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

1360150

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 T	wp S. R East	West				
Address 2: State: Zip: +				Feet from North / South Line of Section Feet from East / West Line of Section						
Phone: ()				NE NW	SE SW					
Type of Well: (Check one)			ic County:							
Water Supply Well	Other:	SWD Permit #:		Lease Name: Well #:						
ENHR Permit #:	Gas Sto	rage Permit #:	Date We	ell Completed:						
s ACO-1 filed? Yes	No If not, is wel	l log attached? Yes	1		roved on:					
Producing Formation(s): List A		sheet)	by:		(KCC District Age	nt's Name)				
Depth to	o Top: Botto	m: T.D	Pluggin	a Commenced:						
Depth to	o Top: Botto	m: T.D								
Depth to	o Top: Botto	m:T.D		9 - 1						
Show depth and thickness of a		ations.								
Oil, Gas or Water	r Records		Casing Record (Su	ırface, Conductor & Produ	uction)					
Formation	Content	Casing	Size	Setting Depth	Pulled Out					
cement or other plugs were us	. 00		•		ods used in introducing it into th	e noie. II				
Address 1:			Address 2: State:							
Address 1:			Address 2: State:							
Address 1:			Address 2: State:							
Address 1:	or Plugging Fees:		Address 2:State:							

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.

810 E 7TH PO Box 92 EUREKA, KS 67045 (620) 583-5561



Ticket No. 3435

Foreman Steve Med Camp Lunc Ke Ks

25.71	003 2332	X CEN		A 934	<u> </u>						T 0 1
Date	Cust. ID#	Lease	e & Well Number		Section	Towns	ship	Range	Cour	nty	State
7-17-1	7 /003	Marian C//			29 225		196			K S Driver	
ustomer				Safety Meeting	Unit #		Drive 1/an		Unit#		Diles
COTT Energy 2nc				- Wiceting	113		rick				
Aailing Address Po.Box 388 City State Zip Code											
PC	1.130x 32	S &	Zip Code	1							
		State	20			-				_	
		Ks	66749	L			-	, .			
ob Type _	PTA old	Well Hole Dep	th		Slurry Vol				bing		
asing Dep	oth 9 04	Hole Siz	e		Slurry Wt				rill Pipe		1
Casing Size & Wt. 278 Cement Left in Casing Water Gal/SK						ther					
isplaceme	ent	Displace	sup To ' I		Bump Plug to			1155	РМ		
			Than	K yo	u						
Code	Qty or Units	Description	of Product or Ser	vices					Price		Total
C105	1	Pump Charge					0.00		0.00		
CIOS	25	Mileage							3.95	9	8.75
								12.7		28	2.50
C203_	305ks		emix Cement				-	1	20		00.00
206	100 H	Gel 4%					<u> </u>	<u> </u>	<u> </u>		
C108A	1.29 rm	Jon Mile	age bulk I	ruck				M	, C	34	15.00
				20 Z	F6.197						
					27.16						
								Subi	rotal		6.25
-						8.0	30	Sa	les Tax		7.70
Authoria	zation Called	by Rex A:	shlack Tit	le Cن.	Rep.			-	Total	172	3.95