KOLAR Document ID: 1779385

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 Tw | p S. R East West | | |
| Address 2: | | | | | Feet from | | | |
| City: | | | | 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 #: | | | | County: Well #: | | | | |
| ENHR Permit #: Gas Storage Permit #: | | | | Date Well Completed: | | | | |
| Is ACO-1 filed? Yes | No If not, is well | log attached? Yes | | The plugging proposal was approved on: (Date) | | | | |
| Producing Formation(s): List A | II (If needed attach another | sheet) | | by: | | (KCC District Agent's Name) | | |
| Depth to | Top: Botto | m: T.D | | Plugging Commenced: | | | | |
| Depth to | • | m: T.D | | 00 0 | | | | |
| Depth to | Top: Botto | m:T.D | | | y | | | |
| | | | | | | | | |
| 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 #: | | | | | | | | |
| Address 1: | | | Address 2: | : | | | | |
| City: | | | ; | State: | | Zip:+ | | |
| Phone: () | | | | | | | | |
| Name of Party Responsible for | r Plugging Fees: | | | | | | | |
| State of | County, _ | | | , ss. | | | | |
| | <i>3</i> , – | | | _ | implayed of Onesates | Operator on obeyed decertibed | | |
| (Print Name) | | | | E | 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.



TREATMENT REPORT

| Anid | 9+ | No | | |
|------|----|----|--|--|

| 1 | -l 1 | | | | Type Treatment: | | Type Fluid | Sand Size | Pounds of Sand | |
|--|------------------------|--|--------------|--|--------------------------------------|-----------------|-------------|------------|--|--|
| | | | |). No | | | | | | |
| Company K+N PETRO. Well Name & No. SCHLESSIGER # 1 | | | | | | | | | | |
| | | | | | i | . • | | | | |
| Location | | | Field | | | Bbl. /Gal | | | | |
| County SA | ETON COUNT | TY | State4.2 | <u> </u> | 1 | Bbl. /Gal | | | | |
| | | | | | Treated from | ft. | to | ft. No. | ſt | |
| | | | | Set atft. | | | | | | |
| Formation: | | | Perf | to | from | ft. | to | ft. No. | ft | |
| Formation: Perf. to | | | | Actual Volume of Oll/Water to Load Hole: | | | | | | |
| Formation: | | | Perf | to | t. Pump Trucks. No. Used: Std. # 323 | | | | | |
| Liner: Sixe | Type & Wi | . | Top atft | . Bottom atft. | | | | | | |
| Ceme | ented: Yes/No. | Perforated fr | om | ft. toft. | Auxiliary Equipme | ent Buck CER | NENT \$ 36 | 0 | ••••••••••••••••••••••••••••••••••••••• | |
| Tubing: Size & | w. 27/2~ | ······ | Swung at | ft. | . Packer: Set at | | | | | |
| Perf | orated from | | ft. to | | Auxiliary Tools | | | | | |
| Ouen Hole Size | | T. D | | B. toft. | | Muterials: Type | | | | |
| | • | | | | Treater | 1 Hox | Nerrick | | | |
| | lepresentative PRES | | Total Fluid | | | | | | | |
| TIME a.m/p.m. | Tubing | Casing | Pumped | | | REMARK | 8 | | | |
| 8:43 | | | | AOLITSA, RIG | 110 4 715 040 | - 1.21.16 B | 33001 | | And the second s | |
| | | | 10 1 22 | START GEL, 3 | | | 3300 | | - | |
| 9:58 | <u>ø</u> | | 19 2 BBL | START GEL, 3 | - 117-6-1 | CHIP-VAC | 4/1 200d | 11.016 7 | 20M 0 29 | |
| 10:15 | | | 32 2 BBL | START 60140 PO | 2 4 13 (SEL | Surgey Clou | 3×J+2006 | HULLS 52 | DPM (0 20 4 | |
| | | | 2034 22 | ISIP-VAC, PULL START GOLYOPOZ | TUBING TO 13 | OI TIE | N7017 | 4 34 | 20m 0 0x+ | |
| 11:27 | <u>_Ø</u> | | 30914 BISL | BROKE CIRC. O | 2573 (HEL >1 | MERY COOST | - 7 200# C | 1191 == 0 | OF TO 15 | |
| | | | 0.07 | | | | ubing to | IID. + TIE | DATUIL | |
| 12:05 | <i>D</i> | | 3 BBL | BREAK CIRCULA | TION, 3 GISL T | BEERIC | -> (= | | - 44.5 444 | |
| 12:07 | | | ZOZ BBL | START GO/43 PO | | | | | E, 1517-VAC. | |
| -: | | | | POOH + TOP 0 | | | | | | |
| 1:53 | | | | WASH UP, TRAK | | • | | =AVINOS | | |
| | | | _ | | uc, out | | 0 010 | | | |
| | | | | | 1 0119 | -6) 12:4 | Opr, | | | |
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