KOLAR Document ID: 1523902

**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) Oil Well Gas Well OG D&A Cathodic  Water Supply Well Other: SWD Permit #:					County: Well #:				
ENHR Permit #:         Gas Storage Permit #:				Date Well Completed:					
Is ACO-1 filed? Yes No If not, is well log attached? Yes No					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 Top: Bottom: 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		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 #:				:					
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.

## **STATEMENT**

## **ELMORE'S INC.**

Box 87 - 776 HWY 99 Sedan, KS 67361 Date 6-18-2020

Cell: (620) 249-2519 Eve: (620) 725-5538

ty	State	Zip		
Qty.	Description	Price	Amount	
4	or Pulling Unit	12000	480	00
3	he Coment fund		3100	
3	hr Water Touck	\$05,00	255,	00
1	La Backlee	85,00	85	00
΄,	Sk Gel	16,00	110,	00
10	SKS Cement	12,50	500,	00
30'	1" Tubin	.10	93,	00
			1789.	00
	Plug Job Worl Forms 7	Tax bis	11100	29
	Ran 1" To 930' (oel	B	1905.	2
	Hole Spotted 105ks Coi	yest-		
	Fulled Upto 260' Spotter	055ks	<b>S</b>	
	Tement tulled UNTO 27			
	Emented To Surface W			
d	25 SKS Comput Sucked			
	+ Clased Pi+			

Rec'd. by \_\_\_\_\_\_
TERMS: Account due upon receipt of services. A 11/2% Service Charge, which is an annual percentage rate of 18% will be charged to accounts after 30 days.

24 No. 5, 465359313