

**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**



TICKET 032496

PAGE 1 OF 1

CHARGE TO: Joe Kerstner Oil  
 ADDRESS: \_\_\_\_\_  
 CITY, STATE, ZIP CODE: \_\_\_\_\_

WELL/PROJECT NO. #1 LEASE Tillatson COUNTY/PARISH Ness CITY Arnold DATE 9 Oct 19 OWNER  
 TICKET TYPE  SERVICE  SALES CONTRACTOR \_\_\_\_\_ SHIPPED VT DELIVERED TO location ORDER NO. \_\_\_\_\_  
 WELL TYPE oil WELL CATEGORY FRISZLER JOB PURPOSE FTA WELL PERMIT NO. \_\_\_\_\_ WELL LOCATION \_\_\_\_\_  
 INVOICE INSTRUCTIONS Play to Abandon

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING		DESCRIPTION	QTY.	U/M	QTY.	U/M	UNIT PRICE	AMOUNT
		LOC	ACCT							
575		1							5.00	100.00
576-P		1		MILEAGE TRX 114	20	mi.			925.00	925.00
328-4		1		Pump Charge	1	ea.			11.00	2915.00
275		1		60/40 pozmix (40% gel)	265	sk			35.00	70.00
290		1		Cotton seed balls	2	sk			42.00	84.00
581		1		D-air	2	gal			1.85	508.75
583	582	1		Service charge	275	sk			250.00	250.00
				Drayage (mia)	1	ea.				

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS.

**X**

DATE SIGNED \_\_\_\_\_ TIME SIGNED \_\_\_\_\_  A.M.  P.M.

REMIT PAYMENT TO:  
 SWIFT SERVICES, INC.  
 P.O. BOX 466  
 NESS CITY, KS 67560  
 785-798-2300

SURVEY

OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?	AGREE	UNDECIDED	DISAGREE
WE UNDERSTOOD AND MET YOUR NEEDS?			
OUR SERVICE WAS PERFORMED WITHOUT DELAY?			
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?			

ARE YOU SATISFIED WITH OUR SERVICE?  YES  NO

CUSTOMER DID NOT WISH TO RESPOND

PAGE TOTAL 4852.75

TOTAL 5168.18

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR \_\_\_\_\_ APPROVAL \_\_\_\_\_

Thank You!

CUSTOMER: *LeSethor D-1* WELL NO.: *#1* LEASE: *Tillotson* JOB TYPE: *Plug to Abandon* TICKET NO.: *32976*

CHART NO. TIME RATE (BPM) VOLUME (BBL) (GAL) PUMPS T C TUBING CASING DESCRIPTION OF OPERATION AND MATERIALS

0830 on loc TRR 114  
 0900 MIX 60/40 PZ (4%) @ 13.1 PPG w/ 200# balls  
 Displace to 4331'  
 Pull to 1820'

1030 MIX 60/40 PZ (4%) @ 13.1 PPG  
 - circ fluid to surface  
 1755k

1100 - pull tubing from hole -  
 Pump down 8 3/4" w/ 250 PZ - shut in -  
 top 276 5 1/2" 4100k

1210 - 5 1/2" standing full of cement -  
 1240 with back  
 Back up  
 Job complete



CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS	T	C	TUBING	CASING	DESCRIPTION OF OPERATION AND MATERIALS
0830									on loc TRR 114
0900		2 1/2	8	Ø					MIX 60/40 PZ (4%) @ 13.1 PPG w/ 200# balls Displace to 4331' Pull to 1820'
1030		3 1/2	25	Ø					MIX 60/40 PZ (4%) @ 13.1 PPG - circ fluid to surface 1755k
1100									- pull tubing from hole -
1210				250					Pump down 8 3/4" w/ 250 PZ - shut in - top 276 5 1/2" 4100k
1240									- 5 1/2" standing full of cement - with back Back up Job complete