KOLAR Document ID: 1539308

**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				ved on: (Date)			
Producing Formation(s): List A	ll (If needed attach another	sheet)				(KCC <b>District</b> Agent's Name)			
Depth to	Top: Botto	m: T.D		Plugging	a Commenced:				
Depth to	Top: Botto	m: T.D		00 0					
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)						
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:			5	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.

## ELMORE'S INC.

Box 87 - 776 HWY 99 Sedan, KS 67361

Cell: (620) 249-2519 Eve: (620) 725-5538 Date 10-30-2020

Address				
City	St	ateZip		
Qty.	Description	Price	Amount	
12 hr	P. Hina Chit	120,00	1440,	00
,,,,	Coment Pump	120,00	4801	00
	Water Truck	85,80	340,	00
	oulk Truck	85,00	85,	00
	ckhoe	85,00	85,	00
	rforations	200,00	600,	00
	5 Gel	16,00	32,	00
1 (a) (b) (b) (a)	es Cement	12.50	2000,	20
300 1"	Tahin	,10	90,	00
P	ug Job Dunkoma Lomos	351	51.52	00
F.	Tool out Rock Helded Co	llor Jax	437,	92
	Tubin Tubin + Packer Hus		5589,	92
Stat	Tubin off A+ 900'Lo	Sport Tube		
P.	1" To 900' Gel Hole Sp	otted 2051	5	
15/1	ad 1" Put Personated	Posing At	600	
× 21	5' Ran 1" To 600'	2007 ted 20	osks	
P. 14	Thank You - We appreciate yo	when To S.	rfoce	w

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.