

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 #: _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic

Water Supply Well Other: _____ SWD Permit #: _____

ENHR Permit #: _____ Gas Storage Permit #: _____

Is ACO-1 filed? Yes No If not, is well log attached? Yes No

Producing Formation(s): List All (If needed attach another sheet)

_____ Depth to Top: _____ Bottom: _____ T.D. _____

_____ Depth to Top: _____ Bottom: _____ T.D. _____

_____ Depth to Top: _____ Bottom: _____ T.D. _____

API No. 15 - _____

Spot Description: _____

____ - ____ - ____ Sec. ____ Twp. ____ S. R. ____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: _____

Lease Name: _____ Well #: _____

Date Well Completed: _____

The plugging proposal was approved on: _____ (Date)

by: _____ (KCC District Agent's Name)

Plugging Commenced: _____

Plugging Completed: _____

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

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 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

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



Cement or Acid Field Report
 Ticket No. **3675**
 Foreman Kevin McCoy
 Camp EUREKA

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State	
12-14-17	1021	Maimie Berry #3				Gw	Ks	
Customer C3 OIL			Safety Meeting KM RL AB		Unit #	Driver	Unit #	Driver
Mailing Address 600 Arrowhead Dr.					102	Rick L.		
City New Strawn			State Ks		114	Allen B.		
Zip Code 66839								

Job Type P.T.A. 2nd WELL Hole Depth _____ Slurry Vol. _____ Tubing 2 3/8
 Casing Depth _____ Hole Size _____ Slurry Wt. _____ Drill Pipe _____
 Casing Size & Wt. 4 1/2 Cement Left in Casing _____ Water Gal/SK _____ Other _____
 Displacement _____ Displacement PSI _____ Bump Plug to _____ BPM _____

Remarks: Safety Meeting: Rig up to 2 3/8 Tubing. Spot Cement Plugs inside 4 1/2 AS following
15 SKS @ 1658'
Gel Spacer w/ Hulls
15 SKS @ 623'
Gel Spacer w/ Hulls
20 SKS From 250' to SURFACE

Note: Tried to wash 1' down Annulus of 4 1/2. Hit Cement @ 5' below G.L.

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C 105.2	1	Pump Charge	500.00	500.00
C 107	⊖	Mileage 2 nd WELL OF 2	⊖	N/C
C 203	50 SKS	60/40 Pozmix Cement	12.75	637.50
C 206	175 *	Gel 4%	.20 *	35.00
C 206	300 *	Gel Spacer	.20 *	60.00
C 214	40 *	Hulls	.45 *	18.00
C108 A	2.15 TONS	Ton Mileage	M/C	345.00
<u>THANK You</u> <u>-M-</u>			Sub Total	1595.50
			Less 5%	85.76
			7.5% Sales Tax	119.66
			Total	1629.40

Authorization witnessed By Chris Haas Title _____ Total 1629.40
Kcc Agent Mike Heffern

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.