KOLAR Document ID: 1591753

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:	Footages Calculated from Nearest Outside Section Corner:
Type of Well: (<i>Check one</i>) Oil Well Gas Well OG D&A Cathodic Water Supply Well Other: SWD Permit #: SWD Permit #:	NE NW SE SW County:

Show depth and thickness of all water, oil and gas formations.

Oil, Gas or Water	r Records	Casing Record (Surface, Conductor & Production)			
Formation Content		Casing	Size	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.
(Print Name)	Employee 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.

Submitted Electronically



TREATMENT REPORT

Acid	& Cemen	it 🕮						Acid Stage N	lo.	
Date 8	/25/2021 D	lstrict GB	F.O. N	o. C60384	Type Treatment Bkdown		Type Flu		Ροι	unds of Sand
Company	K&N PETROLE	UM			57	Bbl./Ga				
Well Name	& No. MOOS A	2				Bbi./Ga	I.			
Location			Field			Bbl./Ga	l.		í.	
County	RICE		State KS		Flush		l			
					Treated from				No. ft.	0
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Formation			Perf	to						
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			rom		Auxiliary Equipr			360-308T		
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					Plugging or Seal	ling Materials: Typ	e			
Open Hole	Size	T.D.	ft. P.	B. toft.				Gal	i.	ю.
Company (Representative		KYLE N	L.	Treater			GREG C.		
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FIELD WORK ORDER, INVOICE AND CONTRACT

1873



Haysville, KS 67060

(316) 524-1225 • FAX (316) 524-1027

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