

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 #: _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

Type of Well: (Check one) ☐ Oil Well ☐ Gas Well ☐ OG ☐ D&A ☐ Cathodic☐ Water Supply Well ☐ Other: _____ ☐ SWD Permit #: _____☐ ENHR Permit #: _____ ☐ Gas Storage Permit #: _____Is ACO-1 filed? ☐ Yes ☐ No If not, is well log attached? ☐ Yes ☐ No

Producing Formation(s): List All (If needed attach another sheet)

_____ Depth to Top: _____ Bottom: _____ T.D. _____

_____ Depth to Top: _____ Bottom: _____ T.D. _____

_____ Depth to Top: _____ Bottom: _____ T.D. _____

API No. 15 - _____

Spot Description: _____

____ - ____ - ____ Sec. ____ Twp. ____ S. R. ____ ☐ East ☐ West_____ Feet from ☐ North / ☐ South Line of Section_____ Feet from ☐ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☐ NE ☐ NW ☐ SE ☐ SW

County: _____

Lease Name: _____ Well #: _____

Date Well Completed: _____

The plugging proposal was approved on: _____ (Date)

by: _____ (KCC District Agent's Name)

Plugging Commenced: _____

Plugging Completed: _____

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: _____

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

Elite Cementing & Acidizing of KS, LLC
PO Box 92
Eureka, KS 67045



30 day

Date	Invoice #
6/24/2022	6490

V67045

Bill To	
McCoy Petroleum Corporation 9342 E Central Wichita, KS 67206-2573	
N030ZZ	
Customer ID#	1435

60's

7/26/22

Job Date	6/21/2022
Lease Information	
Norris A #1-9	
County	Sumner
Foreman	KM

			Terms	Net 15
Item	Description	Qty	Rate	Amount
C101	Cement Pump-Surface	1		
C107	Pump Truck Milcage (one way)-2nd well in field	0		
C203	Pozmix Cement 60/40	220		
C205	Calcium Chloride	570		
C206	Gel Bentonite	380		
C209	Flo-Seal	50		
C108B	Ton Milcage-per mile (one way)	851.4		
D101	Discount on Services			
D102	Discount on Materials			
111915 Pozmix Cement to Set 8 5/8" surface casing				

We appreciate your business!

Phone #	Fax #	E-mail
620-583-5561	620-583-5524	rene@elitecementing.com

Send payment to:
Elite Cementing & Acidizing of KS, LLC
PO Box 92
Eureka, KS 67045

Subtotal

Sales Tax (7.5%)

Total

Payments/Credits

Balance Due

Camp EUREKA

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State
6-21-22	1435	NORRIS A [*] 1-9	9	33S	1E	Sumner	KS
Customer McCoy Petroleum			Safety Meeting LM AM SF	Unit #	Driver	Unit #	Driver
Mailing Address 7342 E. Central				104	ALAN M.		
City Wichita				110	SHANNON F.		
State KS							
Zip Code 67206							

Remarks: SAFETY Meeting: Rig up to 8 5/8 CASING. BREAK Circulation w/ 10 BBL Fresh water. Mixed 220 SKS 60/40 Pozmix Cement w/ 3% CACL₂, 2% GEL, 1/4" FibreSeal @ 14.8" /gal = 49 BBL Slurry. Displace w/ 16 BBL Fresh water. Shut casing in. Good Cement Returns to Surface = 13 BBL Slurry to lit. Job Complete. Rig down.

I agree to the payment terms and conditions of services provided on the back of this job ticket. Any amendments to payment terms must be in writing on the front of this job ticket or in the Customer's records at ELITE's office.

Elite Cementing & Acidizing of KS, LLC
PO Box 92
Eureka, KS 67045



30 day

Date	Invoice #
6/30/2022	6530

V67045

Bill To	
McCoy Petroleum Corporation 9342 E Central Wichita, KS 67206-2573	
N03022	
Customer ID#	1435

60's

8-2-22

Job Date	6/29/2022
Lease Information	
Norris A #1-9	
County	Sumner
Foreman	KM

			Terms	Net 15
Item	Description	Qty	Rate	Amount
C103	Cement Pump-Plug (new well)	1		
C107	Pump Truck Mileage (one way)	90		
C203	Pozmix Cement 60/40	145		
C206	Gel Bentonite	500		
C108B	Ton Mileage-per mile (one way)	561.6		
D101	Discount on Services			
D102	Discount on Materials			
111917 Pozmix Cement 60/40 & Pump Plug				

We appreciate your business!

Phone #	Fax #	E-mail
620-583-5561	620-583-5524	rene@elitecementing.com

Send payment to:
Elite Cementing & Acidizing of KS, LLC
PO Box 92
Eureka, KS 67045

Subtotal

Sales Tax (7.5%)

Total

Payments/Credits

Balance Due

fr

ELITE
CEMENTING & ACID SERVICE, LLC

Camp *Eureka*

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State
6-29-22	1435	NORRIS A #1-9	9	33S	1E	Sumner	KS
Customer McCoy Petroleum Mailing Address 9342 E. CENTRAL City Wichita State KS Zip Code 67206			Safety Meeting	Unit #	Driver	Unit #	Driver
			KM	104	ALAN M		
			AM	113	BROKER W.		
			BW				

Remarks: Safety Meeting: Rig up to 4 1/2 DRILL pipe Plug well as following.

35 SKS @ 4185'
35 SKS @ 315'
25 SKS 60' to SURFACE
30 SKS R.H.
20 SKS M.H.

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