KOLAR Document ID: 1407885

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 Feet from East / West Line of Section			
City:							
Contact Person:				Footages Calculated from Nearest Outside Section Corner:			
Phone: ()				NE NW SE SW County: Well #:			
Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic Water Supply Well Other: SWD Permit #:							
ENHR Permit #:				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 District Agent's Name) Plugging Commenced:			
Depth to Top: Bottom: T.D							
Depth to Top: Bottom: T.D				Plugging Completed:			
Depth to Top: Bottom: T.D					g completed.		
Show depth and thickness of a	all water, oil and gas forma	ations.					
Oil, Gas or Water Records			Casing Re	Casing Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size		Setting Depth	Pulled Out	
Describe in detail the manner cement or other plugs were us		_				Is used in introducing it into the hole. If	
Plugging Contractor License #: N				×			
Address 1: Addre				s 2:			
City:			;	State:		Zip:+	
Phone: ()							
Name of Party Responsible fo	r Plugging Fees:						
State of	County, _			, SS.			
	•				Employee of Operator or	Operator on above described	
(Print Name)				⊑	imployee 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.

STATEMENT

City

13378

ELMORE'S INC.

Box 87 - 776 HWY 99 Sedan, KS 67361 Cell: (620) 249-2519

Date 3 - 15 - 18

Zip

Customer Calvin Carter
Address

State

 Qty.
 Description
 Price
 Amount

 2 Lr Pulling Unit
 120,00
 240,00

 2 Lr Cement Pums
 120,00
 240,00

34 SKS Coment 12,50 425,00

1/2 SK Gel 16,00 8,00

1 he Bockhoo 85,00

1 Die Hat Cut off Course 100,00

Plug Job Carter B-7 Tax 113,14 B. 1" To 130' Cal

Hole Spotted 5 SKS Cement:
Pulled Unto 275 Cemented
To Surface With 29 SKS Coment

To Surface With 29 SKS Coment Sucked Out + Closed Pit Cut Of

Thank You - We appreciate your business!

Rec'd. by

TERMS: Account due upon receipt of services. A 11/2% Service Charge, which is an annual percentage rate of 18% will be charged to accounts after 30 days.

_STAPLES STORE #0501 (918) 335-9135

Ref. No: G 235805373

00

00