

Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

KANSAS CORPORATION COMMISSION 1347048
 OIL & GAS CONSERVATION DIVISION
WELL PLUGGING RECORD
 K.A.R. 82-3-117

Form CP-4
 March 2009
Type or Print on this Form
Form must be Signed
All blanks must be Filled

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.
 _____ Employee of Operator or Operator on above-described well,
 (Print Name)

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

Account Transactions: RCB Bank

BUTLER OIL LLC
2512 SHAWSON
WINFIELD, KS 67156

2213 P
03/15/15

12-26-2016

Home Lumber & Supply Co., Inc.

Pay to the Order of: *Home Lumber & Supply Co., Inc.* \$ *500.15*

RCB BANK

For: *Laura Butler*

001-011-0284 daf 12-29-15 RCB 5103112594

12/29/15 006151600000000101105017

FOR THE CLERK OF
COUNTY BOARD
WINFIELD, KS 67156

Account Transactions: RCB Bank

BUTLER OIL LLC
2512 SHAWSON
WINFIELD, KS 67156

2211
03/15/15

12-21-2016

Home Lumber

Pay to the Order of: *Home Lumber* \$ *720.00*

five hundred twenty dollars + 00/100

RCB BANK

For: *Laura Butler*



Winfield	9C
1201 Main Street	IN# 1352247
	ashleyl
Winfield, Kansas 67156	12/21/2016
Phone: (620) 221-1860	15:51

PORTLAND CEMENT TYPE 1 94#

PC1		
35.00 ea	13.85 / ea	484.75

Pallet - Pallet Charge

	15.00
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Sub Total	499.75
WINCL	40.73
Total	540.48

Paid By: Check 540.48

Signature _____

12/21/2016 3:51:00PM



Winfield	9C
1201 Main Street	IN# 1354680
	peggy p
Winfield, Kansas 67156	12/27/2016
Phone: (620) 221-1860	14:25

PORTLAND CEMENT TYPE 1 94#

PC1		
40.00 ea	13.85 / ea	554.00

Sub Total	554.00
WINCL	45.15
Total	599.15

Paid By: Check 599.15

Signature _____

12/27/2016 2:26:00PM