## KOLAR Document ID: 1638992

**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 Twp S. R East West
Address 2:	Feet from North / South Line of Section
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 #:  SWD Permit #:	County: Well #: Lease Name: Well #:
Is ACO-1 filed?	The plugging proposal was approved on: (Date)
Producing Formation(s): List All (If needed attach another sheet)	by: (KCC District Agent's Name)
Depth to Top: Bottom: T.D	Plugging Commenced:
Depth to Top: Bottom: T.D	Plugging Completed:
Depth to Top: Bottom: T.D	

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

Oil, Gas or Water	Records	Casing Record (Surface, Conductor & Production)				
Formation	Content	Casing	Size	Setting Depth	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: _	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



### 3288 FM 51 GAINESVILLE, TEXAS 76240 OFFICE: 940-612-3336 FAX: 940-612-3346

FRACTURING • ACID • CEMENT • NITROGEN												
TYPE AND PURPOSE OF JOB CEMENT ACID NITROGEN FRAC KILL OTHER AFE 14926												
CUSTOMER Scout Energy Pantners WELL NAME HCU 1211 WO#5075												
ADDRESS 14400 Midway Rd LOCATION Synacuse, Ks. CITY Dallas STATET ZIP75244 TYPE AND PURPOSE OF JOB PTA												
CITY Dallas STATET ZIP75244 TYPE AND PURPOSE OF JOB PTA												
DATE OF SAL	E3-	23	-22	TRU	JCKN	10,228	-660	-20 COU	NTY Hamilton	STATE /	55.	
GAINESVILLE, TX WICHITA FALLS, TX MIDLAND, TX EL RENO, OK LIBERAL, KS												
TIME	RAT (BPN					PRESSURE (PSI) TUBING CASING			DESCRIPTION OF OPERATION AND MATERIALS			
9:45		,	(GAL)			TODI		Ontonito	On Location & Safety Meeting			
10:24									Pump 1925× @13.6#		1	
10:40	2.9	7	49.9 sher			350	2		300# Hulls, 6014014			
10:10			2.05/41	1					Jopoff w/ 85×			
10:26			5.2.stur	1					Top off B, S. w/ 205× @13.6#			
10:30	-			1					Job Complete	Call States		
								Sec. 1				
				-				and the		and the second		
PERSONNEL QUANTITY UNIT				CODE								
Daniel Bec	k	1	130	Mile	2	1000	M.1	leage -	Pickup . Per Mile	\$5,31	690.30	
Danny Maka	ne	2	.60	Mile	2	1010	Mil	eage -	Equip. Mileage - Per Mile	12	2158.00	
			1	Perw	ell	5622	5622 Pumping Service Charge -1 2,315.25 2,315.2					
		2	20	Persa						the second party of the se	3,638.80	
		3	00	Perh	65	5862	Cor	tton Se	eed Hulls	\$1.05	315.00	
LOC: Y	N			1.1.1								
All accounts are pas				1								
30 days following to of invoice. A finance			1						and the second			
of 11/2% per month												
annual percentage be charged on all p										HOLE I		
accounts.			Anna Marina Anna Anna Anna Anna Anna Anna Anna A					TOTAL	8,661	NAME AND ADDRESS OF TAXABLE PARTY OF TAXABLE PARTY OF TAXABLE PARTY OF TAXABLE PARTY.		
PACKER DEPTH				thei	invoi	ce date. A	y invoice with a discount must be fter 60 days the discount will be re	paid within 60 emoved and th	days of e invoice			
PERFORATIONS will reflect the full price.												
CASING SIZE	4	12'	'			V	0		Q - Burn			

- haver

CUSTOMER SIGNATURE & DATE

**TUBING SIZE**