent B JOB TYPE Plug to Abandon

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
								130sk 60/40 200ppg (40% gel)
								5 1/2 casing pull casing
								shot 2 1/2 @ 1545'
	0900							on loc TRX 114
								8 1/2 ton rack - 1290'
	0925	3 1/2	36					mix 12sk gel
		3 1/2	25			200		- fluid to surface -
		3 1/2	36			200		Switch to cement
		3 1/2	13			200		mix 60/40 (40%) @ 13.1ppg 50sk
	0955							Kickstart -
								pull to 360' / cannot get 5 1/2 to surface
								pour H2O down 5 1/2 to get pipe unstuck
		6	48			100		lob pump - constant circ
								- no luck moving pipe -
	1040	3 1/2	13			100		call for logging truck for more cement
		3 1/2	22			100		MIX 50sk 60/40 200(40%) @ 13.1ppg - 1290' ago
								Displace w/ 22 bbl H2O - H2O to surface
	1340							WAIT on Perforators
	1410	3 1/2	13					Shoot @ 545' - pull pipe to 360'
		3 1/2	22					mix 60/40/40% @ 13.1ppg 50sk
	1425							Displace 2 1/2 bbl
	1450		6					pull to 40'
								mix 60/40 200(40%) @ 13.1ppg 20sk
								--- cement standing at surface (170sk)
								} total 170sk
								wash truck
								Rack up
	1500							job complete
								Flank Blowout & pump & truck