

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

1314591

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 #: | | | AP | l No. 15 | | | | |
|---|------------------------------------|------------------------------|-----------------------------|-------------------|---------------------------------------|-------------------|-------------------------------------|--|--|
| State Zip Feet from North / South Line of Section Street Feet from Street From Stree | | | | I | | | | | |
| City: | Address 1: | | | _ | Sec | c Twp S. | R East West | | |
| Contact Person: Fhone (| Address 2: | | | _ | Fe | eet from North | / South Line of Section | | |
| Phone (| City: | | | | Feet from East / West Line of Section | | | | |
| Type of Wellt; (Check one) | Contact Person: | | | Foo | otages Calculated fro | m 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 | sw | | |
| Water Supply Well Other: | Type of Well: (Check one) | Oil Well Gas Well | OG D&A Cathod | ic Co | untv. | | | | |
| 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: | | | _(KCC District Agent's Name) | | |
| 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 Completed. | | | | |
| 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. | | | | | | | | | |
| Formation Content Casing Size Setting Depth Pulled Out | Show depth and thickness of | all water, oil and gas form | ations. | | | | | | |
| 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 #: | Oil, Gas or Wate | r Records | | Casing Recor | d (Surface, Conductor | & Production) | | | |
| Plugging Contractor License #: Name: | Formation | Content | Casing | Size | Setting Dep | oth Pulled O | ut | | |
| Plugging Contractor License #: Name: | | | | | | | | | |
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| Plugging Contractor License #: Name: | | | | | | | | | |
| Address 1: Address 2: | cement or other plugs were u | sed, state the character of | same depth placed from (bot | trom), to (top) i | or each plug set. | | | | |
| City: | Plugging Contractor License #: Nam | | | | x | | | | |
| Phone: () | Address 1: | | | Address 2: | | | | | |
| 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, _ | | , ss | S. | | | | |
| | | • | | | _ | . 🗆 - | | | |

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



CONSOLIDATED

Well Services, LLC AP I 15-235. 22 859 -20-20

TICKET NUMBER 51311

FOREMAN FUZZY

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

FIELD TICKET & TREATMENT REPORT

| 620-431-9210 | or 800-467-8676 | 3 | CEMENT | | | | KS |
|---|-----------------|---|--------------|----------|------------------|-------------|---|
| DATE | CUSTOMER# | WELL NAME & NUM | BER | SECTION | TOWNSHIP | RANGE | COUNTY |
| 7.21.16 | 1091 | Rice #4 | | 19 | 33 | 8 | Cowley |
| | | | | | 127 | | 111111111111111111111111111111111111111 |
| MAS | 0.160. | | | TRUCK# | DRIVER | TRUCK# | . DRIVER |
| | | | | 603 | TABLEY | 725 | E425 4 |
| CUSTOMER BAS 0:1 (0.) MAILING ADDRESS 2508 Edgemont S. f. 4 4 CITY STATE ZIP CODE Arkawsas C: 44 KS 67005 JOB TYPE DEPTORILL PIPE TUBING SLURRY WEIGHT SLURRY VOL WATER DISPLACEMENT DISPLACEMENT PSI MIX PSI REMARKS: 50244 Mexding on Same Will S Circulation. Mix 130365 60/40 Cottons and hells. Pirculate Crow B-3-2p. Pull All 46g and Top of | | 611 | Jetemy | | | | |
| CITY | | STATE ZIP CODE |]; [| 681 | Jud | · - | |
| | | K5 67005 | | 713 | MARK | | |
| JOB TYPE & | wP ' | HOLE SIZE | HOLE DEPTH | | CASING SIZE & WI | FIGHT 511- |) |
| CASING DEPTH | 2632' | DRILL PIPE | TUBING Z | 318 | | OTHER | |
| SLURRY WEIGH | т | SLURRY VOL | WATER gal/sk | | CEMENT LEFT in (| \$ 1100 Car | - |
| DISPLACEMENT | | DISPLACEMENT PSI | | | RATE | | |
| REMARKS: 50 | som yes. | ding on Sams 4 | 2411 5014 | iso Ri | g o A mad | 124450 | ish |
| erreula | Hion. | Mix 130565 60 | 140 49. | ००० पक्त | e 1/4 to rel | Q4 40 | 4.1 |
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| TOGAI | 15831 | es 60 (40 490 | 0 490 | as iluse | 1 (1.01 . b. | . / | Honserd |
| holls | , | | . 18 | | Pord @ lared | 20/10 | MON 2 E FO |
| | work. | ed Truck Back | K | | | | |
| | | ,. ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | , | | Thanks - | エットレン | - (0 = 147 |
| | | | | ~ | | 40004 | + |

| ACCOUNT | QUANITY or UNITS | DESCRIPTION of SERVICES or PRODUCT | UNIT PRICE | TOTAL |
|-----------|------------------|---|-----------------|------------|
| (E0450 | 3 425 | PUMP CHARGE | 75000 | 75000 |
| (60002 | 65 | MILEAGE | 715 | WIC |
| (60710 | 6.8 TON | Ton wileage Delivery | 125 | 773 50 |
| • | | | | |
| 115829 | 1585kg. | :60140 4 70 cel | 1600 | 2528 |
| CL 5325 | 550 th | Calcium chloride | 100 | 55000 |
| 666075 | 150 th | Ady, Clake | 200 | 30000 |
| 66080 | 1500 | Cottonsred holls. | ,50 | 7500 |
| | | | | |
| | • | 70640441 | | 497630 |
| | | discount | | 223942 |
| | * | 50642441 | | 2 58 |
| | | 300,1014 | | 273700 |
| | | | | |
| | | | | - Sour-one |
| | • | | | |
| | | L. C. | | |
| avin 3737 | | | SALES TAX | |
| | | | ESTIMATED TOTAL | |

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.