KOLAR Document ID: 1639745

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 -					
Address 1:			I .	•	Twp S. R East West				
				Feet from					
City:				Feet from East / West Line of Section					
Contact Person:			Footage	Footages Calculated from Nearest Outside Section Corner:					
Phone: ()				□ NE □ NW	SE SW				
Water Supply Well ENHR Permit #: Is ACO-1 filed? Yes Producing Formation(s):	Other: Ga S No If not, i	SWD Permit #: as Storage Permit #: swell log attached? Yes [nother sheet) Bottom: T.D.	Lease N Date We The plug	County: Well #: Date Well Completed: (Date) by: (KCC District Agent's Name)					
De	pth to Top:	Bottom: T.D	""						
De	pth to Top:	Bottom:T.D	——— Plugging	g Completed:					
Show depth and thickness	ss of all water, oil and gas	formations.							
Oil, Gas or V	Water Records		Casing Record (Surface, Conductor & Production)						
Formation	Content	Casing	Size	Setting Depth	Pulled Out				
		plugged, indicating where the muter of same depth placed from (but it is a first from the muter of same depth placed from (but it is a first from the muter of same depth placed from the same depth placed from the muter of same depth placed from the same depth placed from t	·		ods used in introducing it into the hole. If				
Plugging Contractor License #: Nar				:					
Address 1:			_ Address 2:						
City:			State:						
Phone: ()									
Name of Party Responsil	ble for Plugging Fees:								
State of	Cou	unty,	, SS.						
	(Print Na	ma)	E	mployee 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 7TH PO Box 92 EUREKA, KS 67045 (620) 583-5561

Authorization by Dean



Cement or Acid Field Report						
Ticket No.	6176					
Foreman	David Gardner					
Camp	Euroka					

Sales Tax

Total

									-			0
Date		Cust. ID#	Leas	se & Well Number		Section	Tov	vnship	Range	Cou	inty	State
1-14-22 1217 Brooks # 1-13									Cow	Cowley		
Customer Safe				Safety	Unit#		Driv		Unit #	/	Driver	
Val Energy INC.				Meeting D6	105		Brok					
Mailing Add		3/	1 51 6 .	1 1110	JH	110		Pron	- ()			
City	N.	Marke	State	fe ///0 Zip Code	BW							
Wich	lita		State	67202				7				
	~	-	well Hole Der	oth		Slurry Vol.	30 1	Bb1		Fubing		
				ze		Slurry Wt/				Orill Pipe		
Casing Depth Hole Size Casing Size & Wt. 5 1/2 Cement Left in Casing					Water Gal/SK			100	Other			
	Displacement Displacement PSI							200		ВРМ		
				lug set @ 21					51/2	" casine	pert	Cocated
@ 3/a/	0'=	4 411	S. Ris up	to 51/2" co	sine.	Brigk cir	cula	tion	w/8	Bb1 f	esh 1	water.
Mixed			100/40 Poz	mix Coment	w/ 2	1% Gel @	14	1/00/	wickl 1	1.40 = 30	Bbl	sluce.
			ens to sur	face in any	ulus	of 51/2"	. 5%	ut do	curl. C	Nait 30	mins	. Well
				complete. R								
))							
											4	dis.
											1	d .
		'.									i i	
												<u> </u>
Code	Qty o	or Units	Description	of Product or Serv	/ices				Uni	t Price		Total
	Qty o	or Units	Description of Pump Charg	of Product or Serv	/ices				+			
1/05	/	/	Pump Charg		vices				+	85.00	7	85.00
	/	or Units			vices				+		7	
C105	5	5	Pump Charg Mileage	е	vices				+	4.20	7 2	185.00
C105 C107	12	0 SKS	Pump Charg Mileage		vices				+	185.00 4.20 14.75	17	70.00
C105	5	0 SKS	Pump Charg Mileage	е	/ices				+	4.20	17	185.00
C105 C107 C203 C206	12 411	0 SKS	Pump Charg Mileage 60/40 Por Gel 4%	e mix Cemant					+	14.75 -28	17	70.00
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_ Title Co / Rep.