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

## KANSAS CORPORATION COMMISSION

**OIL & GAS CONSERVATION DIVISION** 

1312052

March 2009 Type or Print on this Form Form must be Signed All blanks must be Filled

Form CP-4

## WELL PLUGGING RECORD K.A.R. 82-3-117

OPERATOR: License #:	API No. 15
Name:	Spot Description:
Address 1:	Sec Twp 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:	Footages Calculated from Nearest Outside Section Corner:
Phone: ( )	NE NW SE SW
Type of Well: (Check one)  Oil Well  Gas Well  OG  D&A  Cathodic    Water Supply Well  Other:  SWD Permit #:  SWD Permit #:  SWD Permit #:    ENHR Permit #:  Gas Storage Permit #:  Gas Storage Permit #:  No    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.	County: Well #: 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: _	. Name:				
Address 1:		Address	2:				
City:			State:	_ Zip: +			
Phone: ( )			-				
Name of Party Responsible for Plugging	Fees:						
State of	County,		, SS.				
	(Print Name)		_ Employee of Operator or	Operator on above-described well,			

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.

## GARNETT TRUE VALUE HOMECENTER

410 N Maple

Garnett, KS 66032 {785} 448-7106 FAX {785} 448-7135

**Customer Copy** INVOICE PLEASE REFER TO INVOICE NUMBER ON ALL CORRESPONDENCE

	Page: 1				Invoice: 1	0239194	
	Special : Instructions : Sale rep #: GABBY	GABRIELL S	PRING Acct	rep code:	Time: Ship Dat Invoice I Due Dat	Date: 07/11/16	
	Sold To: JRC OIL P.O. BOX		Ship To: J (785) 448-5833				
	GAINET	, 10 00002	(785) 448-5833				
	Customer #: 00008	51	Customer PO:	Receiter and	Order By:	popsig01	8TH T 137
ORDER	SHIP L U/M	ITEM#	DESCRIPTION		Alt Price/Uom		EXTENSION
36.00	36.00 P BAG	CPPC	PORTLAND CEMENT-94# 15 SX for CZ 15 SX for BR	-47 2-21	13.0233 вад 7/13/16 7/15/16	13.0233	468.84
		FILLED BY	CHECKED BY DATE SHIPPED DR Customer Pick up RECEIVED COMPLETE AND IN GOOD CONDITION	Taxable	e 468.84	Sales total	\$468.84
		x	1,1/	Non-ta: Tax #	xable 0.00	Tax	39.86
						TOTAL	\$508.70