KOLAR Document ID: 1471558

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 De	scription:		
Address 1:			.		Sec Tw	p S. R East West	
Address 2:					Feet from		
City:	State:	Zip: +	.		Feet from	East / West Line of Section	
Contact Person:				Footage	s Calculated from Neares	st Outside Section Corner:	
Phone: ()					NE NW	SE SW	
Type of Well: (Check one)		OG D&A Cathodi		,			
ENHR Permit #:	Gas Sto	rage Permit #:					
Is ACO-1 filed? Yes	No If not, is well	log attached? Yes				ved on: (Date)	
Producing Formation(s): List A	II (If needed attach another	sheet)		by:		(KCC District Agent's Name)	
Depth to	Top: Botto	m: T.D		Plugging	a Commenced.		
Depth to	•	m: T.D		00 0			
Depth to	Top: Botto	m:T.D			y		
Show depth and thickness of a	all water, oil and gas forma	ations.					
Oil, Gas or Water	Records	Casing F		Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size		Setting Depth	Pulled Out	
Describe in detail the manner cement or other plugs were us		_				Is used in introducing it into the hole. If	
Plugging Contractor License #	:		Name:				
Address 1:			Address 2:	:			
City:			;	State:		Zip:+	
Phone: ()							
Name of Party Responsible for	r Plugging Fees:						
State of	County, _			, ss.			
	<i>3</i> , –			_	implayed of Onerster -	Operator on obeyed decertibed	
	(Print Name)			E	imployee 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.

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



Cement or Acid Field Report						
Ticket No.	4612					
Foreman	David Gardner					
Camp	Eureka					

Date	Cust. ID#	Lease 8	Well Number		Section	Township	Range	County	State
7-29-19	1162	Rossilio	n #5-80					Coffey	KS
Customer				Safety	Unit#	Dri	ver	Unit#	Driver
Evar	15 Oil	Inc.		Meeting	105	Ja	son		
Mailing Address				DG JH	110	Ca			
P.o.	Box 10	7		66	145	Sto	ive		
City		State Z	ip Code	Sm					
Lebo		KS	66856						
Job Type P.	T.A. Old	Well Hole Depth	1656'					bing $2\frac{3}{8}$ "	
asing Depth_		Hole Size			Slurry Wt	14#	Dri	II Pipe	
Casing Size &	Wt. 41/2"	Cement Left	in Casing		Water Gal/SK	6.5	Oth	her	
		Displacem			Bump Plug to			M	
		lecting. Rig							
tomanto	arcry ".	cerry. xig	up 10 21	8 /40	ing. I lay	Well 45	rollows.		
			15 SKS	@ 11	013' wf	Hulls			
	1 - 0 - 1 - 1 - 1 - 1		Gel Sp			7 547-5			
			15 srs	D 71	00' w/ H	111c	3 . 3 .		
			Gel Spa		00 00/11	41/3		7	
			1		31 / 0	^			
					d' to Sur	tace			
			120 SKS	Total					

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C105	/	Pump Charge 1st well of Z	785.00	785.00
C107	40	Mileage	4.20	168.00
CZ03	120 sks	60/40 Pozmix Cement Gel @ 4%	13.40	1608.00
C206	410#	Gel @ 4%	.21	86.10
C108A	5.16 Tons	Ton Mileage - Bulk Truck	m/c	250.00
(206	200#	Gel Spacer	.21	42.00
C214	45#	Hulls	,50	22,50
C/13	3 H R S	80 Bbl Vac Truck	90.00 /HR	270.00
C224		City Water	10.00/1000 gals	33.00
		Thank You	5, -1,	221410
			Sub Total Less 5%	173.84
		(e.5 %	Sales Tax	212.20
Author	ization	Title	Total	3.302.96