KOLAR Document ID: 1606107

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:				Footage	s Calculated from Neares	st Outside Section Corner:		
Phone: ()					NE NW	SE SW		
Type of Well: (Check one)		OG D&A Cathodi		,				
ENHR Permit #:	Gas Sto	rage Permit #:						
Is ACO-1 filed? Yes	No If not, is well	log attached? Yes				ved on: (Date)		
Producing Formation(s): List A	II (If needed attach another	sheet)		by:		(KCC District Agent's Name)		
Depth to	Top: Botto	m: T.D		Plugging	a Commenced			
Depth to	•	m: T.D		00 0				
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	Records	Casing F		g 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:			;	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.

810 E 7[™] PO Box 92 EUREKA, KS 67045 (620) 583-5561



Cement or Acid Field Report
Ticket No. 6099
Foreman Keum McCoy
Camp Eureka

a	34:			
ART	1500	113-	2140	anag .

Date	Cust. ID#	Lease	e & Well Number		Section	Tov	wnship	Range	County		State
12-15-21	1296	Shirle	+ # 25-1		25	7	75	26	MoPhers	o ∧}	Ks
Customer				Safety	Unit #		Driv		Unit #		Driver
190	DORRATING	INC.		Meeting	/ 6//		SHANA			ļ	
Mailing Address	/	,		KM SF	113		BROKE.	ρ ω .		 	
785° W.	CoveLL	Rd. 540 21	00	Bul						-	
City		1	Zip Code							1	
Edmond			73003		`						
Joh Type 87	TA. NO	W Hole Den	th		Slurry Vol			т	ubing		
Soo Type		Hole Dep	e <u>778</u>		Slurry Wt				orill Pipe <u>4½</u>		
					=				-		
Casing Size & V	Vt	Cement L	eft in Casing		Water Gal/SK	·		c	ther		
Displacement_		Displace	ment PSI		Bump Plug to			В	PM		
Pamarke: S	acety N	Portugi R	19 up to 4%	2 DR11	1/ 010- 5	Port	Cem	at No	s As Foll	lour	va.
Nemarks. <u>—</u>	11 21/ 11/	7,	707 13 11	- Q_77866		<i></i>	CEN 01717 C		7 2 2 2 7		7.
			'5 sks @ 2	35.3							
			5 5/15 60';		Car o						
			BO SKS R.A		7775 4						
			0 Sks M.								
		Or .	0 345 777.	//.							i.
											¥
											1

Code	Qty or Units	Description of Product or Services	Unit Price	Total
103	/	Pump Charge	//00.00	1100.00
/07	100	Mileage	4.20	420,00
203	110 sks	60/40 Pozmix Cement	14.75	16.22.50
206	110 sks 375 #	60/40 Pozmix Cement Gel 4%	. 28 *	/05.00
' 108 <u>B</u>	4.73 TONS	Mileage 100 miles	1.40	662.20
			Sub Total	3,909.70
		THANK YOU 8.0%	Less 5% Sales Tax	202.40 138.20
	4000	ARlie Coulter Title Lighthouse Dr.lg. Toolpusher	<u> </u>	3845.50