## KOLAR Document ID: 1375016

**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
Name:	Spot Description:
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 Nearest Outside Section Corner:
Phone: ( )	NE NW SE SW
Type of Well: (Check one)   Oil Well   Gas Well   OG   D&A   Cathodic     Water Supply Well   Other:   SWD Permit #:   SWD Permit #:	County: Well #: Lease Name: Well #: Date Well Completed:
Is ACO-1 filed? Yes No If not, is well log attached? Yes No	The plugging proposal was approved on: (Date)
Producing Formation(s): List All (If needed attach another sheet)	by: (KCC <b>District</b> Agent's Name)
Depth to Top: Bottom: T.D	Plugging Commenced:
Depth to Top: Bottom: T.D	Plugging Completed:
Depth to Top: Bottom: T.D	

Show depth and thickness of all water, oil and gas formations.

Oil, Gas or Water	Records	Casing Record (Surface, Conductor & Production)			tion)
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 cement 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:
City:	State: Zip: +
Phone: ( )	
Name of Party Responsible for Plugging Fees:	
State of County,	, SS.
(Print Name)	Employee of Operator or 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.

## Submitted Electronically

		RE	MIT TO				MAIN OFFIC
		P.O.	ure Pumpin ept:970 Box 4346 TX 77210-4			620/431-921	P.O.Box88 Chanute,KS 6672 10,1-800/467-86 Fax 620/431-00
Invoice					Invoice#	811	971
Invoice Date:	12/06/17		Terms:	Net 30		Page	
HARTMAN OIL	CO, INC						
10500 E. Berkl Wichita KS 672 USA	ley Square Parkway, Ste 206	100		GOB	LEMAN A-2		
316-636-2090							
======================================	Description		 Q	uantity	Unit Price	======== Discount(%)	Tot
CE0470	Cement Pump Cha (Coalbed/Methane	-		1.000	950.0000	30.000	665.
CE0002	Equipment Mileage Equipment	Charge - Heavy		65.000	7.1500	30.000	325.
CE0710	Cement Delivery C	harge		504.400	1,7500	30.000	617.3
CC5800A	Class A Cement - S	Sack		165.000	20.0000	30.000	2,310.
							5,597.
						Subtotal	0,007.
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Sulfah/ 559 /ess 308d/iscount 1622 Subhtil 3908 Subhtil 3908	соде СЕ <u>0470</u> -	QUANITY	5	PUMP CHARG	E			UNIT PRICE 950, <sup>(2)</sup> 7115	TOTAL <i>95</i> 3, 4
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I are celived the form or in the customer's account recurs, at our online, and contained in the back of this form are in effect for services identified on this form