

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

1313475

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

Spot Description: Spot	OPERATOR: License #:					API No. 15					
State Zip Feet from North / South Line of Section Street Feet from Street Feet from Street Feet from Street Feet Feet Feet Feet Feet Feet Feet				I							
City:	Address 1:			_		Sec Tv	vp S. R.	East We			
Contact Person: Fhone (Address 2:					Feet from North / South Line of Section					
Phone (City:	State:	Zip: +	_	Feet from East / West Line of Section						
Type of Wellt; (Check one)	Contact Person:			Foo	Footages Calculated from Nearest Outside Section Corner:						
Water Supply Well Other: Gas Storage Permit #: Lease Name: Well #: Lease Name: Well #: Lease Name: Well #: Date Well Completed: The plugging proposal was approved on: (Date) by: (MCC District Agent's Name) Producing Formation (s): List All (if needed attach another sheet) Depth to Top: Bottom: T.D. Depth to Top: Depth to Top: Depth to Top: Depth to Top: Bottom: T.D. Depth to Top:	Phone: ()					NE NW	SE SV	V			
Water Supply Well Other:	Type of Well: (Check one)	Oil Well Gas Well	OG D&A Cathod	ic Co	ııntv.						
ENIR Permit #:	Water Supply Well	Other:	SWD Permit #:								
As ACC-1 filed?	ENHR Permit #:	Gas Sto	orage Permit #:								
Depth to Top:	Is ACO-1 filed? Yes	No If not, is wel	I log attached? Yes		·						
Depth to Top:	Producing Formation(s): List /	All (If needed attach anothe	r sheet)	by:			(K(CC District Agent's Nam			
Depth to Top: Bottom: T.D. Plugging Completed: Depth to Top: Bottom: T.D. Plugging Completed: Depth to Top: Bottom: T.D. Plugging Completed: Show depth and thickness of all water, oil and gas formations. Oil, Gas or Water Records Casing Size Setting Depth Pulled Out 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 zeroent 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: Zip: +	Depth to	o Top: Botto	om: T.D								
Show depth and thickness of all water, oil and gas formations. Oif, 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 sement or other plugs were used, state the character of same depth placed from (bottom), to (top) for each plug set. Plugging Contractor License #: Address 1: Address 2: City: State: Zip: + Name: Name of Party Responsible for Plugging Fees: State of County, , ss.	Depth to	o Top: Botto	om: T.D								
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 zement or other plugs were used, state the character of same depth placed from (bottom), to (top) for each plug set. Plugging Contractor License #: Address 1: Address 2: City: State: Zip: + Phone: () Name of Party Responsible for Plugging Fees: State of County,, ss.	Depth to	o Top: Botto	om:T.D		gging Ct	ompieted					
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Formation Content Casing Size Setting Depth Pulled Out	Show depth and thickness of	all water, oil and gas form	ations.								
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Plugging Contractor License #: Name:	Formation	Content	Casing	Size		Setting Depth	Pulled Out				
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City:	Plugging Contractor License #: N				e:						
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Name of Party Responsible for Plugging Fees:	City:			Sta	.te:		Zip:	+			
State of, ss.	Phone: ()										
	Name of Party Responsible for	or Plugging Fees:									
	State of	County, _		, s	S.						
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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.



JTC Oil, Inc. P.O. Box 24386 Stanley, Kansas 66283

Work Order Ticket

Invoice Nº 4693

<u>Date</u>	Customer #	Well Name and #	<u>Sec</u>	<u>Town</u>	Range	County
8-3-16						
Sustana 17	H.					
Customer / O/						
Mailing Address				- 		
City		State		Zip		!
	<u>-</u> .					
Quantity / Hrs		Descriptio	<u>n</u>		Rate	<u>Total</u>
- SV	Ruged	<u> </u>		•		
	Cemen	t: Pn	Uid:			
	#1 @	20 bags 53	5' 10			
	#3 @	20 bags 53	781			
	= 4 @	12 bags 5=	<u>5</u> ′			
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Authorization			Title	e		