KOLAR Document ID: 1729056

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	o. 15 -				
Name:				Spot Description:				
Address 1:								
				Feet from				
City:	State:	Zip:+		Feet from				
Contact Person:			Footag	Footages Calculated from Nearest Outside Section Corner:				
Phone: ()				□ NE □ NW □ SE □ SW				
Water Supply Well	Other:	OG D&A Cathod SWD Permit #:	County	County: Well #:				
ENHR Permit #:	Gas St	orage Permit #:	Date V	Date Well Completed:				
Is ACO-1 filed? Yes	No If not, is we	ell log attached? Yes	No The pl	The plugging proposal was approved on: (Date)				
Producing Formation(s): List	•	,	I *	by: (KCC District Agent's Name)				
Depth t	•	om: T.D	Pluggii	Plugging Commenced:				
Depth t	•	om: T.D	Pluggii	ng Completed:				
Depth t	o Top: Bott	om: T.D						
Show depth and thickness of	all water, oil and gas forn	nations.						
Oil, Gas or Wate	er Records		Casing Record (S	ing Record (Surface, Conductor & Production)				
Formation	Content	Casing	Size	Setting Depth	Pulled Out			
	. 0	ged, indicating where the muc of same depth placed from (bo	•		ods used in introducing it into the hole. If			
Plugging Contractor License	#:		Name:	e:				
Address 1:			Address 2:					
City:			State: _		Zip:+			
Phone: ()								
Name of Party Responsible for	or 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.



CEMENT										
Gustomer: Trimble Maclaskey							Nordmeyer 33-11		Ticket:	EP-10232
Cîty, State:					County: Woodson			Date:	8/28/2023	
Fiel	d Rep:	Brian				S-T-R:	30/25/14		Service:	P.T.A.
				•			.,			(manuf. Els.)
		nformatio	on			Capac				tment Fluid
Formation:		Casing / Tubing:		bbls/ft		roduct	GPT Gal			
Casing: In		Displacement:		0.0 bbls	Water					
Tubing: 2 7/8 in			Pressure	e Test	Gel					
Treatment Via:				Iron Test:	psi	Xlink				
Perforations			Max Pressure:		psi	KCI				
Top Perf: ft			Proppa	nt (#)	Biocide	,				
Bottom Perf: ft			20/40 -		12/20	Surfacta				
Shots Per Foot: spf			16/30 -		8/12 -	Breake	r			
Total Shots: shots			Divers			Acid				
		L		l	Salt	-	Balls			
				64			Della			
Time	Doto	PSI	PPG	Stage	Stage BBLs	Total BBLs			emarks	
Time	Rate	i (c)	- FFG	Pounds	DDIES	פשמם			Salitati AS	
					-	_	60/40 Pozmix with 4%	gel = 11 BBl slurr	y = 3 BBI over pi	00# 2.2 BPM mix & pump 40 sks pe volume. PSI @ 1,000# with Fear down. Thanks! Russell
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CREW		U P		<i>y</i> .	, <u>, , , , , , , , , , , , , , , , , , </u>					
Treater / Foreman: Russell McCoy		1202		Average Rate (bp	m) Max	Rate (bpm)	Total Proppant (#).			
Pump Operator: Alan Mead		1212		0.0	3.7 2.70	0.0	0			
Sand: Steve Mead		ıd	1103		Average PSI	Max F	ressure (psl)	Total Load (bbls)		
	Water: Jason McCoy		Coy	1005		0		0	0	
Acid:										