

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

1320613

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 #: 8047
Name: Vickers Farms Oil Venture, a General Partnership
Address 1: 3173 TEXAS RD
Address 2: _____
City: OTTAWA State: KS Zip: 66067 + _____
Contact Person: jerry I vickers
Phone: (785) 883-2171
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 - 15-059-23481-00-00
Spot Description: _____
NE SE SE NE Sec. 31 Twp. 16 S. R. 21 ☒ East ☐ West
3050 Feet from ☐ North / ☒ South Line of Section
300 Feet from ☒ East / ☐ West Line of Section
Footages Calculated from Nearest Outside Section Corner:
☐ NE ☐ NW ☒ SE ☐ SW
County: Franklin
Lease Name: BRAUN Well #: 12
Date Well Completed: _____
The plugging proposal was approved on: _____ (Date)
by: _____ (KCC District Agent's Name)
Plugging Commenced: 10/21/2016
Plugging Completed: 10/21/2016

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
		Surface	6.25	22	
		Production	2.875	677	

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.

21 sacks Portland cement pumped and squeezed to 900 pounds and shut in at 350 lbs.

Plugging Contractor License #: 6084 Name: McMullin, Douglas
Address 1: 4397 K68 Address 2: _____
City: WELLSVILLE State: KS Zip: 66092 + _____
Phone: (785) 883-4343
Name of Party Responsible for Plugging Fees: jerry I vickers
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.

Submitted Electronically