

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

1363225

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	5					
Name:				Spot Desc	cription:					
Address 1:					Sec	Twp S. R	EastWest			
Address 2:					Feet from	North / Sc	outh Line of Section			
City:	State:	Zip:+			Feet from	East / W	est Line of Section			
Contact Person:				Footages	Calculated from Nea	rest Outside Section (Corner:			
Phone: ()					NE NW	SE SW				
Type of Well: (Check one)			dic	County: _						
Water Supply Well	Other:	SWD Permit #:		Lease Name: Well #:						
ENHR Permit #:	Gas Sto	rage Permit #:		Date Well	Completed:					
Is ACO-1 filed? Yes	No If not, is well	l log attached? Yes	No	1		proved on:				
Producing Formation(s): List A		sheet)		by:		(KCC D	istrict Agent's Name)			
Depth to	•	m: T.D		Plugging (Commenced:					
Depth to		m: T.D		Plugging Completed:						
Depth to	Top: Botto	m: T.D								
0 1 1 1 1 1 1 1										
Show depth and thickness of a		ations.		5 //2 /						
Oil, Gas or Water	1			Record (Surfa	ace, Conductor & Prod	, ,				
Formation	Content	Casing	Size		Setting Depth	Pulled Out				
Describe in detail the manner cement or other plugs were us	. 00			•		ods used in introducir	ig it into the hole. If			
Plugging Contractor License #: Name										
Address 1:			_ Addres	s 2:						
City:				_ State:		Zip:	+			
Phone: ()				_						
Name of Party Responsible fo	r Plugging Fees:									
State of	County, _			, ss.						
				Fm	plovee of Operator of	r Operator on ab	ove-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.

(Print Name)

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



Kecented 15 Hougust 2011							
Cement or Acid Field Report							
Ticket No							
Foreman STeve Mend							
Camp Eureka							

Date	Cust. ID#	Lea	ase & Well Number		Section	Tov	wnship	Range	County	State
8-14-17		Craw	36		3	2	26S	8E	Greenwood	Ks
Customer	1,000	Ci ew	J	Safety	Unit #		Driv	ver	Unit #	Driver
			Meeting	102 Rick 112 Joseph 144 Kevin		Rick				
Jackson Bros. LLC			-							
Mailing Address										
	E 3Rd			4				-		
City		State	Zip Code							
Eurck	r.	Ks	67045						£	
Job Type 17A Hole Depth Slurry Vol. Tubing 23/1250' Casing Depth Hole Size Slurry Wt. Drill Pipe Casing Size & Wt. 4'2 Cement Left in Casing Water Gal/SK Other Displacement Displacement PSI Bump Plug to BPM Remarks: Safty Meeting: Rig up to 27/2 Tubing. Pump bbbls Fresh water ahead. 5207 30 5ks Cement At 1250' Wait on Rig to pull out Tubing. Rig up to 4'2 Casing. Break Circulation w/ Fresh water. Mix bosks Cement. 250' to Surface inside tout of 4/2 Casing. Well Stox Full.										
			Job Com	plere						
			Thank	you						

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C/05	1	Pump Charge	750.00	750.00
C107	15	Mileage	3.96	59.25
C 203	905155	60/40 Pozmix Cement	12.75	1147.50
C206	300+	Gel 4%	.20	60.00
C/08A	3.89 Jun	Jon mileage Bulktruck	MC	345.00
C1/3	4/hrs	80bbl vac Truck	85.00	340.00
	,	/		
		(5% 2 145 82)		
	·	\$2159.16 or		
		750%	Subject to Sales Tax	2701.75
Authori	zation Roses	9 / 11 11	Total	2904.380

I agree to the payment terms and conditions of services provided on the back of this job ticket. Any amendments to payment terms must be in writing on the front of this job ticket or in the Customer's records at ELITE's office.