

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

Form CP-4
March 2009

Type or Print on this Form
Form must be Signed
All blanks must be Filled

WELL PLUGGING RECORD
K.A.R. 82-3-117

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

Customer Duke Drilling	Lease No.	Date 7-7-18
Lease Bry Baker	Well # 1-17 H	
Field Order # 16464	Station Pratt KS	Casing 13 3/8
		Depth 343
Type Job PTA NW	Formation	County Pratt
		State KS
		Legal Description 17-29S-12W

PIPE DATA		PERFORATING DATA		FLUID USED	TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP
	4 1/2"						
Depth	Depth 2890	From	To	Pre Pad 270 ski	Max	500	5 Min.
Volume	Volume 28.5	From	To	Pad 60-40 poz	Min		10 Min.
Max Press	Max Press 500	From	To	Frac 490 Gel	Avg		15 Min.
Well Connection	Annulus Vol.	From	To		HHP Used		Annulus Pressure
Plug Depth	Packer Depth	From	To	Flush Mud	Gas Volume		Total Load

Customer Representative Tim	Station Manager J Westerman	Treater D Scott
Service Units Vap 84981 19843 19889 21010		
Driver Names Scott D Franklin D-Carter		

Time	Casing Pressure	Tubing Pressure	Bbbs. Pumped	Rate	Service Log
0200					Called Out
0400					On hoc w/Trks Safety mtg
					1st Plug @ 2890 60ski
0520		200	18	5	H2O spacer
0524		200	15.2	5	mix 60ski Cmt @ 13.7 ppg
0527		200	2	5	H2O spacer
0528		200	28.5	5	Balance + Disp w/mud
					2nd Plug @ 2780 60ski
0720		150	18	5	H2O spacer
0724		150	15.2	5	mix Cmt @ 13.7 ppg 60ski
0727		150	2	5	H2O spacer
0728		100	2.9	5	Balance + Disp w/mud
					3rd Plug @ 2390' 100ski
0750		100	18	5	H2O spacer
0754		100	25.4	5	mix 100ski @ 13.7 ppg
0759		75	.7	5	Balance + Disp Cmf
0810		50	7.6	3	30 ski @ 60'
0900		0	5.0	3	20sk Mouse Hole
					270 ski 60-40 poz 490 Gel
					Job complete
					Thank you Scotty



Tail Stage 1

ENTER % CEMENT AND/OR % POZ IN COLUMN B		BULK PLANT SLURRY CALCULATOR		
		ADDITIVES		LBS
	%	LBS	Bentonite Gel	4 % 1032.0
Class A	60	16920	Calcium Chloride	%
Class C			C-15 Fluid Loss	%
Class H			C-20 Retarder	%
Pozmix A	40	8880	C-37 Frict /Dispersant	%
Micro Matrix			C-41P Defoamer/Powder	%
Total Lbs of Cement		25800	C-43 Thix-O-Tropic	%
Number of sacks		300	C-44 Gasblock/Expander	%
Calculated with standard water requirements		User Input	C-45 Sodium Metasilicate	%
Slurry Wt. => 13.78		13.78	C-51 Free Water Control	%
Water Req. => 6.92			Gypsum	%
Slurry Yield => 1.43			KCl (bww)	%
			Salt (bww)	%
			Celloflake	#/sk
			Gilsonite	#/sk
			Pheno Seal	#/sk
			20/40 Sand	#/sk
Pozmix factor (lbs/cu ft)		74		
Pozmix factor (gal/lb)		0.0487		
Pozmix water requirement (gal/sk)		3.55		

lbs Salt per CWT
lbs KCLper CWT

Celloflake Per CWT
Pheno Seal Per CWT
Gilsonite Per CWT
20/40 Sand Per CWT