KOLAR Document ID: 1471559

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 #:	I API No.	15 -	
Name:			
Address 1:	'	•	Twp S. R East West
Address 2:		Feet from	
City:	+	Feet from	East / West Line of Section
Contact Person:	Footage	s Calculated from Nea	rest Outside Section Corner:
Phone: ()		□ NE □ NW	SE SW
Type of Well: (Check one) Oil Well Gas Well OG D&A Water Supply Well Other: SWD Permit #: ENHR Permit #: Gas Storage Permit #: s ACO-1 filed? Yes No If not, is well log attached? Yeroducing Formation(s): List All (If needed attach another sheet) Depth to Top: Bottom: T.D.	Lease N Date We The plug by:	lame:ell Completed: gging proposal was app	Well #: (Date) (KCC District Agent's Name)
Depth to Top: Bottom: T.D.			
Depth to Top: Bottom:T.D.		g Completed	
Show depth and thickness of all water, oil and gas formations.			
Oil, Gas or Water Records	Casing Record (Su	rface, Conductor & Prod	duction)
Formation Content Casing	Size	Setting Depth	Pulled Out
Describe in detail the manner in which the well is plugged, indicating where to the cement or other plugs were used, state the character of same depth placed from the	·		ods used in introducing it into the hole. If
Plugging Contractor License #:	Name:		
Address 1:	Address 2:		
City:	State:		
Phone: ()			
Name of Party Responsible for Plugging Fees:			
State of County,			

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.

810 E 7[™] PO Box 92 EUREKA, KS 67045 (620) 583-5561



Cement or Acid Field Report						
Ticket No	4613					
Foreman _	David Gardner					
Camp _ E	ureka					

Date	Cust. ID#	Lease & Well Number		Section	Toumahia	I D		
				Section	Township	Range	County	State
7-29-19	1162	Rossilion #OW-	- 2	100			Coffey	K
Customer			Safety	Unit #	Dri	ver	Unit #	Driver
Evans	01/ /1	10.	Meeting	105	Jas		OTHER P	Dilvei
Mailing Address			D6	110	Cal			
P.O. Bo	ex 67		JH CG	145	Ste			
City		State Zip Code	Sm					
		2.0000	Sm		4			
Lebo		KS 66856				4		The same of the sa
Job Type P.T	.A. old	well Hole Depth		01 1/1 1	20 211 -	.1 ,	23/11	
Casing Depth_				Slurry Vol.			bing $\frac{Z^3/8}{}$	
pasing Deptin_	/// 11	Hole Size		Slurry Wt	144	Dri	Il Pipe	
Sasing Size & V	Nt. 4/2	Cement Left in Casing		Water Gal/SK	6.5	Oth	ner	
Displacement_		Displacement PSI		Bump Plug to		PD	M	
Domonto. S		10. 1. 0	2, 11	Dump riag to		BF	IVI	
temarks:	satety VI	Meeting. Rig up to 23	18 Tub	ing Plug	well as	follows:		
		3 ,		,				
		15 sxs	@ 110	13' w/ Hu	.11.			
		6.150		S W/ 114	(//3			
		- Get Spa	acer	,				
		15 sks	@ 700	" w/ Hu/	15			
	Alle Laboration	Gel Spo	acer				The second	
		90 SKS	@ 250'	to Surfa	ace			
		1205KS						
		720370	, -, 4,		1	10,000		
THE REAL PROPERTY.								

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C105-2	1	Pump Charge 2nd well of 2	525.00	
2/07	-0-	Mileage Same field	N/c	525.00 N/c
(203	120 SKS	60/40 Pozmix Cement	13.40	1608.00
C206	410#	Gel @ 4%	.21	86.10
C108H	5.16 Tons	Ton Mileage - Bulk Truck	m/c	250.00
C206	200#	Gel Spacer	,21	42.00
CZ14	45±	Hells	,50	22,50
C113	2 HRS	80 Bbl Vac Truck	90.00/HR	180.00
9 3		Thank You		
		Sub Total	2,713.60	
		6.5%	Less 5% Sales Tax	176.38
Authoriz	ation	Title	Total	2.745.48