



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

KANSAS CORPORATION COMMISSION 1304662
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



CONSOLIDATED
OIL WELL SERVICES, LLC

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

TICKET NUMBER 49760
LOCATION Chanute, KS
FOREMAN Casey Kewenowky

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
8/14/15	1504	Clarey # 2	SE 24	14	20	DG
CUSTOMER	B G - S Inc					
MAILING ADDRESS	3939 E 118 Rd					
CITY	STATE	ZIP CODE	TRUCK #	DRIVER	TRUCK #	DRIVER
Chanute	KS	66629	729	Chalen		Shelby Manning
			467	Ken Gar		
			548	Traher		
			625	Ken Dot		

JOB TYPE plug HOLE SIZE _____ HOLE DEPTH _____ CASING SIZE & WEIGHT _____
 CASING DEPTH 880' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ DISPLACEMENT VOL _____ WATER GALS/K _____ CEMENT LEFT IN CASING 40 lb
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE 3 gpm
 REMARKS: established rate mixed & pumped 25 sks Packland IA w/ 162 gal per sk, pressured to 1500 PSI, shut in casing.
10 # Colter seed Halls w/ cement

Handwritten signature/initials

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CE0450	1	PUMP CHARGE	1500.00	
CE0002	on lease	MILEAGE	150.00	
CE0211	1/5 min	ten mileage	100.00	
CE0853	1 hr	80 vac	1732.00	
		trucks	883.32	
		subtotal	337.50	846.68
CC5640	85 sks	Packland IA	37.86	
CC5965	120 #	Col	5.00	
CC1080	10 #	Colter seed Halls	380.38	
		material	143.95	
		subtotal	186.35	
		SALES TAX	7.87	13.98
		ESTIMATED TOTAL		1049.01

FORM 3737
 AUTHORIZATION Payson will Sell TITLE _____ DATE 8/21/15
 I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form