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

1362684

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 | I 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 Tv | vp S. R. | East We | | |
| Contact Person: Fhone (| Address 2: | | | _ | | Feet from | North / | South Line of Section | | |
| Phone (| City: | State: | Zip: + | _ | | | | | | |
| Type of Wellt; (Check one) | Contact Person: | | | Foo | | | | | | |
| 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. Depth to Top: | Phone: () | | | | | NE NW | SE SV | V | | |
| Water Supply Well Other: | Type of Well: (Check one) | Oil Well Gas Well | OG D&A Cathod | ic Co | ııntv. | | | | | |
| 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: | | | (K(| CC District Agent's Nam | | |
| 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 Ct | ompieted | | | | |
| 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 (Surfac | ce, Conductor & Produc | ction) | | | |
| Plugging Contractor License #: Name: | Formation | Content | Casing | Size | | Setting Depth | Pulled Out | | | |
| 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 eacn | plug set. | | | | |
| City: | 33 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | e: | | | | | | | |
| 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, _ | | , s | 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.

(Print Name)



Liberal Yard #1717 - Phone 620-624-2277 - 1700 S. Country Estates Road, Liberal KS 67901

| | 1 | Cii Deceleration | | Minimization with the | | | | | | | | |
|--------------------|---------------------------------------|---|---|--|--|----------------|--|--|-------------------|---|--|--|
| Customer: | | Oil Producers | ***** | | Cement Pump No | | 9919 4HRS | Operator TRK No.: | 789 | 39 | | |
| Address: | 1710 Waterfront PKWY | | | | Ticket: | 1718 | -14370 L | <u> </u> | 30463-37547 | | | |
| City, State, Zip: | Wichita Ks | Wichita Ks 67206 | | | | 22 | Z41 - Cei | ment Plug to Al | bandon | | | |
| Service District: | | | | | Well Type: | | | OIL | | | | |
| Well Name and No.: | vValker#2 | | | | Well Location | 1: | County | Seward | State: | K | | |
| Туре с | of Cmt | Sacks | | | Additives | | | Truck Loa | ded On | | | |
| Н | | | | 7 | NEAT | ···· | 30463 | -37547 | Front | Back | | |
| | · a | | | | | | 50 E | | 1 10112 | Dack | | |
| | | | | | | | | | Front | Back | | |
| | | | | | | | | | Front | Back | | |
| Lead/ | | Weight #1 Gal. | Cu/ | Ft/sk | Water Re | quirements | CU. FT. | Man I | lours / Personnel | | | |
| Lea | | 15.6 | 1. | 18 | 5.22 | | 1.18 | Man Hours: | 22 | | | |
| Та | | | | | | | | # of Men on Job: | 3 | | | |
| Time | | Volume | Pumps | | Pressure(PSI) | | D | Description of Operation and Materials | | | | |
| (am/pm) | (BPM) | (BBLS) | Т | Ċ | Tubing | Casing | | | | - Marie | | |
| 8:00 | ·/··· | | | | - | | O | N LOC, SAFTE | | | | |
| 9:03 | 2 | 24 | | | | ***VVC | | ESTABLIS | | | | |
| 9:15 AM | 2 | 1 1 | | | | 50 | MIX 2 SX @2575' | | | | | |
| 9:19 AM | 2 | 9.5 | | | | | DISPLACE | | | | | |
| 9:48 AM | 2 | 3.5 | | aparia. | ************************************** | | ESTABLISH CIRC | | | | | |
| 9:50 9:56 | 2 | 6.3 | | ACCESSED. | | 30 | MIX 30 SX @ 1667' | | | | | |
| 10:28 AM | 2 2 | 4.5 | | | ······································ | ļ | DISPLACE | | | | | |
| 10:30 | 2 | 2.5 | ******* | | | | LOAD HOLE | | | | | |
| 11:15 | | 0.5 | | strel ofean | | | MIX 70 SX @450 | | | | | |
| 11:18 | | 0.25 | | - | | 1000 | DUMD | | | · | | |
| | | 0.20 | | | | 1000 | PUMP .25 DOWN SURFACE, SHUT I WASHUP P & L | | | I IN | | |
| WAY STATES | | | | | | | | JOB COMPLETE | | | | |
| Throughous | | | | | | | THANK YOU FOR YOUR BUSINESS!!! | | | | | |
| | · · · · · · · · · · · · · · · · · · · | | | - | | | 11,7114 | (TOOTON TO | JOIN DOOMINE | 30::: | | |
| | | | | - Control of the Cont | | | | · · · · · · · · · · · · · · · · · · · | | | | |
| | | | | - Constitution of the Cons | | | | | | W | | |
| | | | | | | | | | | | | |
| | | | | | | | | | Ч. Н | | | |
| | | | 1 | | | | | | | | | |
| | | | | West | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| Size Hole | | Depth | | <u>-</u> - | | | TYPE | ····· | | *************************************** | | |
| Size & Wt. Csg. | | Depth | ····· | | New / Used | | Packer | | Depth | | | |
| tbg. Top Plugs | | Depth | | atris bonz | | | Retainer | | Depth | | | |
| iob i inga | | Туре | *************************************** | 1 | | | Perfs | | CIBP | | | |
| Customer Sign | ature: | | | | | Basic Represe | | AL | CHAD HINZ | | | |
| Justomer Orgin | alus v. | *************************************** | | W. V. W. V. | ···· | Basic Signatur | TOTAL CONTRACTOR AND ADDRESS OF THE PARTY OF | | | | | |
| | | | | /P2410600000000000000000000000000000000000 | Date of Servic | e: | 6/30/2017 | | | | | |