KOLAR Document ID: 1677570

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 #: SWD Permit #: ENHR Permit #: Gas Storage Permit #: Gas Storage Permit #: SWD Permit #: SWD 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) Storm: T.D. Storm: T.D. Depth to Top: Bottom: T.D. Storm: T.D. Storm: Sto	County: Well #: Lease Name: Well #: Date Well Completed: The plugging proposal was approved on: (Date) by: (KCC District Agent's Name) Plugging Commenced: Diversion Completed:
Depth to Top: Bottom: T.D	Plugging Completed:

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

Oil, Gas or Water Records		Casing Record (Surface, Conductor & Production)		tion)	
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

Phone 785-483-1071 Cell 785-324-1041	Home Office P	.O. Box 32 Russell, KS 67665 No. 3060
Sec.	Twp. Range	County State On Location Finish
Date 10/7/22 13	10 12	Osborne Kansas 5:15am
_	-	Location Luray SN SE 1/25 Winto
Lease Tenny Son	Well No. 1-/ 3	Owner
Contractor South und Do	1/ling Rig B	To Quality Oilwell Cementing, Inc.
Type Job Surface		You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.
Hole Size 1214	T.D. 225	Charge M G Oil
Osg. 858	Depth 2 25	Street
fbg. Size	Depth	City State
ΓοοΙ	Depth	Sato
Cement Left in Csg. 15	Shoe Joint 15	The above was done to satisfaction and supervision of owner agent or contractor Cement Amount Ordered 150 3% 3% cc 2% set
Meas Line	Displace 13-4	130 120 Pro CC 2 10 gel
EQUIPI		Common (20)
Pumptrk 16 No. Cementer Ja	ordan	Poz. Mix 30
Bulktrk / No. Driver Dryc		Gel.
ulktrk PU No. Driver Davi	2	Calcium 6
JOB SERVICES		Hulis
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lat Hole	······································	Flowseal
louse Hole		
entralizers		Kol-Seal Mud CLR 48
askets		
/V or Port Collar		CFL-117 or CD110 CAF 38
Ran 638 est. 2	irrulation and	Sand
Generated with	ling at 1	Handling 15 9
displaced	130 3KS 910	Mileage
Unspraced		FLOAT EQUIPMENT
		Guide Shoe
		Centralizer
		Baskets
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