

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

the same are true and correct, so help me God.

### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

#### 1309196

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 #:			AP	l No. 15	i						
Name:				ot Desci	ription:						
Address 1:			_		Sec Tw	rp S. R East West					
Address 2:			_		Feet from	North / South Line of Section					
City:	State:	Zip:+	_		Feet from	East / West Line of Section					
Contact Person:			Foo	otages C	Calculated from Neares	st Outside Section Corner:					
Phone: ( )				1	NE NW	SE SW					
Type of Well: (Check one) C Water Supply Well C ENHR Permit #:	Other:	OG D&A Cathodi SWD Permit #:	Lea	ase Nam	me:	Well #:					
Is ACO-1 filed? Yes	No If not, is well	I log attached? Yes	1 1		•	oved on: (Date)					
Producing Formation(s): List A	_		_			(KCC <b>District</b> Agent's Name)					
Depth to	Top: Botto	m: T.D									
Depth to	Top: Botto	m: T.D		00 0							
Depth to	Top: Botto	m: T.D		gging C	completed:						
Show depth and thickness of a	all water, oil and gas forma	ations.									
Oil, Gas or Water	Records		Casing Recor	Record (Surface, Conductor & Production)							
Formation	Content	Casing	Size		Setting Depth	Pulled Out					
Describe in detail the manner cement or other plugs were us						Is used in introducing it into the hole. If					
Plugging Contractor License #	#:		Name:								
Address 1:			Address 2:								
City:			Sta	te:		Zip:+					
Phone: ( )											
Name of Party Responsible fo	r Plugging Fees:										
State of	County, _		, s	S.							
	(Print Name)			_ Emp	ployee of Operator or	Operator on above-described well,					

Submitted Electronically

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



10244 NE Hwy. 61 P.O. Box 8613 Pratt, Kansas 67124 Phone 620-672-1201

# 1718 13644 A

tt, Kansas 67124			
one 620-672-1201			
-22-9	DATE	TICKET NO	

STANDING CALAN	PRESSU	JRE PUMP	PING & WIRELINE	-22-	~ Ý			DATE	TICKET NO					
DATE OF //3	1201	6 D	ISTRICT POSTA	1105	**********	NEW 🔀 🤆	OLD □ I	PROD IN	J   WDW	□8	USTOMER RDER NO.:			
CUSTOMER 6	-		11 & G95, LC	~3 ===		lease $S_{\epsilon}$	toPI	)e]		•	WELL NO	'-8		
ADDRESS		COUNTY Renc STATE JES												
CITY			STATE		SERVICE CREW DORIN, SCOLD, EJ									
AUTHORIZED E	BY					JOB TYPE:	CNU	S/PT	<i>p</i>					
EQUIPMENT		HRS	EQUIPMENT#	HRS	EQL	JIPMENT#	HRS	TRUCK CAL	LED	DAT Z	E M //	ME '3d		
86779 19978		33/4		-				ARRIVED A	T JOB	61	3 AM 2!	00		
17978	X	374				<del> </del>		START OPE	RATION	61	3 M 2!	45		
								FINISH OPE	RATION	61	3 \$ 71,1	15		
								RELEASED		61	36% 8.	) <i>o</i>		
								MILES FRO	M STATION TO	WELL	- H7			
become a part of the	nis contra	ect without	of and only those terms and the written consent of an of	ficer of Basic E	nergy Se	rvices LP.	5	GIGNER:(WELLOW	LA LANGE,		AACTOR OR AG	GENT)		
REF. NO.		,	ATERIAL, EQUIPMENT	AND SERVIC	JES US	ED	UNIT	QUANTITY	UNIT PRIC	上	\$ AMOUN	-		
CP 103		40 + 10 f1	02				SK	195 -			2,346 181	06 30		
CC 200			+Gei				16	336			84	60		
Eloo			egsa Charse-P	Clouds	Sm91	1 U9ns & C9e	+	60	,		270	$\alpha$		
E 101	Hec	DV E	COLOMEN + M	11295 @			m	120	•		900	<i>C</i> 6		
E113	Pro	<u>ppgna</u>	9na Buile De	DIVERPC	hsirs.	es, Poldenty	1. Th/m		•		1,260	00		
CE 204 CE 240	De	Pth_	Charge 300	11 -4,0	100 1		4hr SK	195	,	-	2189 218	60		
5003			Supervisor, f				Eg	173	4		) 75	00		
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MAT						ATERIALS %TAX ON \$  D. C.C.Y. TOTAL 3 00								
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SERVICE REPRESENTATIV	/E )	Ceri				RIAL AND SER' TOMER AND R	RECEIVED	···	MAN	UN				
			•				(WELL O	NNEBOPANA	OF CONTRACTO	DR OR .	AGENT)			

FIELD SERVICE ORDER NO.

CLOUD LITHO - Ablene, Th



## TREATMENT REPORT

Customor					aaaa Na						Doto							
Customer		95,10	7 		ease No.						Date	1	/2	1	016	y		
Lease St	OPPel				Vell#	1-8	<b>y</b>								016			
Field Order # Station Prad, RS					Cesing 4 1/2 Depth 3672						County	P	2n0			State	<i>IC</i> 5	
Type Job C	NWI	PTH						For	mation				Legal	Desc	ription &	-22-	. 9	
	E DATA	PE	RFORAT	ING	IG DATA FLUID USED						T	REA	TMENT	TRE	SUME			
Dempize	Tubing Si	ize Shot	s/Ft			Acid			RATE PF				ESS ISIP					
Depth 3677	2 Depth	From	1	То		Pre Pad		Max		Max			51		Min.			
Volume 52		From		То		Pad			Min					1	10 Min.			
Max Press	Max Pres	s From	1	То		Frac		Avg					1	15 Min.				
Well Connection	on Annulus \	Vol. From	1	То						HHP Used				A	nnulus Pi	ressure		
Plug Depth	Packer De	epth From	,	То		Flush	Freshi	ترصل کی و د	la w	Gas Volume				T	otal Load			
Customer Rep	resentative	5/2	<u> </u>		Station	n Manag	jer Kei	Nin (	3016	31ey	Treat	er 🕥	)G Y //	ο F	<u> </u>	KLh	<i>ya</i>	
Service Units	B 44 0	7898	2 867	79	7768	86 1	9918					109		, ,				
Najaran.	Desin	Scors			EJ		<b>3</b>											
Time	Casing Pressure	Tubing Pressure	Bbls.	Pum	ped	R	ate			Service Log								
!copm								On	20	10920	n/S	Sslew meeding						
															_			
								36	72	' - 3:	SE			•				
2:45pm	200			8		ر ر	5	Pump 8 bbls water										
	200			9		3	5	Mix 358/c Cement								-		
,	200	<i>(</i> -	~	3		3	,	Dispisce 3 Wyter										
	200		í	43		5		43 bbis mud										
								12001- 35sic										
	200			8		5 5 5		Pump 8 bbls water										
	200							Mix 358K										
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ر	200				3		5 Pump.			3 bhis Water								
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	200									e 1bhi Warr								
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/	100		(	v		~	3	MIX	25	Sicceme	'n +							
//				7 3				R9+ hore - 30 sk Cement										