**Notice:** Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

Name of Party Responsible for Plugging Fees: \_\_\_\_

## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1371903

Employee of Operator or Operator on above-described well,

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

		N.A.N. 02	-5-117					
OPERATOR: License #:								
Name:			Spot Desc	cription:				
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:			Footages	Calculated from Near	rest Outside Section Corner:			
Phone: ( )				NE NW	SE SW			
Type of Well: (Check one)	Oil Well Gas Well	OG D&A Cathodic	; County:					
Water Supply Well C	Other:	SWD Permit #:	1 '	County: Well #:				
ENHR Permit #:	Gas Stor	rage Permit #:			vveii #			
Is ACO-1 filed? Yes	No If not, is well	log attached? Yes			proved on: (Date)			
Producing Formation(s): List A	∟ II (If needed attach another	sheet)			(KCC <b>District</b> Agent's Name)			
		m: T.D			,			
Depth to		m: T.D	"					
Depth to	Top: Bottor	m: T.D	Plugging (	Completed:				
Show depth and thickness of a	all water, oil and gas forma	tions.						
Oil, Gas or Water	Records		Casing Record (Surf	ace, Conductor & Prod	uction)			
Formation	Content	Casing	Size	Setting Depth	Pulled Out			
		ŭ		0 1				
Describe in detail the manner cement or other plugs were us					ods used in introducing it into the hole. If			
Plugging Contractor License #	÷		Name:					

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.

\_\_\_\_\_ Address 2: \_\_\_\_\_

\_\_\_\_ County, \_\_\_\_\_\_\_, , ss.

(Print Name)



PO Box 884, Chanute, KS 66720 620-431-9210 or 800-467-8676 TICKET NUMBER 54820

LOCATION FIDORAdo

FOREMAN Brad Butto

## FIELD TICKET & TREATMENT REPORT CEMENT

620-431-92	10 or 800-467-867	3		CEMEN	T			
DATE	CUSTOMER#	WELI	NAME & NUM	IBER	SECTION	TOWNSHIP	RANGE	COUNTY
10-23-17	8511	Wilson	VA #	279	9	25	5	Butler
CUSTOMER					THE RESERVE			
	Vess Oil				TRUCK #	DRIVER	TRUCK#	DRIVER
MAILING ADDR	ESS				603	Tracy		
1700 W	TO STONT PAT	KWAY Bld	500		611	Jud		
CITY	0	STATE	ZIP CODE		692	MARK		
Wichit	A	Ks	67206		702	Brad		
JOB TYPE	PTA	HOLE SIZE		HOLE DEPTH	1	CASING SIZE & V	VEIGHT 41/2"	
CASING DEPTH		DRILL PIPE		_TUBING			OTHER	
SLURRY WEIGH	SLURRY WEIGHT SLURRY VOL WATER gal/sk CEMENT LEFT in CASING							
DISPLACEMEN	T	DISPLACEMENT	T PSI	MIX PSI		RATE		
REMARKS: R	gupTo Tubing	Set 0 938	breakcise	culation with	- Steshwater	mixed come	TAMA LOTE	the Ile
Till we got	good CEMENT	retwis / m.	xed with/	4.5 Bbb WA	For = 88 sk	5 60/40 Pozmo	wy & Gela	40 165 Hulls
Pull Tubing	out of well, S	illed CASMS	BACK 40 W	ith cement.	rig LaTo CA	ides - Squeeza	1 Cement in	To well
Shut down	1 with 3500	si. Well Ho	dins 3000	ii - clasco	1 CASMIN WI	th 3000s; > mi	Erd w/ 2/2 BH	5 = 155KS. CEM-
Plug Soli	Sion 938	To SW CACE	with 103	SACKS 60/	40 Pozmil ceme	NT W 42 GeL.	+ 2% CACIZ	
	0	,				,		
				Job con	notete - Tear	down		
					T			
				, "71	IANK YOU"			
					-			
ACCOUNT CODE	QUANITY	or UNITS	DE	SCRIPTION of	SERVICES or PRO	DDUCT	UNIT PRICE	TOTAL
CE0450	N	1	PUMP CHARG	iΕ			1500.00	1500.00

ACCOUNT	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CE 0450	1	PUMP CHARGE	1500.00	1500.00
CE 0002	Ð	MILEAGE	7.15	NIC
CE 0711	ML	BulkTruckcharge	660.00	660,00
WE0852	2 His.	WATER Truck	100.00	200,00
C5829	/03 SACKS	60/40 Pozmix cement uf 47 GeL	16.00	1648.00
C 5325	177 lbs.	CAlcium Chloride	1.25	221,25
CC 6080	40 lbs.	Hulls	1.00	40.00
				4269.25
				***************************************
		Discourt	55%	-2348,08
	*			
		Sub 7	TAI	1921.17
i- 0707			SALES TAX	
vin 3737	CO C	And the second s	ESTIMATED TOTAL	

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.