

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.
 _____ Employee of Operator or Operator on above-described well,
 (Print Name)

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

**CEMENT TREATMENT REP**

Customer: TDR Construction	Well: Beckmeyer, #10,#14	Ticket: EP14346
City, State:	County: Franklin,KS	Date: 7/25/2024
Field Rep: Lance Town	S-T-R:	Service: Plugs

Downhole Information	
Hole Size :	in
Hole Depth:	ft
Casing Size:	in
Casing Depth:	740-780 ft
Tubing / Liner:	in
Depth:	ft
Tool / Packer:	
Tool Depth:	ft
Displacement:	bbbls

Calculated Slurry - Lead	
Blend:	H-Plug
Weight:	13.0 ppg
Water / Sx:	6.5 gal / sx
Yield:	1.50 ft ³ / sx
Annular Bbls / Ft.:	bbs / ft.
Depth:	ft
Annular Volume:	0.0 bbls
Excess:	
Total Slurry:	bbls
Total Sacks:	sx

Calculated Slurry - Tail	
Blend:	
Weight:	ppg
Water / Sx:	gal / sx
Yield:	ft ³ / sx
Annular Bbls / Ft.:	bbs / ft.
Depth:	ft
Annular Volume:	0 bbls
Excess:	
Total Slurry:	0.0 bbls
Total Sacks:	0 sx

TIME	RATE	PSI	BBLs	TOTAL BBLs	REMARKS
8:00 AM			-	-	On location, Held safety meeting
				-	
				-	#10 Hooked to 1" pipe ran into well, Established circulation
				-	Mixed and pumped 18 sks of H-Plug cement
				-	Rig pulled 1" from well
				-	Topped off well with 5 sks, hooked to the casing and squeezed away 6 sks, shut in well
				-	
				-	#14 Hooked to 1" pipe ran into well, Established circulation
				-	Mixed and pumped 15 sks of H-Plug cement
				-	Rig pulled 1" from well
12:00 PM				-	Topped off well with 5 sks, hooked to the casing and squeezed away 5 sks, shut in well

CREW		UNIT	SUMMARY		
Cementer:	Garrett S.	97	Average Rate	Average Pressure	Total Fluid
Pump Operator:	Nick B	209	0.0 bpm	- psi	- bbls
Bulk #1:	Drew B	247			
Bulk #2:	Cooper R	110			