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

1362105

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

Spot Description: Spot	OPERATOR: License #:			AP	l No. 15					
State Zip Feet from North / South Line of Section Street Feet from Street Feet from Street Feet from Street Feet Feet Feet Feet Feet Feet Feet				I						
City:	Address 1:			_	Sec	c Twp S.	R East West			
Contact Person: Fhone (Address 2:			_	Fe	eet from North	/ South Line of Section			
Phone (City:				Feet from East / West Line of Section					
Type of Wellt; (Check one)	Contact Person:			Foo	otages Calculated fro	m Nearest Outside	Section Corner:			
Water Supply Well Other: Gas Storage Permit #: Lease Name: Well #: Lease Name: Well #: Lease Name: Well #: Date Well Completed: The plugging proposal was approved on: (Date) by: (MCC District Agent's Name) Producing Formation (s): List All (if needed attach another sheet) Depth to Top: Bottom: T.D. Depth to Top: Depth to Top: Depth to Top: Depth to Top: Bottom: T.D. Dep	Phone: ()				NE	NW SE	sw			
Water Supply Well Other:	Type of Well: (Check one)	Oil Well Gas Well	OG D&A Cathod	ic Co	untv. —					
ENIR Permit #:	Water Supply Well	Other:	SWD Permit #:		•					
As ACC-1 filed?	ENHR Permit #:	Gas Sto	orage Permit #:							
Depth to Top:	Is ACO-1 filed? Yes	No If not, is wel	I log attached? Yes		•					
Depth to Top:	Producing Formation(s): List /	All (If needed attach anothe	r sheet)	by:			_(KCC District Agent's Name)			
Depth to Top: Bottom: T.D. Plugging Completed: Depth to Top: Bottom: T.D. Plugging Completed: Depth to Top: Bottom: T.D. Plugging Completed: Show depth and thickness of all water, oil and gas formations. 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 hole. If zeroent 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: Zip: +	Depth to	o Top: Botto	om: T.D							
Show depth and thickness of all water, oil and gas formations. Oif, 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 sement 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: + Name: Name of Party Responsible for Plugging Fees: State of County, , ss.	Depth to	o Top: Botto	om: T.D							
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 zement 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,, ss.	Depth to	o Top: Botto	om:T.D		gging Completed.					
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 zement 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,, ss.										
Formation Content Casing Size Setting Depth Pulled Out	Show depth and thickness of	all water, oil and gas form	ations.							
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 zement or other plugs were used, state the character of same depth placed from (bottom), to (top) for each plug set. Plugging Contractor License #:	Oil, Gas or Wate	r Records		Casing Recor	d (Surface, Conductor	& Production)				
Plugging Contractor License #: Name:	Formation	Content	Casing	Size	Setting Dep	oth Pulled O	ut			
Plugging Contractor License #: Name:										
Plugging Contractor License #: Name:										
Plugging Contractor License #: Name:										
Plugging Contractor License #: Name:										
Plugging Contractor License #: Name:										
Plugging Contractor License #: Name:										
Address 1: Address 2:	cement or other plugs were u	sed, state the character of	same depth placed from (bot	trom), to (top) i	or each plug set.					
City:	33 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1									
Phone: ()	Address 1:			Address 2:						
Name of Party Responsible for Plugging Fees:	City:			Sta	te:	Zip:	+			
State of, ss.	Phone: ()									
	Name of Party Responsible for	or Plugging Fees:								
	State of	County, _		, ss	S.					
		•			_	. 🗆 -				

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.



TICKET NUMBER LOCATION E (derrate) FOREMAN STREWN

PO Box 884, Chanute, KS 66720

FIELD TICKET & TREATMENT REPORT

520-431-9210	or 800-467-8676			CEMEN	T			
DATE	CUSTOMER#	WELL	NAME & NÚM	BER	SECTION	TOWNSHIP	RANGE	COUNTY
7-31-17	85-17	PorTes	-1 19	3	1	26	04	Butler
CUSTOMER					TDUCK #	DRIVED.	TDUCK#	DRIVER
MAILING ADDRE	55 Orl			1	TRUCK#	DRIVER	TRUCK#	DRIVER
		1 0 2	ara.		866	Jeremy A.		-
<u> 1 700 z</u>	JAter from	STATE I	SOO ZIP.CODE	-	446.	Jeremi M		
	1		67206	54 1	775	Jude		
wichite			3/200	J NATE BERTH		L CASING SIZE & W	L /EICHT	
JOB TYPE_P)	HOLE SIZE		HOLE DEPTH		CASHING SIZE & FI	OTHER	=======================================
CASING DEPTH		DRILL PIPE		T	K	CEMENT LEFT in		
SLURRY WEIGH		SLURRY VUL DISPLACEMENT				RATE	CW2114@	
DISPLACEMENT					1 - 10 - 6			wo er w 1 - m
REMARKS: JA	fty meeti.	ne hooke	d up to	OC. II PH	De broke ("ireulation	Simpod	33 5125
On top a	# Hebuckle	Then pre	+ 4 661	of wate	then has	sted up me	a himbed	primed
for ymi	ns then pe	wed pipe	10 to	50' helou) Sentace	pipe then	preminen	35, 325
						o' Poon Su	three of C	A.T.C. W. M. T. C.
Connent 7	La Suface	then put	- 20 3129	, M KAT	hole			
	1							
		i i i i i i i i i i i i i i i i i i i						
ACCOUNT	4510 A N18997A	1801170	5°0 F°	ecolotion -6	SERVICES or PR	ODUCT	UNIT PRICE	TOTAL
CODE	QUANITY (DL DIMIL2		SCRIPTION OF	SEKAICES OF FR			
C.E0451	1		PUMP CHARG	E			1900,00	1900,00
C. E0002	4	Í	MILEAGE				9,15	NIC
CEOSII			Min	sulk del	ivery		660.00	660,00
CC58 29	110		60/0	10 4%			16.00	1760,00
· ·								
			0					
							affic	
					Subte	-fal	-	4320,00
					2411116)1 841		1220
					Disce	erest.		10,2,400
	8)				12368	(201)		,,,,,
							1	
)								
					Tota	2/	SALES TAX	
avin 3737	1	1/			1 [9] 0	11	ESTIMATED	237600
	p ft	P IA					TOTAL	11/10
AUTHORIZTION	124/Ch	jupst/	4 (A)	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.



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

LOCATION FOREMAN TO THE STATE OF THE STATE O

FIELD TICKET & TREATMENT REPORT CEMENT

DATE	CUSTOMER#	WELL NAME & NUMBER		SECTION	TOWNSHIP	RANGE	COUNTY	
7-31-17	3511	11 Parter D #93		1	26	041	Butler	
CUSTOMER								
	55 oil			TRUCK#	DRIVER	TRUCK#	DRIVER	
MAILING ADDRE	ESS			866	Jerry			
	unter From			01216	JEGGEN, M			
CITY		STATE ZIP CODE		775	Sude			
wiehite	9	145 67201	9					
JOB TYPE	luce	HOLE SIZE	_ HOLE DEPTH		CASING SIZE & W	EIGHT		
CASING DEPTH TUBIN				OTHER				
SLURRY WEIGHT SLURRY VOL WATE			WATER gal/s	skCEMENT LEFT in CASING				
DISPLACEMENT PSI MIX			MIX PSI		RATE			
REMARKS:	Ptu poreti	he booked up t	a ditt an	se Israkie ?	"couled on	unvoed	35 565	
on topa	f Arburkh	Phonont 4 bb	1 France	= + on her	sted up me	d Dringed	anniert.	
for a wise than miled not up to 80' I law sewface one then surrent 35 35								
of and 2 plumater displacement then suited piece to 600 from Surface of Corrulated								
Consent +	Sumiter	thru put 20 SW	& in 12nd	liele				

ACCOUNT	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CE0451	1	PUMP CHARGE	1900.00	1900.00
C F0002	4	MILEAGE	9,15	NIC
CE0711	1	was bulk delivery	16000	2000
CC5329	110	66/46 496	16.00	15600
		The make may all to be a		
			ALC: NO.	
		The state of the s		
				L L L
		Subtotal		4320,00
			la mindra mana	
		Discount		194400
				20100
				inevalue of
		Total	SALES TAX	
avin 3737	off N H		ESTIMATED TOTAL	237600

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