KOLAR Document ID: 1443888

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:	
Address 2:	Feet from North / South Line of Section
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 #: SWD Permit #: SWD Permit #: ENHR Permit #: Gas Storage Permit #: Gas Storage Permit #: SWD Permit #: SWD 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.	County: Well #: Lease Name: Well #: Date Well Completed: The plugging proposal was approved on: (Date) by: (KCC District Agent's Name) Plugging Commenced: Plugging Completed:
Depth to Top: Bottom: T.D	

Show depth and thickness of all water, oil and gas formations.

Oil, Gas or Water Records		Casing Record (Surface, Conductor & Production)		tion)	
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.				
(Print Name)	Employee of Operator or Operator on above-described	l 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.

Submitted Electronically

manufactor and a state of the s	STATEMENT		3818	
	ELMORE'S INC. Box 87 - 776 HWY 99 Date Sedan, KS 67361 / Cell: (620) 249-2519 Eve; (620) 725-5538	- 3-18		
and a second	Customer SM Oil + Gas Address P.O. Box 186 City SKIAPOOK State	9KZip_	74070	<u> </u>
	Qty. Description	Price	Amoun	it
	4 hr Pulling Unit	120,00	480,	90
	3 hr Cement Pump	120,00	360,	
	3 ha Water Inck	85,00	255	00
	1 Raulk Tank	85,00	85,	60
	1000 14 Jubin	,10	100,	
	1 Sk Gel	16,00	101	00
-	38 SKS Cement	12,50	475,	00
	1 /2 Beckhoe	85,00	<u>85</u> ;	
			1856.	
	Pluc Cob Carter#8	Tax	152	126
	Paul"Te 1000' Gel	P	2013	. 7ic
	Hole Spotted 5 SKS Centre	mt-		
	Pulled liste 650' Spotted	15		
	5KS Comput Pulked Upto	275		
	Comparted To Surface II	1/2h		
	De Cts Compute		1	
	PPT-15-019-25040			
	Thank You - We appreciate your	business!		
	The MA		- hich is an an	nual/
	TERMS: Account due upon receipt of services. A 11/2% Serv percentage rate of 18% will be charged to accounts after 30	days.	nor is an an	
	percentage rate of 18% will be charged to assessed and	0	1.5	