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

1329769

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 #:			API	No. 15					
Name:				Spot Description:					
Address 1:			_	Sec	Twp S. R	East West			
Address 2:			_	Feet from North / South Line of Section					
City:				Feet from East / West Line of Section					
Contact Person:			Foot	Footages Calculated from Nearest Outside Section Corner:					
Phone: ()				NE NW	SE SW				
Type of Well: (Check one)	Oil Well Gas Well	OG D&A Cathod	ic Cou	nty:					
Water Supply Well	Other:	SWD Permit #:		•		Well #:			
ENHR Permit #:	Gas Sto	orage Permit #:		Date Well Completed:					
Is ACO-1 filed? Yes	No If not, is well	I log attached? Yes		The plugging proposal was approved on: (Date)					
Producing Formation(s): List /	All (If needed attach another	r sheet)	by:_		(KCC	District Agent's Name)			
Depth to	o Top: Botto	om: T.D		ging Commenced:					
Depth to	o Top: Botto	om: T.D		gging Completed:					
Depth to	o Top: Botto	om:T.D		gging Completed.					
Show depth and thickness of	all water, oil and gas forma	ations.							
Oil, Gas or Wate	r Records		Casing Record	d (Surface, Conductor & Prod	luction)				
Formation	Content	Casing	Size	Setting Depth	Pulled Out	Pulled Out			
cement or other plugs were u	sed, state the character of	same depth placed from (both	ttom), to (top) to	or each plug set.					
Plugging Contractor License #: N				ne:					
Address 1:			Address 2:						
City:			State	e:	Zip:	+			
Phone: ()									
Name of Party Responsible for	or Plugging Fees:								
State of	County, _		, ss						
	,,								
				Employee of Operator o	r ∟ Uperator 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.

(Print Name)

Kepley Well Service, LLC

19245 Ford Road Chanute, KS 66720

Date	Invoice #
6/20/2016	51143

48-1103536

AFE#

\$1,600.00

\$104.00

\$1,704.00

\$1,704,00

Wilson County Holdings LLC 907 N. Poplar Street, St. 235 Casper, WY 82601

Phone #

620-431-9212

County

E-mail

rustypickle@hotmail.com

	Wilson		7/5/2016		Bates #28		
De	escription		Qty		Rate		Amount
establish rate. Pump	Pumped 4 BBLS of water to bed 39 sacks of cement and essured up to 800 psi and he	eld.		1	1,6	00.00	1,600.00T
GAL_51 DESC_ POSTED KSI	FREDIG 500/151, 1704.00 PAA (1704.00) FRE 1000 700/998 RO LIAB 1704.0		27421		PIE C	TEI	W 18 M

Due Date | Well #

Subtotal

Total

Sales Tax (6.5%)

Balance Due