KOLAR Document ID: 1604075

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 #:			APIN	No. 15					
Name:				Spot Description:					
Address 1:				Sec					
				Feet fron					
City:	State	:		Feet from East / West Line of Section					
Contact Person:			Foota	Footages Calculated from Nearest Outside Section Corner:					
Phone: ()				NE NW	SE SW				
Water Supply Well	Other:	ell OG D&A Ca SWD Permit #: as Storage Permit #: is well log attached? Yes	Lease Date	County: Well #: Date Well Completed: The plugging proposal was approved on: (Date)					
Producing Formation(s):	List All (If needed attach a	another sheet)	by:		(KCC District Agent's Name)				
De	epth to Top:	Bottom: T.D	Plugo	ring Commenced:					
De	epth to Top:	Bottom: T.D	"	, ,					
De	epth to Top:	Bottom:T.D		,g • •p. • . • . • . • . • . • . • .					
	ss of all water, oil and gas	s formations.							
	Water Records			g Record (Surface, Conductor & Production)					
Formation	Content	Casing	Size	Setting Depth	Pulled Out				
		plugged, indicating where the cter of same depth placed from			nods used in introducing it into the hole. If				
Plugging Contractor Lice	ense #:		Name:						
Address 1:			Address 2:						
City:			State	:					
Name of Party Responsi	ible for Plugging Fees:								
State of	Co	unty,	, SS.						
				Employee of Operator of	or Operator on above-described well,				
	(Print Na			=mpiogod of Operator o	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.



SPECIAL SERVICES CUSTOMER INVOICE

Store 2220 PITTSBURG,KS 3001 N BROADWAY PITTSBURG, KS 66762 Phone: (620) 231-0831 Salesperson: MT37PD Reviewer: MT37PD

This is only a QUOTE for the merchandise and services printed below. This becomes an Agreement upon payment and an endorsement by a Home Depot register validation.

JA(CKSON DAL	E		Phone 1 (620) 363-2683
Address	2449 HIGHWAY 7			Phone 2 (620) 363-2180
7				Company Name
City	MAPLETON			Job Description Portland Cement
State	KS	Zip	66754	County BOURBON

Page 1 of 2 No. H2220-87539

ORDER	ID: H2220-	37539	
		AMOUNT	3946.50
	ADDL MOSE	SUBTOTAL	0.00
		SUBTOTAL	3,946.50
		SALES TAX	351.24
		TOTAL	\$4,297.74
	BALAN	CHECK	4,297.74
XX3833			
VIIII L	ODF 001 239		TA

QUOTE is valid for this date: 11/18/2021

HOME DEPOT DELIVERY #1

MERCHANDISE AND SERVICE SUMMARY

We reserve the right to limit the quantities of merchandise sold to customers

			SUMMARY								
			REF # V02	REF # V02							
STOCK M	IERCHANDISE TO	BE DELIV	ERED:								
REF#	SKU	QTY	UM	DESCRIPTI	ON	E MARKET	TAX	PRICE EACH	EXTENSION		
R01	0000-320-212	350.00	BG ASHGROVE 92.6LE	TYPE I-II PORT CMNT	1	A	Y	\$11.05	\$3,867.50*		
							ERCHA	NDISE TOTAL:	\$3,867.50		
DELIVER	Y INFORMATION:		SCHEDULED DELIVE	RY DATE: 12/01/2021	SCHEDU	LED DELIVERY TIME	6AM-	8PM			
V02	0000-515-663	1.00	Outside Delivery				Y	\$79.00	\$79.00		
						DELIVERY	SERVIC	CE SUBTOTAL:	\$79.00		
THE PCC	WILL DELIVER N	IDSE TO:	Jeremiah Jackson					h.			
ADDRES	S: 2254 160th St			CITY: M	APLETON						
STATE:	KS		ZIP: 66754	COUNTY:	BOURBON	SALES	TAX R	ATE: 8.9	00		
PHONE:	(620) 363-2180		ALTER	NATE PHONE: (620) 3	63-2683						
						Lib. HIDSE	E	ERY MODALS	\$3,946.50		
DRIVER S	SPECIAL INSTRUC	TIONS:									
						END OF HOME I	DEPOT	DELIVERY - REF	#V02		

Check your current order status online at www.homedepot.com/orderstatus



(9801) 0100249604