

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

1324640

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

Address 2	OPERATOR: License #:			API No	o. 15			
Address 2:	Name:							
City:	Address 1:				Sec	Twp S. R East West		
Contact Person: Phone: () Proper Well* (Check and) Oil Well Gas Well OG D&A Cathodic Water Supply Well Other: Gas Storage Permit #: ENHR Permit #: Gas Storage Permit #: Deep this Top: Bottom: T.D. Show deepth and thickness of all water, oil and gas formations. Oil, Gas or Water Records Casing Size Setting Deepth Pulled Out Describe in detail the manner in which the well is plugged, indicating where the must fluid was placed and the method or methods used in introducing it into the hole 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: Address 2: Zip: + Plugging Contractor License #: Address 2: Zip: + Phone:	Address 2:				Feet fror	n North / South Line of Section		
Phone: (City:	ty:			Feet from East / West Line of Section			
Type of Well: (Check one) Oil Well Gas Well OS D&A Cathodic Water Supply Well Other: SWD Permit #: Lease Name: Well #: Lease Name:	Contact Person:				Footages Calculated from Nearest Outside Section Corner:			
Water Supply Well Other: Gas Storage Permit #: Lease Name: Well #: Lease Name: Lease Name: Well #: Lease Name: L	Phone: ()				□ NE □ NW □ SE □ SW			
Water Supply Well Other:	Type of Well: (Check one)	Oil Well Gas Well	OG D&A Cathoo	dic County	/:			
If not, is well log attached?			SWD Permit #:	1				
SACO-filed? Yes No Inot, is well log attached? Yes No Producing Formation(s): List All (if needed attach another sheet) by:	ENHR Permit #:	Gas S	storage Permit #:	Date W	/ell Completed:			
Depth to Top:	Is ACO-1 filed? Yes	No If not, is w	ell log attached? Yes		•			
Depth to Top: Bottom: T.D	Producing Formation(s): List	·				(KCC District Agent's Name)		
Depth to Top: Bottom: T.D. Pluggling Completed: Depth to Top: Bottom: T.D. Pluggling Completed:	Depth t	to Top: Bot	tom: T.D	Pluggir	na Commenced:			
Show depth and thickness of all water, oil and gas formations. Oil, Gas or Water Records	Depth t	to Top: Bot	tom: T.D		9			
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 hold cement 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: ** ** ** ** ** ** ** ** **	Depth t	to Top: Bot	tom:T.D					
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 hold coment 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, Issued Casing Record (Surface, Conductor & Production) Pulled Out Pulled Out Address 2: State: Zip:								
Formation Content Casing Size Setting Depth Pulled Out			mations.					
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 hold cement or other plugs were used, state the character of same depth placed from (bottom), to (top) for each plug set. Plugging Contractor License #:	,					· ·		
Plugging Contractor License #:	Formation	Content	Casing	Size	Setting Depth	Pulled Out		
Plugging Contractor License #:								
Plugging Contractor License #:								
Plugging Contractor License #:								
Plugging Contractor License #:								
Plugging Contractor License #:								
Address 1:		. ,		•				
City:	Plugging Contractor License #: Nan			Name:				
Phone: ()	Address 1:			Address 2:				
Name of Party Responsible for Plugging Fees:	City:			State: _				
State of	Phone: ()							
Employee of Operator or Operator on above-described v	Name of Party Responsible f	or Plugging Fees:						
Employee of Operator or Operator on above-described v	State of	County	,	, SS.				
(Print Name)		(Print Name)			Employee of Operator of	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.

ELMORE'S INC.

Box 87 - 776 HWY 99 Sedan, KS 67361

Cell: (620) 249-2519 Eve: (620) 725-5538

form district					
Data					
Date		Sec.		6-1	
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The last the same of the same of			/ _	2	1000

City	State_	Zip		
Qty.	Description	Price	Amou	nt
7	har fulling Upit	120	840,	00
3	har Comout Pump	110,00	330,	
3	hr Water Truck	85,00	255.	00
1	Boulle Tank	85,00	85.	00
140'	1" Tubin	.10	114.	00
35	SKS Coment	12,00	420,	00
1	hr Backhoe	8500	85.	00
)	Sk Gel	16,00	_16,	00
			2145,	00
	Plug Job Janzen A-1	Tax	182,	33
	1/2 Cosing Pulled Rods & Tub	L Bo	182,	33
1	Out Ran 1" To 1140 Coel	Hole		
	Spotted 5 SKS Coment Pal	Led Usi	6	
	600 Spotted 55k Coment	Dalled		
	1pto 225' Comented To	Sur face	2	
	Bith 25 SKS Coment.		St. State St. St.	

Thank You - We appreciate your business!

Rec'd hy			
Rec'd. by			

TERMS: Account due upon receipt of services. A 11/2% Service Charge, which is an annual percentage rate of 18% will be charged to accounts after 30 days.