

**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.  
 \_\_\_\_\_  Employee of Operator or  Operator on above-described well,  
 (Print 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.

**Submitted Electronically**



PRESSURE PUMPING LLC  
 PO Box 884, Chanute, KS 66720  
 620-431-9210 or 800-467-8676

API# 15.035.20778.00.00

TICKET NUMBER 54498  
 LOCATION Elwando, KS  
 FOREMAN Fuzz

**FIELD TICKET & TREATMENT REPORT  
 CEMENT**

KS

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
5-30-18		Fellow #3	9	33	6	Cowley
CUSTOMER Aniline + Mosgrove Inc			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS P.O. Box 391			760	CHRIS		
CITY STATE ZIP CODE Powder Mill OK 74602			713	Jacob		
			725	Fuzz		

JOB TYPE AWP HOLE SIZE 7 7/8 HOLE DEPTH 3165' CASING SIZE & WEIGHT 4 1/2 - 600'  
 CASING DEPTH \_\_\_\_\_ DRILL PIPE \_\_\_\_\_ TUBING 2 7/8 OTHER 8 5/8 - 204'  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 4 1/2 - 3165'  
 DISPLACEMENT \_\_\_\_\_ DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE Per foot @ 350'

REMARKS: Safety meeting on same well service. Rig up and establish circulation. Mix 240 sks Class A 390cc and circulate 4 1/2 x 4 1/2 @ 2 7/8 to surface. Pull tags and top off 4 1/2 casing with 20 sks class A 390cc.

Thanks Fuzz  
 CFW

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CE0450	1	PUMP CHARGE	1500 <sup>00</sup>	1500 <sup>00</sup>
CE0002	60 miles	MILEAGE	7 <sup>12</sup>	429 <sup>00</sup>
CE0710	12.5 ton	Ton mileage Delivery	1 <sup>25</sup>	1312 <sup>50</sup>
CC5800A	265 sks	CLASS 'A'	20 <sup>00</sup>	5300 <sup>00</sup>
CC5325	750 #	Calcium chloride	1 <sup>25</sup>	937 <sup>50</sup>
		subtotal		9480 <sup>25</sup>
		discount		3792 <sup>10</sup>
		subtotal		5688 <sup>15</sup>
		SALES TAX		
		ESTIMATED TOTAL		

Ravin 3737  
 AUTHORIZATION [Signature] TITLE Prod. Supt DATE 5-30-18

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.