

**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**



Liberal Yard #1717 - Phone 620-624-2277 - 1700 S. Country Estates Road, Liberal KS 67901

**PRESSURE PUMPING Job Log**

Customer:	Carl E. Gungoll	Cement Pump No.:	38119-19570 7HRS	Operator TRK No.:	96815
Address:		Ticket #:	1718-17264 L	Bulk TRK No.:	19827-19808
City, State, Zip:		Job Type:	Z41 - Plug to Abandon		
Service District:	1718 - Liberal Ks	Well Type:	OIL		
Well Name and No.:	Berlier A#4	Well Location:		County:	Haskell
				State:	Ks

Type of Cmt	Sacks	Additives	Truck Loaded On		
60/40 POZ	200	4%GEL	19827-19808	Front	Back
PREMIUM PLUS	60	NEAT		Front	Back
				Front	Back

Lead/Tail:	Weight #1 Gal.	Cu/Ft/sk	Water Requirements	CU. FT.	Man Hours / Personnel	
<b>Lead:</b>	13.5	1.5	7.5	300	Man Hours:	29
<b>Tail:</b>	14.8	1.32	6.31	79.2	# of Men on Job:	3

Time (am/pm)	BPM	Volume (BBLS)	Pumps		Pressure(PSI)		Description of Operation and Materials
			T	C	Tubing	Casing	
8:30							ON LOC, SAFTEY MTG, R.U.
9:22	2.6	15					PUMP H2O SPACER
9:31 AM	2.6	13.35					MIX 50 SX @ 5140' W/ HULLS
9:38 AM	3.9	26			10		DISPLACE
1:08 PM	4.8	10			200		PUMP H2O SPACER
13:12	4.2	13.35			200		MIX 50 SX @1660' W/HULLS
13:17	3	6					DISPLACE
2:40 PM	3	27					CIRC CEMENT FROM 550'
15:02	2	9.5					CAP SURFACE, FILL 5 1/2
15:33		4					TOP OFF WELL
							WASHUP TO PIT
							JOB COMPLETE
							THANK YOU FOR YOUR BUSINESS!!!

Size Hole	Depth			TYPE	
Size & Wt. Csg.	Depth		New / Used	Packer	Depth
tbg.	Depth			Retainer	Depth
Top Plugs	Type			Perfs	CIBP

Customer Signature:	Basic Representative:	CHAD HINZ
	Basic Signature:	
	Date of Service:	1/24/2019