KOLAR Document ID: 1650144

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:					escription:			
Address 1:					Sec Tw	vp S. R East West		
Address 2:					Feet from			
City:				Feet from East / West Line of Section				
Contact Person:				Footage	es Calculated from Neares	st Outside Section Corner:		
Phone: ()					NE NW	SE SW		
Type of Well: (Check one)		OG D&A Cathodi SWD Permit #:		,		Well #:		
ENHR Permit #:	Gas Sto	rage Permit #:		Date Well Completed:				
Is ACO-1 filed? Yes	No If not, is well	log attached? Yes				oved on: (Date)		
Producing Formation(s): List A	ll (If needed attach another	sheet)				(KCC District Agent's Name)		
Depth to	Top: Botto	m: T.D		Plugging	a Commenced:			
Depth to	Top: Botto	m: T.D		00 (•			
Depth to	Top: Botto	m:T.D	'	i iuggiiis	g completed.			
Show depth and thickness of a	all water, oil and gas forma	ations.						
Oil, Gas or Water	Records		Casing Re	ng 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			Name:	:				
Address 1:			Address 2:					
City:			;	State:		Zip:+		
Phone: ()								
Name of Party Responsible for	r Plugging Fees:							
State of	County, _			, SS.				
	•				Employee of Operator or	Operator on above described		
	(Print Name)			⊑	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 7TH PO Box 92 EUREKA, KS 67045 (620) 583-5561



Cement or Acid Field Report							
Ticket No. 6470							
Foreman	David Gardner						
Camp <u></u>	reka						

4PI	# 15	- //	1-5	205	58

Date	Cust. ID#	Leas	se & Well Number		Section	Township	Range	County	State
6-14-22	1397	Weede	1 41-28		28	215.	12 E.	Lyca	KS
Customer				Safety	Unit#	Dri	ver	Uniť #	Driver
Mull Dr.	Mine Co	rad Wines A	twee	Meeting	105	J.5 *	c //		
Mailing Address			4.4.1.4	1 26	113	Pes	ker		
1700 N. 13	Vaterfre.	of PKWY.	Bldg 1200	J.H BiU					
City		State	Zip Code						
Widita		<u>I</u> KS	67206						
Joh Type Su	cfore	Hole Der	oth <u>57 ' <i>K.1</i></u>	₹.	Slurry Vol.	12 Rb1	Tul	oing	
Casing Depth			ze <u>/2///</u>		Slurry Wt			-	
					-			II Pipe	
Casing Size & W			eft in Casing	<u>/</u>	Water Gal/SK		Oth	ner	
Displacement	<u> 274 Bbl</u>	Displace	ement PSI		Bump Plug to		BP	М	
Remarks: <u>S</u>	fet & Mrs	two Re	10 to 8 3/2	Cosia	e Prak	Circulatio	n est	5 Bbl Par	sti water.
Muxed 5	T SUS (Mas a O	went 15/3	Z (66)	, 24. 60	16153	Legt, 410	181.35 = 12	. B61
there Di	splace 1	1 270 60	1 fresh wate	2. Wa	A dewar	Clase Car	2 2 25 x3.	Good come	er f
atturne to	Suche	4 = 3 86	I dury he	2/ t -	Tele roma	Wete Ris	Lusus.		
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Code	Qty or Units	Description of Product or Services	Unit Price	Total
C101	1	Pump Charge	950.00	950.00
1167	35	Mileage	5.60	175.00
CZ00	50 sks	Class A Coment	/ P.55	927.50
C205	140 th	Caclz 3%	.75	105.00
CZ06	950	Gell 2%	.30	28.50
C108A	2.35 Tens	Ten Mileage - 35 miles	enfe	390.00
		Thank You	Sub Total	2,576.00 132.78
		7.5%	Sales Tax	79.57
Authoriz	ation $\frac{12y}{2}$	inny Gulick Title C+6 Delg - Tool Pusher	Total	2,522.79