KOLAR Document ID: 1461456

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 #:			AF	PI No. 1	5								
Name:				Spot Description:									
Address 1:			_		Sec Tv	vp S. R East West							
Address 2:				Feet from North / South Line of Section									
City: State: + Contact Person:				Feet from East / West Line of Section									
				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 #: Is ACO-1 filed? Yes No If not, is well log attached? Yes No				County: Well #: Date Well Completed: (Date) The plugging proposal was approved on: (Date)									
							Producing Formation(s): List A	II (If needed attach another	sheet)	by	:		(KCC District Agent's Name)
							Depth to Top: Bottom: T.D				Plugging Commenced:		
Depth to Top: Bottom: T.D				Plugging Completed:									
Depth to	Top: Botto	m:T.D	' '	agging	Completed.								
Show depth and thickness of a	all water, oil and gas forma	ations.											
Oil, Gas or Water Records			Casing Reco	ing Record (Surface, Conductor & Production)									
Formation	Content	Casing	Size		Setting Depth	Pulled Out							
cement or other plugs were us		-				ds used in introducing it into the hole. If							
Plugging Contractor License #: Name													
Address 1:			Address 2: _										
City:			Sta	ate:		Zip:+							
Phone: ()													
Name of Party Responsible fo	r Plugging Fees:												
State of	County, _		, s	SS.									
			Г	_	nployee of Operator or	Operator on above-described well,							
	(Print Name)			=[]	inproyee or 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.



TICKET NUMBER 55574 LOCATION O++ any FOREMAN Alan Mader

PRESSURE PUMPING LLC

FIELD TICKET & TREATMENT REPORT PO Box 884, Chanute, KS 66720 620-431-8210 or 800-467-8676 CEMENT

4-11-19 1564 ROSE BERRY 3 SR 12 18	RANGE COUNTY AD FR TRUCK DRIVER 54 tet Meet
CUSTOMER BG-5 MAILING ADDRESS J939 Ell:5 RB CITY STATE STATE JOB TYPE PLAC HOLE SIZE HOLE DEPTH CASING SIZE & WEIGH	TRUCK# DRIVER
MAILING ADDRESS J939 Ell:5 Rd CITY STATE ZIP CODE KGN TOOL KS 46079 JOB TYPE PLAC HOLE SIZE - HOLE DEPTH - CASING SIZE & WEIGH	
JOB TYPE Pluc HOLE SIZE - HOLE DEPTH - CASING SIZE & WEIGH	Sately Maet
STATE ZIP CODE 548 AL MAR JOB TYPE PLUC HOLE SIZE - HOLE DEPTH - CASING SIZE & WEIGH	
JOB TYPE Pluc HOLE SIZE - HOLE DEPTH - CASING SIZE & WEIGH	
JOB TYPE Pluc HOLE SIZE HOLE DEPTH CASING SIZE & WEIGH	
The state of the s	A 8
	ER Perts
SLURRY WEIGHT SLURRY VOL WATER gal/sk CEMENT LEFT in CASE	7 00
DISPLACEMENT DISPLACEMENT PSI 1000 MIX PSI 800 RATE 2 box	A -
REMARKS: Held Meeting, Egypolished injection rate,	Mixed +
pumped 385K Por Bland I. A plas 6% get with	15th cotton
seed hulls well pressured up to 4500# Shut	value
with 1000 PSI, Left casing full	
7// 1 0.1.	110,
RCC. Ryan Duling	Moder
Alm	
ACCOUNT QUANITY OF UNITS DESCRIPTION OF SERVICES OF PRODUCT UN	NIT PRICE TOTAL
CODE	
	000
(E8002 — MILEAGE on 1295C 495	2.00
(E0711 15 min ton Miles 548 1	3200
	0000
546	132
heas 65%-1	12500 60630
	100
CL5840 10983 3B POZBlera I-A 5	732
	5760
cc 6080 15 cotton seed halls	1500
345 5	85=
Leas 65% -3	80 1 2049
	
	ALES TAX 1650
	STIMATED 112 56
	TOTAL 821
AUTHORIZTION UNIV TITLE DAT	E (236434

account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form