KOLAR Document ID: 1428732

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 Tw	p S. R East West			
Address 2:					Feet from				
City:				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 #: Well #:				
Producing Formation(s): List A	II (If needed attach another	sheet)		by:		(KCC District Agent's Name)			
Depth to	Top: Botto	m: T.D		Plugging	a Commenced.				
Depth to	•	m: T.D		Plugging Commenced: Plugging Completed:					
Depth to	Top: Botto	m:T.D			y				
Show depth and thickness of a	all water, oil and gas forma	ations.							
Oil, Gas or Water	Records		Casing Re	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:	:					
City:			;	State:		Zip:+			
Phone: ()									
Name of Party Responsible for	r Plugging Fees:								
State of	County, _			, ss.					
	<i>3</i> , –			_	implayed of Onesates	Operator on obeyed decertibed			
			E	imployee 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.



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PRESSURE PUMPING LLC PO/Box 884, Chanute, KS 66720

FIELD TICKET & TREATMENT REPORT INVOICE 1814561

TICKET NUMBER_	22202
LOCATION_OXX	ana
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8/0-431-921	0 or 800-467-8676			CEMEN		1000	1.01100	•
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CASING DEFTH		DRILL PIPE	The state of the s	TUBING			OTHER	
SLURRY WEIGHT		SLURRY VOL		WATER gal/		CEMENT LEFT In		
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