



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

KANSAS CORPORATION COMMISSION 1279218
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

1-12-11 District Dakota Ticket No. 67512
 Company Borexco Rig Borexco
 Lease Rosline Well No. _____
 County Finney State KS
 Location 20-22-33 Field _____

CEMENT DATA:
 Spacer Type: water
 Amt. _____ Skys Yield _____ ft³/sk Density _____ PPG _____

CASING DATA: Conductor PTA Squeeze Misc
 Surface Intermediate Production Liner
 Size 2 7/8 Type New Weight _____ Collar _____

LEAD: Pump Time _____ hrs. Type _____
 Excess _____

Amt. _____ Skys Yield _____ ft³/sk Density _____ PPG _____

TAIL: Pump Time _____ hrs. Type 60/40
 Excess _____

Amt. 200 Skys Yield 1.47 ft³/sk Density 13.82 PPG _____

WATER: Lead 6.9 gals/sk Tail _____ gals/sk Total _____ Bbbs. _____

Casing Depths: Top _____ Bottom 1845'

Pump Trucks Used 431

Bulk Equip. 891/287

Drill Pipe: Size _____ Weight _____ Collars _____
 Open Hole: Size 8 5/8 T.D. _____ ft. P.B. to _____ ft.

Float Equip: Manufacturer _____

Shoe: Type _____ Depth _____

Float: Type _____ Depth _____

CAPACITY FACTORS:

Casing: Bbbs/Lin. ft. _____ Lin. ft./Bbl. _____

Open Holes: Bbbs/Lin. ft. _____ Lin. ft./Bbl. _____

Drill Pipe: Bbbs/Lin. ft. _____ Lin. ft./Bbl. _____

Annulus: Bbbs/Lin. ft. _____ Lin. ft./Bbl. _____

Tubing Bbbs/Lin. ft. .0058 Lin. ft./Bbl. _____
 Perforations: From _____ ft. to _____ ft. Amt. _____

Centralizers: Quantity _____ Plugs Top _____ Btm. _____

Stage Collars _____

Special Equip. _____

Disp. Fluid Type water Amt. _____ Bbbs. Weight _____ PPG _____

Mud Type _____ Weight _____ PPG _____

CEMENTER Paul Beaver

PANY REPRESENTATIVE _____

TIME	PRESSURES PSI		FLUID PUMPED DATA			REMARKS
	DRILL PIPE CASING	ANNULUS	TOTAL FLUID	Pumped Per Time Period	RATE Bbbs Min.	
2:30	100		8	8		Hold Safety meeting mix 50 sks @ 1845' @ 14" w/ 31-CC + 250 # hells Displace w/ water
	100		7.5	15.5		
	100		8	23.5		Mix 50 sks @ 1335' @ 14" Displace w/ water
	100		6	29.5		
	0		3.5	33		mix 20 sks @ 60' @ 14"
3:30	0		5	38		wash up to pit
						cement did come to surface
						Thank you