KOLAR Document ID: 1787361

**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 -				
				Spot Description:				
Address 1:			I .					
City:	State:	Zip: +						
Contact Person:			Footage	Footages Calculated from Nearest Outside Section Corner:				
Phone: ( )				NE NW SE SW				
Water Supply Well ENHR Permit #: Is ACO-1 filed? Yes Producing Formation(s):	Other: Ga S No If not, i	SWD Permit #:  as Storage Permit #:  swell log attached? Yes [  nother sheet)  Bottom: T.D.	Lease N Date We The plug	County: Well #: Date Well Completed: (Date) by: (KCC District Agent's Name)				
De	pth to Top:	Bottom: T.D	""	Plugging Commenced:  Plugging Completed:				
De	pth to Top:	Bottom:T.D	——— Plugging	Plugging Completed:				
Show depth and thickness	ss of all water, oil and gas	formations.						
Oil, Gas or l	Water Records		Casing Record (Su	Casing Record (Surface, Conductor & Production)				
Formation	Content	Casing	Size	Setting Depth	Pulled Out			
		plugged, indicating where the muter of same depth placed from (but it is a first from the muter of same depth placed from (but it is a first from the muter of same depth placed from the same depth plac	·		ods used in introducing it into the hole. If			
Plugging Contractor Lice	ense #:		_ Name:	e:				
Address 1: Add				ss 2:				
City:			State:					
Phone: ( )								
Name of Party Responsi	ble for Plugging Fees:							
State of	Cou	unty,	, SS.					
	(Print Na	ma)	E	mployee 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

								Acid Stage No.			
Date	7/2/2024	Dietrict GD		*	Type Treatment:	Amt.	Type Fluid	Sand Size			
Company JONES & BUCK				Bkdown		7,7-1.0.0	3811U 312E	Pounds of Sand			
Well Name & No. MILLER #1					Bbl./Gal.						
Ocation					Bbl./Gal.						
Court HODGE (A)					Bbl./Gal.						
			State KS		Flush	Bbl./Gal.			,		
					Treated from		ft +0				
Casing: Size 5 1/2 Type & Wt. Set at ft.				-		ft. to	ft. No	o. ft. 0			
Perf. to				from		t. to		. ft. 0			
Formation: Perf. to				Actual Volume of Oil	/ Water to Load Ho	le:					
Formation	-		Perf.	to			-		Bbl./Gal.		
Liner: Si	ze Type 8	. Wt	Top at ft.	Bottom at fr	Pump Trucks. No.	Used: Std.	318 s <sub>2</sub>	-			
Liner: Size Type & Wt Top at ft. Bottom at ft.  Cemented: Yes ▼ Perforated from ft. to ft.				Pump Trucks. No. Auxiliary Equipment		Ju.	Tv.	vin			
Tubing: Size & Wt. 2 7/8 Swung at ft.				Personnel TIM ROS							
	Perforated f	rom	ft. to	ft.	Auxiliary Tools				- t		
_					Plugging or Sealing M	laterials: Type					
Open Hole	Size	T.D	ft. P	B. toft.				Gals.	lb.		
								303.	10.		
Company	Representative				Treater		TIM DE	TTFR			
TIME		SURES	Total Fluid Pumped								
a.m./p.m.	Tubing	Casing	The same of the sa								
				MIX 50 SKS AND	100# OF HUI	LLS AT 1300	)'				
									THE STATE OF THE S		
				MIX 100 SKS @ 8	300' TO CIRCL	ULATE	A CONTRACTOR OF THE PARTY OF TH				
				TOP OFF 5 1/2 CASING WITH 20 SKS							
				,		20 010					
				MIX 8 SKS DOWN 8 5/8 SURFACE PIPE PRESSURE UP TO 300#							
						, told the little	KESSOTIE OF	10 300#			
				TOTAL SKS USED	178 60/40 4	% GFI					
						70 022					
				JOB COMPLETE							
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