KOLAR Document ID: 1419966

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 Feet from North / South Line of Section Feet from East / West Line of Section						
Address 2:										
City:	State:	Zip:+								
Contact Person:			Foo	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)						
Phone: ()										
ENHR Permit #:	Other: Gas S	SWD Permit #:torage Permit #:	Cou							
		ell log attached? Yes	No The							
Producing Formation(s): List	,	*			(KCC District Agent's Name)					
		tom: T.D	I Pluc	Plugging Commenced:						
Depth		tom: T.D	Plug	Plugging Completed:						
Depth	to Top: Bot	tom:T.D								
Show depth and thickness of	f all water, oil and gas forr	nations.	I							
Oil, Gas or Water Records			Casing Record	Casing Record (Surface, Conductor & Production)						
Formation	Content	Casing	Size	Setting Depth	Pulled Out					
		ged, indicating where the mu of same depth placed from (bo			ods used in introducing it into the hole. If					
Plugging Contractor License #: Na				ə:						
Address 1:			_ Address 2:							
City:			State	e:						
Phone: ()										
Name of Party Responsible f	or Plugging Fees:									
State of	County,		, ss							
	(Print Name)			Employee of Operator or	r 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.

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

Authorization



Ticket No. 4070

Foreman Rick Leaford

Camp Funce 125

590 Disc Sales Tax

Total

API 15	-003- 229	59					<u> </u>				
Date Cust. ID# Lease & Well Number			Section		Township	Range	Cou	County			
8-21-	18 1003	JCB Unit	Safety	29	225	198	Anderse Unit #	h	25		
Customer	8-21-18 1003 JCB Unit +11				Unit#		river	Unit #		Driver	
Customer Call Energy Inc. Mailing Address				Meeting	104	Ale	nm.	m,			
Maining / National				Po	114 Calebo		C.) Jason H.		+		
ity State Zip Code				33							
City	T 1.	17050							-		
	INA	Rs	46749	Ь				A -			
Job Type _	PTA de mell	Hole Dep	oth		Slurry Vol			Tubing	8"		
Casing Depth Hole Size					Slumy Wt Drill Pipe						
Casing Size	e & Wt	Cernent L	eft in Casing								
Displaceme	ent	Displace	ement PSI		Bump Plug to			врм <i>ра-Г.</i>	3 6 8	82-891	
- K13	p to 2	78" tubing. Rig down	Squeezed o			P3I. C	losed w	e) in G	25	o PsI.	
Code	Qty or Units	Description of Product or Services			***************************************		Un	Unit Price		Total	
C105	1	Pump Charge						785.00	78	35.00	
6107-7	45	Mileage				4.20	15	39.00			
C106-7	2 hrs	Mist. prop on 8-15-18						210.00	42	20.00	
C200	45 ses	s class A comet					1	5.25	70	18.75	
CIOSA-T	2.12	ton mileage	n mileage bulk trik					n/c	34	05.00	