KOLAR Document ID: 1419919

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 #:
Is ACO-1 filed?	The plugging proposal was approved on: (Date)
Producing Formation(s): List All (If needed attach another sheet)	by: (KCC District 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)				
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

PO B EUREKA,	83-5561	CEN	MENTING & ACID	SERVICE,			Ticket N Forema	t or Acid Fiel No. 406 In <u>Ríck Lea</u> Eureka Ks	9
Date	Cust. ID #		e & Well Number		Section	Township	Range	County	State
8-15-18	1003	Matin	1-7		29	225	196	Anderson	Ks
Customer				Safety	Unit #		river	Unit #	Driver
Col	Catt Energy Inc.		Meeting	104		m.			
Mailing Address P.O. Box 388		An	1/2	Jas	<i>a</i> , <i>¥</i> .				
City Iola		State Ks	Zip Code						
Job Type	A dd well	Hole Dea	oth 917'		Slurry Voi.		т	ubing274"	
					Slurry Wt.	143	·	rill Pipe	
Casing Depth Hole Size Slurry Wt Drill Pipe Casing Size & Wt Cement Left in Casing Water Gal/SK Other									
Displacement Displacement PSI Bump Plug to BPM									
Remarks:	afety m	enting - Rig emat C	1/ 1/ pal. Pu	t@ 91	5. Pump	ed 5 Be d well o) wate	ahard. C	lixed t
		<u>199 (94:</u>	losed well		serpli	<i>w. k</i> y			

" THANK You"

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C105	1	Pump Charge	785.00	785.00
CION	45	Mileage	4.20	189.00
(200	35 545	class A compt	15.75	551.25
CINRAT	1.6	tor mileage but tok	m/c	345.00
			-	
				1921 011
			Subtota)	1890.25
_	N	A11.	Sales Tax	く 102.01> 151.22
3 2 3	zation	R. Heller Title Inspecter	Total	1939.40

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.