

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

1344334

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 #: _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

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 - _____

Spot Description: _____

____ - ____ - ____ Sec. ____ Twp. ____ S. R. ____ ☐ East ☐ West

_____ Feet from ☐ North / ☐ South Line of Section

_____ Feet from ☐ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☐ NE ☐ NW ☐ SE ☐ SW

County: _____

Lease Name: _____ Well #: _____

Date Well Completed: _____

The plugging proposal was approved on: _____ (Date)

by: _____ (KCC District Agent's Name)

Plugging Commenced: _____

Plugging Completed: _____

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 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

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.

Plugging Contractor License #: _____ Name: _____

Address 1: _____ Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Phone: (_____) _____

Name of Party Responsible for Plugging Fees: _____

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

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

FIELD TICKET & TREATMENT REPORT CEMENT

TICKET NUMBER 51731
LOCATION Oakley Ks
FOREMAN Walt Dinkel

Invoice #809650

| | | | | | | |
|---|-------------|--------------------|----------|-----------------|---------|--------|
| DATE | CUSTOMER # | WELL NAME & NUMBER | SECTION | TOWNSHIP | RANGE | COUNTY |
| 2-21-17 | 2777 | Anderson #1 | 29 | 14S | 34W | Logan |
| CUSTOMER Culbreath | | | | | | |
| MAILING ADDRESS 3501 South Yale Avenue | | | | | | |
| CITY Tulsa | STATE OK | ZIP CODE 74135 | TRUCK # | DRIVER | TRUCK # | DRIVER |
| Russell springs South to Inclined Rd. 3-E S.S. | | | 731 | Cory Davis | | |
| | | | 529-T127 | Travis Williams | | |
| | | | | | | |

| | | | |
|---------------------------|------------------------|----------------------------|--|
| JOB TYPE <u>OHP</u> | HOLE SIZE _____ | HOLE DEPTH _____ | CASING SIZE & WEIGHT <u>5 1/2 15.5 #</u> |
| CASING DEPTH _____ | DRILL PIPE _____ | TUBING <u>2 3/8 - 4300</u> | OTHER <u>Per F 24366-4385</u> |
| SLURRY WEIGHT <u>13.0</u> | SLURRY VOL _____ | WATER gal/sk _____ | CEMENT LEFT in CASING _____ |
| DISPLACEMENT _____ | DISPLACEMENT PSI _____ | MIX PSI _____ | RATE _____ |

REMARKS: Safety Meeting, rig up equipment
4300' - mixed 1000# 60 l w/ 200# Hulls, Followed w/ 80 SKS Cement 2 1/2' 500#
Hulls, Displaced 8 BBL H₂O
2600' mixed 100 SKS Cement w/ 200#, Displaced 4 BBL H₂O
1600' mixed 160 SKS Cement w/ 100# Hulls, Displace 1 BBL H₂O
Top OFF Well w/ 25 SKS Cement
10 SKS in Annulus

[illegible]

AUTHORIZATION

TITLE

DATE _____

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.