KOLAR Document ID: 1539310

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 Description:												
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 #: ENHR Permit #: Gas Storage Permit #: Is ACO-1 filed? Yes No If not, is well log attached? Yes No					County: Well #: Date Well Completed: The plugging proposal was approved on: (Date)											
										Producing Formation(s): List A	ll (If needed attach another	sheet)				(KCC District Agent's Name)
										Depth to	Top: Botto	m: T.D		Plugging Commenced:		
Depth to	Top: Botto	m: T.D		Plugging Completed:												
Depth to	Top: Botto	m: T.D	'	. ragging	g completed.											
Show depth and thickness of a	all water, oil and gas forma	ations.														
Oil, Gas or Water	Records	Casing Record (Surface, Conductor & Production)				tion)										
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:	ne:												
Address 1:			Address 2:	:												
City:			;	State:		Zip:+										
Phone: ()																
Name of Party Responsible fo	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

14507

ELMORE'S INC.

Box 87 - 776 HWY 99 Sedan, KS 67361

11-10-2020

Date

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

Address	→ / · · ·				
City	S	tate _	Zip		
Qty.	Description		Price	Amou	nt
> /-	Pulling Unit		120,00	840,	08
5 hr	Coment And		12000	600,	00
4 hr	Water Touck		825,00	340,	00
1 Ban	Ik Truck		85,00	825,	08
1 Back	Loe		85.00	825	00
1 5k	bel .		110,00	16,	00
152 SKS	Cement		12,50	1900,	00
2 Pers	forations		200,00	400,	00
1050 1"	Tubin		110	105	00
P)4g	Jab Dunlow Lemmon	#5.	<u>~</u>	4371.	00
Woshed	1" Down To 1050	/	Tax	ACTION OF THE PERSON NAMED IN COLUMN TWO	54
Gel 1	tale Spotted 15 3	A	-44	4742	.54
Cemen		^	Sonoted		
Casino			A CONTRACTOR	Λ .	
1000	Spotted 158KS	Cer		Filled	STEEL STATE
les to	225 Comented	70	Surfa	ce W	1/1

Thank You - We appreciate your business!

Doo'd by		
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.