KOLAR Document ID: 1423248

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 #:			ı	API No.	. 15 -			
OPERATOR: License #: Name:				Spot Description:				
Address 1:								
Address 2:					Feet from			
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 #: ENHR Permit #: Gas Storage Permit #:				County: Well #:				
Is ACO-1 filed? Yes		log attached? Yes	_ I	Date Well Completed:				
Producing Formation(s): List A						(KCC District Agent's Name)		
Depth to		m: T.D						
Depth to	•	m: T.D		Plugging Commenced:				
Depth to		m:T.D		Pluggin	g Completed:			
Show depth and thickness of a	all water, oil and gas forma	ations.						
Oil, Gas or Water	Records		Casing Re	asing 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 #:				ne:				
Address 1:			Address 2	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 well,		
	(Print Name)				p.o, oo opoidioi oi	Specials. Sit above accombod 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.



11718

TICKET NUMBER 55861

LOCATION OK Key Kr

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

FIELD TICKET & TREATMENT REPORT

MVONU# 8 14067

620-431-9210 or 800-467-8676		CEME	CEMENT			MNONC#18 1406 1 KS			
DATE	CUSTOMER#	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY			
9-818	36/3	Hadley #1 twin	3	115	2/6	Trano			
USTOMER	Hant Ince	(): 1 Roga 1	TRUCK#	DRIVER	TRUCK#	DRIVER			
AILING ADDRE	SS	to B	7311	Cory D	TROOK #	DINIVER			
0500E.	pertion sal	WERE PROPERTY STO. 100 i E	5661	Walt 1					
Wichita		ATE ZP CODE NINE	5351	clerry					
OB TYPE	lua Ho	DLE SIZE 778 HOLE DEF	тн_9960	CASING SIZE & W	/EIGHT				
ASING DEPTH		RILL PIPE 4/2 TUBING_			OTHER				
LURRY WEIGH	T_13.8 SL	URRY VOL 1.42 WATER ga	al/sk	CEMENT LEFT In	CASING				
SPLACEMENT		DISPLACEMENT PSI MIX PSI			RATE				
	18 mechi	To seed upon H2 R	ig 4 plug o	as ordred	buish 3	505 skr			
57	0.5/kg@ 36	42'							
50		75"							
100		25							
7 10		10' with 8 5/8 wiper	plages		, ,				
5 50	1.	251	. 02		honk you				
<u>/5</u>	SFS Mouse				•				
30	oks rat ho	p/e		<u> </u>	ery & cro				
ACCOUNT CODE	QUANITY or I	UNITS DESCRIPTION	of SERVICES or PRO	DUCT	UNIT PRICE	TOTAL			
150451	, ,	PUMP CHARGE			1900.00	1900.0			
15000Z	- 45	MILEAGE			7.15	321,7			
150710	1 13.1	12 ton milegar	delivery		1.75	1033.2			

CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CE04512	1	PUMP CHARGE	1900.00	1900.00
CEOCOZI	. 45	MILEAGE	7.15	321,75
CEOTION	13.12	ton mileage delivery	1.75	1033.20
3 CC58291	3055Ks	liteblend I	16.00	4880.00
CC60751	764	flo seal	3.00	228.00
C685581		85/8 wood plag	16500	165.00
			546101	8527.95
			-308	255838
			subtotel	5969.571
		COANINED		
		SCANNED		
			SALES TAX	295.29
AUTHORIZTION_	andre	TITLE	ESTIMATED TOTAL DATE	424.86

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.