KOLAR Document ID: 1804265

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

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:			2:	
City:			State:	_ Zip: +
Phone: ()				
Name of Party Responsible for 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.

Submitted Electronically

Well Name & No. C	OLLEE #1			The second s	Bbl./Gal		
		Field			Bbl./Gal.		
County RENO		State KS	and the second second	Flush	Bbl./Gal. Bbl./Gal.		
			the second s	Treated from	ft. to	ft. No.ft	0
			Set at ft	t. from	ft. to	ft. No. ft.	0
Formation:		Perf	to	from		ft. No. ft.	
		Perf.		Actual Volume of Oil /	Water to Load Hole:		Bbl./Gal.
Formation:		Perf.	to				
Liner: SizeTy	pe & Wt	Top atft	. Bottom atfi		Used: Std. 365 S	p Twin	a Barris and
Tubing: Size & Wt.	2 3/8	d from		t. Auxiliary Equipment			
Perforate	ed from	Swung at ft. to		t. Personnel TIM GRE			
			Π	t. Auxiliary Tools			
Open Hole Size	TD	ft. F	IP to	XXX CONTRACTOR OF CONTRACTOR OF CONTRACTOR	aterials: Type		
A COLORED TO A COL		^{1.}		t		Gals.	lb.
ompany Representative		KUD	-				
	-	KURT		Treater	and the second second	TIM DETTER	
n./p.m. Tubing	ESSURES	Total Fluid Pumped	A State State				
n./p.m. Tubing	Casing						
			IVIIX 50 SKS @ 1	1400' WATT 1F	IR TAGGED AT 11	35'	
	and the second			And the second second			
			MIX 50 SKS @ 9	900'		A CONTRACTOR	
		Charles and the second	MIX 180 SKS @	310' TO CIRC	ULATE FROM SUI	RFACE	and the second second
						Lenne and and a	
			TOTAL CKC LICE	D 200			
	Caller of States	and the second se	IUIAI NO UNE	11/80			
			TOTAL SKS USE	D 280	The second s		
			1.10				
			JOB COMPLETE				
			1.10				
			1.10				
			1.10				
			1.10				
			1.10				
			1.10				
			1.10				
			1.10				
			1.10				
			1.10				
			1.10				
			1.10				
			1.10				