KOLAR Document ID: 1371327

**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

## 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 #:			API	No. 15					
Address 1:				Sec	Twp S. R East West				
Address 2:				Feet from	North / South Line of Section				
City:	State:	Zip:+		Feet from	East / West Line of Section				
Contact Person:			Foo	Footages Calculated from Nearest Outside Section Corner:					
Phone: ( )				NE NW	SE SW				
ENHR Permit #:	Other: Gas S	SWD Permit #:torage Permit #:	Cou	County: Well #:  Date Well Completed:					
		ell log attached? Yes	No The	plugging proposal was app	proved on: (Date)				
Producing Formation(s): List	,	*			(KCC <b>District</b> Agent's Name)				
		tom: T.D	I Pluc	gging Commenced:					
Depth		tom: T.D	Plug	gging Completed:					
Depth	to Top: Bot	tom:T.D							
Show depth and thickness of	f all water, oil and gas forr	nations.	I						
Oil, Gas or Water Records			Casing Record	ing Record (Surface, Conductor & Production)					
Formation	Content	Casing	Size	Setting Depth	Pulled Out				
		ged, indicating where the mu of same depth placed from (bo			ods used in introducing it into the hole. If				
Plugging Contractor License	#:		_ Name:						
Address 1:			_ Address 2:						
City:			State	e:					
Phone: ( )									
Name of Party Responsible f	or Plugging Fees:								
State of	County,		, ss						
	(Print Name)			Employee of Operator or	r Operator on above-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.



## **HURRICANE SERVICES INC**

Customer:	Domestic En	ergy			Date:	3.8.18		Ticket No.:	ICT:	1008
Field Rep:	Jeff Morris				]					
Address:										
City, State:					1					
County, Zip:										
!	Field Order No.:				Open Hole:			Perf De	pths (ft)	Perfs
	Well Name:	Lett			Casing Depth:	1388'				
	Location:	Fredor	nia, KS		Casing Size: Tubing Depth:	4 1/2				
_	Formation:				Tubing Size:	1373 033 233				
,	Type of Service:		ΓA		Liner Depth:	2.375"				
	Well Type:	0	as la		Liner Size:				<del> </del>	
	Age of Well: Packer Type:		iu .		Liner Top:				<del> </del>	
	Packer Depth:				Liner Bottom:					
	Treatment Via:	Tub	ina		Total Depth:					
	iredutient via.	100					ļ l		Total Perfs	0
-									1000110113	
1 1/2 1/2	. INJECTIO	ON RATE	PRESS	SURE		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		A. PROP	HCL .	FLUID
TIME	FLUID	N2/CO2	STP	ANNULUS	Toughts.	REMARKS		(lbs)	(gls)	(bbls)
					On loaction safe	ty meeting. Spot in and rig up				
					Hook up to tubir	ng. Tubing at 1375'				
	3.0		300.0		Break circulation					2.00
	3.0		300.0		Mix and pump g					18.00
	3.0		300.0		Mix and pump c	ement 5 sacks	-			1.26
	3.0		300.0	· · · · · · · · · · · · · · · · · · ·	Displace				<del> </del>	5.16
	3.0		250.0			ng. Tubing at 700'			<del> </del>	
	3.0		250.0		Break circulation	п				3.00
	3.0		250.0		Mix and pump c	ement 5 sacks				1.26
	3.0		250.0		Displace					2.45
				·	Hook up to tubi	ng. Tubing at 260' Break circula	tion			3.00
	3.0		150.0		Mix and pump c	ement to surface 35 sacks				8.85
	0.5		50.0		Top off well 5 sa	cks				1.26
					Wash up pump					
	<u> </u>				ThanksJake, I	Kevin, and Chad			ļ	
l							TOTAL:			46.24
		SUM	MARY			PRODUCTS USED				
	Max Fl. Rate	Avg Fl. Rate	Max PSI	Avg PSI	_					]
	3.0	2.7	300.0	238.9	_					
						50 sacks 60:40:4% Gel 6	00 LBS GEL			

Treater: Jake Heard

Customer:	Jeff	Morris	