

**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 #: \_\_\_\_\_  
 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**



P.O. BOX 659, Chanute, KS 66720  
620-431-9210 or 800-467-8676

8835/872A

TICKET NUMBER 53597  
LOCATION Oakley KS  
FOREMAN Jerry S

FIELD TICKET & TREATMENT REPORT  
CEMENT

Invoice #811019  
KS

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
8-19-17	C88	Gertrude 1-36	36	7s	37w	Sherman
CUSTOMER Chizum Oil			Screw for N to S 1W, N 3W to 4			
MAILING ADDRESS P.O. Box 178			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY Spulpn			731	Cory D		
STATE OK			460	Setio		
ZIP CODE 74067						

JOB TYPE Plug HOLE SIZE 7 1/8 HOLE DEPTH 2756 CASING SIZE & WEIGHT  
CASING DEPTH DRILL PIPE 4 1/2 TUBING OTHER  
SLURRY WEIGHT 13.8 SLURRY VOL 142 WATER gal/sk CEMENT LEFT in CASING  
DISPLACEMENT DISPLACEMENT PSI MIX PSI RATE

REMARKS: Slightly meeting a rig up on well plug as ordered with 290 sks  
60/40 48 gal 1/4 size seal  
100 sks @ 2730'  
100 sks @ 1700'  
50 sks @ 400'  
10 sks @ 40'  
30 sks - RH

Thank you  
Jerry S

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CE0471	1	PUMP CHARGE	1900.00	1900.00
CE0002	40	MILEAGE	7.15	286.00
CE0710	12.47	ton mileage delivery	1.75	872.90
CE5829	290 sks	1:1 blend TV. (60/40 48)	16.00	4640.00
CE6075	73 #	Flt seal	3.00	219.00
CP 8228	1	8 5/8 wooden plug	165.00	165.00
			Subtotal	8082.90
			-30%	2424.87
			Subtotal	5658.03
			SALES TAX	307.72
			ESTIMATED TOTAL	5965.75

AUTHORIZATION [Signature] TITLE \_\_\_\_\_ DATE \_\_\_\_\_

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.



8820/8710

TICKET NUMBER 53579  
 LOCATION Oakley KY  
 FOREMAN Jerry Y 1053

WELL TICKET & TREATMENT REPORT  
 CEMENT

Invoice # 811002

620-431-9210 or 800-467-8676

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
8-15-17	088	Geotride 1-36	56	73	37W	Shannon
CUSTOMER			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS			TRUCK # DRIVER TRUCK # DRIVER			
CITY			TRUCK # DRIVER TRUCK # DRIVER			

JOB TYPE Surface HOLE SIZE 12 1/4 HOLE DEPTH 344 CASING SIZE & WEIGHT 8 7/8 2.3#  
 CASING DEPTH 344 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 14.8 SLURRY VOL 1.24 WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 20'  
 DISPLACEMENT 20 1/2 bbl DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: Safety meeting & rig up on W2 circulate casing mix 260 sks surface blend II wash up @ Spupa with 20 1/2 bbl fresh H2O = 500 gal

Cement did  
circulate  
Thank you  
Jerry Y 1053

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CE0471	1	PUMP CHARGE	1150.00	1150.00
CE0002	40	MILEAGE	7.15	286.00
CE0710	12.22	ten mileage delivery	1.75	855.40
CC5871	260 sks	Surface blend II (com 3+2)	23.00	5980.00
			Subtotal	8271.40
			-30%	2481.42
			Subtotal	5789.98
			SALES TAX	366.28
			ESTIMATED TOTAL	6156.26

AUTHORIZATION [Signature] TITLE Partner DATE 8-15-17  
 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.