

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 #: _____
 Name: _____
 Address 1: _____
 Address 2: _____
 City: _____ State: _____ Zip: _____ + _____
 Contact Person: _____
 Phone: (_____) _____
 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
 Producing Formation(s): List All (If needed attach another sheet)
 _____ Depth to Top: _____ Bottom: _____ T.D. _____
 _____ Depth to Top: _____ Bottom: _____ T.D. _____
 _____ Depth to Top: _____ Bottom: _____ T.D. _____

API No. 15 - _____
 Spot Description: _____
 _____ - _____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West
 _____ Feet from North / South Line of Section
 _____ Feet from East / West Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: _____
 Lease Name: _____ Well #: _____
 Date Well Completed: _____
 The plugging proposal was approved on: _____ (Date)
 by: _____ (KCC District Agent's Name)
 Plugging Commenced: _____
 Plugging Completed: _____

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

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

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



CEMENT TREATMENT REPORT

Customer: Vess Oil	Well: Brown - Scully A2	Ticket: ICT 2306
City, State:	County: Butler, KS	Date: 8/29/2019
Field Rep: Judd	S-T-R: 16-28s-4e	Service: PTA

Downhole Information	
Hole Size:	7.875 in
Hole Depth:	2496 ft
Casing Size:	8.625 in
Casing Depth:	254.37 ft
Tubing / Liner:	in
Depth:	ft
Tool / Packer:	
Depth:	ft
Displacement:	bbls

Slurry	
Weight:	13.8 # / sx
Water / Sx:	6.90 gal / sx
Yield:	1.42 ft ³ / sx
Bbls / Ft.:	
Depth:	ft
Volume:	bbls
Excess:	%
Total Slurry:	37.93 bbls
Total Sacks:	150 sx

Cement Blend		
Product	%	#
Class A	60.0	8460
Gel	4.0	523
CaCl	-	
Metso		
KolSeal		
PhenoSeal	-	
Salt		
Flyash	40.0	4440
Total		13,423

TIME	RATE	PSI	BBLs	REMARKS	TIME	RATE	PSI	BBLs	REMARKS
				On location safety meeting					
				Spot in and rig up					
				Hook up to drill pipe @ 2496'					
				Break circulation with rig					
3.0	200.0		8.5	Pump 8.5 BBL water ahead					
3.0	200.0		8.9	Mix and pump 35 sacks					
3.0	225.0		3.0	Displace 3 water					
4.0	200.0		24.3	Displace 26.08 mud					
				Pull pipe to 300'					
3.0	120.0		20.0	Pump 20 BBL water					
3.0	120.0		8.9	Mix and pump 35 sacks					
3.0	120.0		2.1	Displace 2.07 BBL water					
				Pull pipe to 60'					
3.0	50.0		5.1	Mix and pump cement to surface					
				Pull pipe					
2.5			7.8	Plug rat hole					
2.5			5.1	Plug mouse hole					

CREW			UNIT			SUMMARY		
Cementer:	Jake H			77		Average Rate	Average Pressure	Total Fluid
Pump Operator:	Kevin			265		3 bpm	154.38 psi	93.23 bbls
Bulk #1:	Garrett			241				
Bulk #2:								