KOLAR Document ID: 1803588

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 #:	County: Well #: Lease Name: Well #:
Is ACO-1 filed?	The plugging proposal was approved on: (Date)
Producing Formation(s): List All (If needed attach another sheet)	by: (KCC District Agent's Name)
Depth to Top: Bottom: T.D	Plugging Commenced:
Depth to Top: Bottom: T.D	Plugging Completed:
Depth to Top: Bottom: T.D	· · · · · · · · · · · · · · · · · · ·

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			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	r 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

FRANKS Oilfield Service ♦ 416 Main St., P.O. Box 225, Victoria, KS 67671 ♦ 24 Hour Phone (785) 639-7269

♦ Office Phone (785) 639-3949

LOCATION HANIE

TICKET NUMBER

1410

• Email: franksoilfield@yahoo.com FOREMAN Tam Williams

DATE___

FIELD	TICKET	&	TREATMENT	REPORT

and the second se	С	E	M	E	N	Т
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CLITENT								
DATE	CUSTOMER #	WELI	L NAME & NUME	BER	SECTION	TOWNSHIP	RANGE	COUNTY
11-15-24	33269	Kosta	~ ti	16	32	85	29 N	Sheri dan
CUSTOMER	1 4 4 4	and the second	and the second	BARY AND BU				
K		Mest Khi	6 Contraction		TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDR	ESS				103	Chris K		
					201	Tomw		la
CITY		STATE	ZIP CODE			Design design		
		and the second	Security (sec					
JOB TYPE 100	of Aluq	HOLE SIZE		HOLE DEPTH		CASING SIZE & W	EIGHT	K
CASING DEPTH						a de la dela de la dela del	OTHER	
SLURRY WEIGH	Т	SLURRY VOL		WATER gal/sk	< <u> </u>	CEMENT LEFT in (
DISPLACEMENT		DISPLACEMEN	T PSI	MIX PSI		RATE		
REMARKS:	Rigged 1	in on i	vell. Mir	10 51	coment	+ top of	s all h	che.
REMARKS: Rigged up on well. Mix 1051 cement + top off all have. Washed up moved off								
		1						
and the set							A REAL PROPERTY AND	and the second
Thats Tom + Chris								
					- An Charles			
and the second	and the second se			and the second second		Contraction of the second second		Statistics and the second second

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
ploo 1		PUMP CHARGE		
M001	16	MILEAGE		
11002	1445 tons	Ton Milege Delivers		
(13010	1051	6440 490gol 44# 5103001		
	the same in the second s			
			SALES TAX	
	A OR		ESTIMATED TOTAL	

AUTHORIZATION_

TITLE_

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.

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MALLAR	DJV
REPORT TO BLT INVESTMENTS	WELL NAME & NO. KOSTER #6
ATIN: LEON PTEIFER	COUNTY SHERIDAN
LAX NUMBER 913-627-3651	API NO.
MORNING	REPORT
DATE 8-27-960 A.M. ACTIVI	TY
DEPTH W/ HBS ON BIT #	BIT WT. STRING WT.
PEMP PASPMBRPMDEV	. ET. STRAP
MUD- VIS WE CHL PH	LCM #/BBL WALL CAKE
DATEY MUD COST 4. CUMU	
LEAC TANK: YES/NO LOST CIRCULATION:	
WATER DELIVERY DAILY LOAD	
MATTR DELIVERY TOTALLOADS	
A RIG TIME RIG TIME	
Plugged:	
25 5× @ 24	40'
100 SX (3 7	7600'
40 5× @ 310) / .
10 SX (2) 40'	with wiper plug
15 SV Fathelo	, 10 SX mousehole
200 + 6 / 60	1 D SX MOUSPHOLE
200 Total 60/	40 Pozmix, 620 gel, 4 # floseal per sact.
TRA A AND A	4 # floseal per sack
P. L. M. 1:00 pm 8-26-96	
	4000 chl. Th seservepit 500661 free fluid
21 - anno 12 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	500 661 free fluid

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