KOLAR Document ID: 1410609

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:																	
									Contact Person:			Footage	Footages Calculated from Nearest Outside Section Corner:				
									Phone: ()				NE NW SE SW				
Water Supply Well ENHR Permit #: Is ACO-1 filed? Yes Producing Formation(s):	Other: Ga No If not, i List All (If needed attach a	SWD Permit #: as Storage Permit #: swell log attached? Yes [nother sheet) Bottom: T.D.	Lease N Date We The plug	County: Well #: Date Well Completed: (Date) by: (KCC District Agent's Name)													
De	pth to Top:	Bottom: T.D	""	Plugging Commenced: Plugging Completed:													
De	pth to Top:	Bottom:T.D	——— Plugging	Plugging Completed:													
Show depth and thickness	ss of all water, oil and gas	formations.															
Oil, Gas or Water Records			Casing Record (Su	Casing Record (Surface, Conductor & Production)													
Formation	Content	Casing	Size	Setting Depth	Pulled Out												
		plugged, indicating where the muter of same depth placed from (but it is a first from the muter of same depth placed from (but it is a first from the muter of same depth placed from the same depth placed from the muter of same depth placed from the same depth placed from t	·		ods used in introducing it into the hole. If												
Plugging Contractor Lice		_ Name:):														
Address 1: Address				\$ 2:													
City:			State:														
Phone: ()																	
Name of Party Responsi	ble for Plugging Fees:																
State of	Cou	unty,	, SS.														
	(Print Na	ma)	E	mployee 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

11687 18

13473

ELMORE'S INC.

Box 87 - 776 HWY 99 Sedan, KS 67361 Date 5-4-18

Cell: (620) 249-2519

Eve: (620) 725-5538

		-01				
Custon	ner_ <i>C</i> ⊁	E Cil				
Address		i	W 98	1		
City		3-2-1	State_	Zip	s	
	e 2					
Qty.		Description		Price	Amou	nt
5	La Pall	ling Unit		120,00	400,	00
3	hr Cen	ent Pump		120,00	360,	00
	J	3				9 11 1
2145	1/11/11	him		.10	214.	50
1	Brulk	Tank		85,00	85.	00
20	SKS C	ement	100 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1	12,50	875.	00
1	Sk Ge	1		16,00	16,	00
			•		2150,	50
	Plug Ja	6 Wilson	3-A	Tax7.5	16/	29
	Ran 1"	To 2145	Gel Hole	B	2311.	79
	Spotted	1		* 2 H 1		- 16- - 3-15
	Tulled 4	pto 1280	Spotted 3	SKS		
(Cement	Palled Up	40 550	Cemen	teel	
*	To Sur	Paue With	555KS	Cemen	of a	-
					2 (T)	
						54
				16		
		Thank You – We app	reciate your bus	iness!		
	Bec'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