KOLAR Document ID: 1474212

**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:				Footages Calculated from Nearest Outside Section Corner:								
Phone: ( )					NE NW	SE SW						
Type of Well: (Check one)		OG D&A Cathodi		County: Well #:								
ENHR Permit #:	Gas Sto	rage Permit #:		Date Well Completed:								
Is ACO-1 filed? Yes	No If not, is well	log attached? Yes		The plugging proposal was approved on: (Date)								
Producing Formation(s): List A	II (If needed attach another	sheet)		by:		(KCC <b>District</b> Agent's Name)						
Depth to	Top: Botto	m: T.D		Plugging Commenced:								
Depth to	•	m: T.D		Plugging Completed:								
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 Re	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 Onesates	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.



## TREATMENT REPORT

Customer	Helli >	Exel	biat	ion	Le	ease No.					Date	ے یا (	-20	18					
Lease Sm	5+h-1	Chi	n		L	/ell #	_	·			·				:				
Field Order	Statio	ň	Port	1 K	了 <u>.                                    </u>	# 171	18	Casing	<u> </u>		County	MA	ords		State	KSI			
Type dob_					÷				Formation	n .	-	_	Legal C	Description					
PIPE DATA PERFORATIN						DATA FLUID USED					` TRÈATMENT RESUME								
Casing Size/	Tubing Si	ze/s	.Shots/Ft				Acid		RATE PRI		PRE	ESS ISIP							
Depth	Depth ID	cŇ	From	om T		То		Pre Pad		Max	Max			5 Min.	1				
Volume	Volume		From	То			Pa	d		Min		10 Min.							
Max Press	/ Max Pres	s	From	To.			Fra	ıc		Avg	15 Min.								
Well Connection	on Annulus \	Vol.	From		То					HHP Used				Annulus	Annulus Pressure				
Plug Depth	Packer D	epth	From To		То	Flush			Gas Volume		Total Lo			ad/					
Customer Rep	oresentative					Station	Man	ager Just	u Wester	leto (a	Treate	er /	AKL	RAKIN					
Service Units	27463	84	1981	198	762	198	9	19918							V				
Driver Names	Ron 6		K	$\mathcal{D}$		Jos		D					4						
Time	Casing Pressure		ıbing ssure					Rate		Service Log									
9:45 AM	1 								On Location										
														· · ·					
	<i>Y</i> 4								15+ 8/09 1080 W/TU							icy			
11:30	100			10		2		3 Runa 10 Bbls WAterla)							9 1200	u Essi.			
		` `		12.75		5	<u> </u>		Mix + punge 50 5x 60:40 toz										
														ixed in slurar					
				1.75		5	å	?	Dissher with 134 Bbls					ols we	s water				
		<u> </u>							L,										
1	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\								Yu//	tubic									
	100	ļ		10			· c	2	Pure.	Puna 10 Able Water									
1	150				19			3	Mix + Musse 75 5x 60										
1				·					+ Circulate Cement to surfu										
		ļ							in	5/2/	CAsin	7 5	* .						
4	250								Antinor War Pur Comont							198			
	250						with so				Hare Walve open home								
	250			4	57			2	150 sx with yo Acturas + 75						<u> 15 5</u>	<u>v</u>			
1 - 2 1									with	Flish	Ratu	νи	no.	MINNEM	<u> </u>				
1:30 Kg					-			,	Lay o	Jown +	y bing	t	Gude	W MAGA	e p	nont			
				5,25				1	Punat.	Pumpato sy consul to ton off 5/2 casin						<u>در</u>			
	· 								Rig ve	to Bro	wen L	lead	15/2	+898	+ /	Tims			
	100			-	150			/	50 5 X	7. 7. 7.0	lea+,		Ment		face	$\sum_{i \in \mathcal{I}_{i}}  \mathcal{I}_{i}  \leq 1$			
1024	I NE Hiv	vav	61 • F	20. E	ОХ	8613 <b>•</b>	Pr	att, KS	67124-86	13 • (620	)) 672-	-120	1 • Fa	x (620)	57 <b>2</b> -!	5383			