KOLAR Document ID: 1641294

**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 #:  |                            |   | I API         | No. 15 -  |  |  |
|---|----------------------------|---|---------------|---|--|--|
| Name:   |                            |   |               | Spot Description:   |  |  |
| Address 1:  |                            |   |               |   | Гwp S. R East West                           |  |
| Address 2:  |                            |   |               | Feet from   |  |  |
| City:   | State:                     | Zip:+   |               | Feet from   |  |  |
| 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 #:  ENHR Permit #: Gas Storage Permit #: |                            |   |               | County:   |  |  |
| Is ACO-1 filed? Yes No If not, is well log attached? Yes No   |                            |   |               | The plugging proposal was approved on: (Date)               |  |  |
| Producing Formation(s): List All (If needed attach another sheet)   |                            |   |               | by: (KCC <b>District</b> Agent's Name)  Plugging Commenced: |  |  |
| Depth to Top: Bottom: T.D   |                            |   |               |   |  |  |
| Depth to Top: Bottom: T.D   |                            |   |               | Plugging Completed:   |  |  |
| Depth to  | Тор: Во                    | ttom: T.D   | —   `         |   |  |  |
| Show depth and thickness of a   | all water, oil and gas for | mations   |               |   |  |  |
|   |                            |   | Casing Record | g Record (Surface, Conductor & Production)                  |  |  |
| Formation   | Content                    | Casing  | Size          | Setting Depth   | Pulled Out                                   |  |
|   |                            | , ,   |               | 0 1   |  |  |
|   |                            |   |               |   |  |  |
|   |                            |   |               |   |  |  |
|   |                            |   |               |   |  |  |
|   |                            |   |               |   |  |  |
|   |                            |   |               |   |  |  |
|   | •                          | gged, indicating where the muc<br>of same depth placed from (bo |               |   | ods used in introducing it into the hole. If |  |
| Plugging Contractor License #:  |                            |   | Name:         | e:  |  |  |
| Address 1: Addres   |                            |   |               |   |  |  |
| City:   |                            |   | State         | e:  |  |  |
| Phone: ( )  |                            |   |               |   |  |  |
| Name of Party Responsible fo  | r 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.