KOLAR Document ID: 1457709

Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

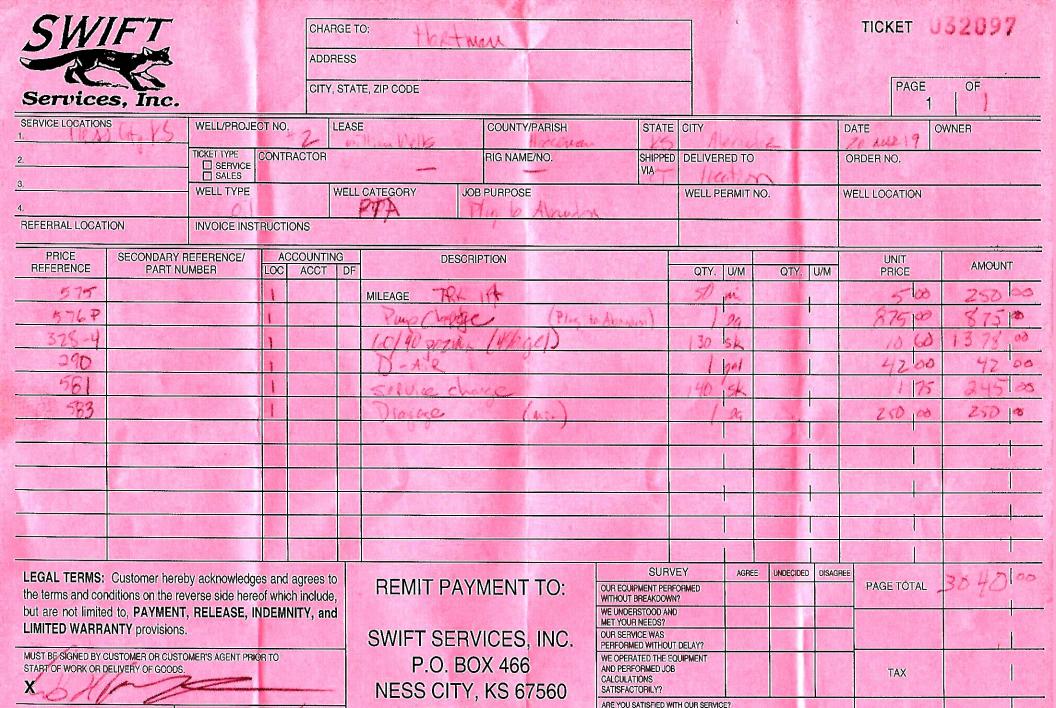
Kansas Corporation Commission Oil & Gas Conservation Division

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 #:			l APINo	o 15 -			
				API No. 15 - Spot Description:			
			I -				
City:	State:						
		·		Footages Calculated from Nearest Outside Section Corner:			
Phone: ()				NE NW	SE SW		
Type of Well: (Check one) (1) Water Supply Well (2) ENHR Permit #: Is ACO-1 filed? Yes (2) Producing Formation(s): List to the production of the product	Other: Gas S	Storage Permit #:	Lease Date W The plu	County: Well #: Date Well Completed: (Date) by: (KCC District Agent's Name) Plugging Commenced:			
Depth to	о Тор: Во	ottom: T.D	"	Plugging Completed:			
Depth to	о Тор: Во	ottom:T.D		ig Completed			
Show depth and thickness of	all water, oil and gas for	mations.					
Oil, Gas or Wate	r Records		Casing Record (Surface, Conductor & Production)				
Formation	Content	Casing	Size	Setting Depth	Pulled Out		
	•	agged, indicating where the mu of same depth placed from (b	•		ds used in introducing it into the hole. If		
Address 1:			_ Address 2:				
City:			State: _		Zip:+		
Phone: ()							
Name of Party Responsible for	or Plugging Fees:						
State of	County	у,	, SS.				
	(Print Name))		Employee 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.



CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

785-798-2300

SWIFT OPERATOR

DATE SIGNED

APPROVAL

☐ A.M. □ P.M.

TIME SIGNED

Thank You!

TOTAL

□ NO

☐ YES

☐ CUSTOMER DID NOT WISH TO RESPOND

JOB LO)G				SWIF	T Serv	ices. Inc.	DATE 20 MUST 19	PAGE NO.
CUSTOM	ER WAN	0.1	WELL NO.	42	LEASE	an We	JOB TYPE Play to Albander	TICKET NO.	
CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (CAL)	PUMPS	PRESSU	RE (PSI)	DESCRIPTION OF OPERA	TION AND MATERIALS	
NO.		(DPM)	(BBL) (GAL)	T C	TUBING	CASING	140 sk 10/40 po	(4% gel)	
							140 sk 10/40 pos 42 casing (18)	e 1350	e la compa
	0850						n latex 1	14	
							mix 4/40 por (4%) e 13.4	
	0907						Pup dram BA	ckada	
			13			100	515k red -	100.051	
		1/					TAKA SIKA	- 171	
	0925	12				The second	mix 60/40 joz (490)	2 13.1	
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			21				- Comit to suy	lace -	
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