

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.

(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



Kropf Lumber Inc
400 N Lancaster
PO Box 310
Hesston KS 67062
620-377-4951

4/14/2026 11:27 AM

BRCH:1000 *** INVOICE ***
CASHIER: CASH 2604-520665

ACCT # : CASH
JOB # : 0
NAME : CASH SALES

PC PORTLAND CEMENT 94#
4 EA 18.11 EA 72.44

SUBTOTAL 72.44

SALES TAX KESHV 8.50% 6.16

TOTAL 78.60

AMT PAID 78.60

CHANGE DUE 0.00

Thank you for your business!

PAYMENT METHOD[S]:

MasterCard 78.60

Una #3

RATZLAFF BROTHERS

09748

CONCRETE

Truck #: 07

WRAY RATZLAFF
620-245-1690

RATZLAFF@YAHOO.COM
1220 27TH AVENUE
CANTON, KS 67428

BIN RATZLAFF
620-245-8750

Customer: TP 0.1 # Gas

Billing Address:

City/County of Job: Clay

Job Location: Una #3

Date: 4/17/26

Pour Time Overage:

Winter Charge/Hot Water:

Mileage Charge: 90 # 585

NCA:

3% Credit Card Fee

Sealant

Admix
Product:

Total:

Mix: 22 sack

Yards: 665

Price/yd: \$375

Subtotal: \$3078.75

Discount: \$

Sales Tax: 75%

Total Amount Owed: \$3309.66

Charge ☒

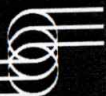
Paid ☐

Customer Signature:

We make deliveries inside curb line and on any or all property at the customer's risk only, and accept no responsibility for any or all damages associated with delivery of product by Ratzlaff Brothers Concrete. We will NOT be responsible for any quality issues on concrete exposed to de-icing chemicals. De-icing chemicals destroy concrete!

THANK YOU!

LOG-TECH



Gamma Ray / Neutron Log

DIGITAL LOG

Ph. (785) 625-3858

API No.

Company **Te-Pe Oil & Gas**

Well **Una No.3**

Field **Wakefield NE**

County **Clay**

State **Kansas**

Location

NE SE SE

Other Services
Perforate
Portable Mast

Sec: **10**

Twp: **9S**

Rge: **4E**

Elevation

Permanent Datum
Log Measured From
Drilling Measured From

Ground Level
Kelly Bushing
Kelly Bushing

Elevation **1221**
5 Ft. Above Perm. Datum

K.B.
D.F.
G.L. **1221**

Date **11/14/2006**

Run Number **One**

Type Log **GRN**

Depth Driller **1955**

Depth Logger **1933**

Bottom Logged Interval **1932**

Top Logged Interval **1300**

Type Fluid In Hole **Water**

Salinity, PPM CL **////**

Density **////**

Level **Full**

Max. Rec. Temp. F **96**

Operating Rig Time **1 Hr**

Equipment -- Location **008 | Pratt**

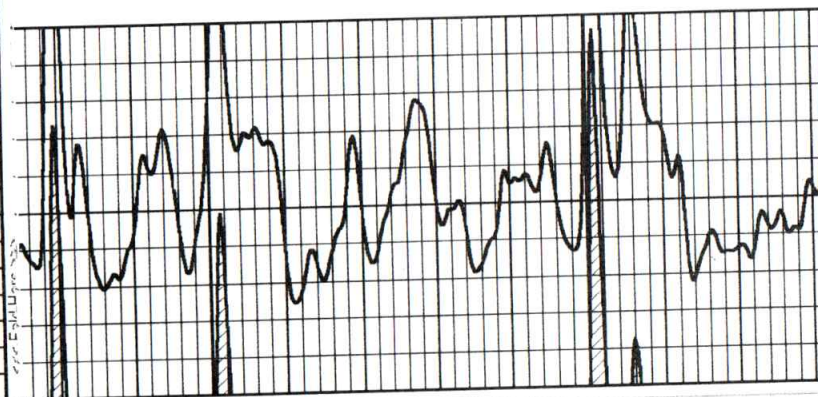
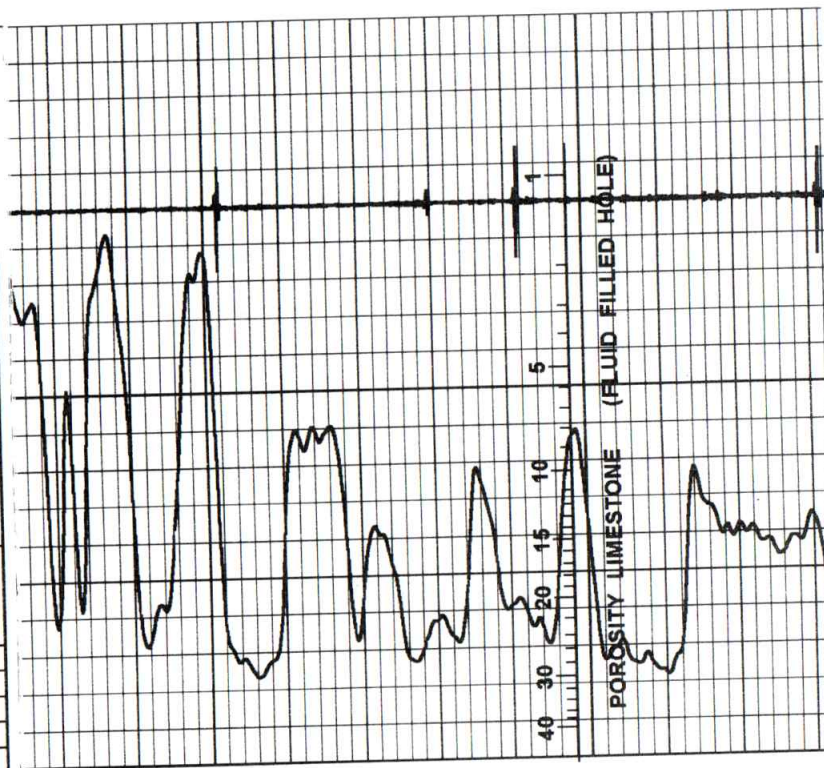
Recorded By **D. Hagan**

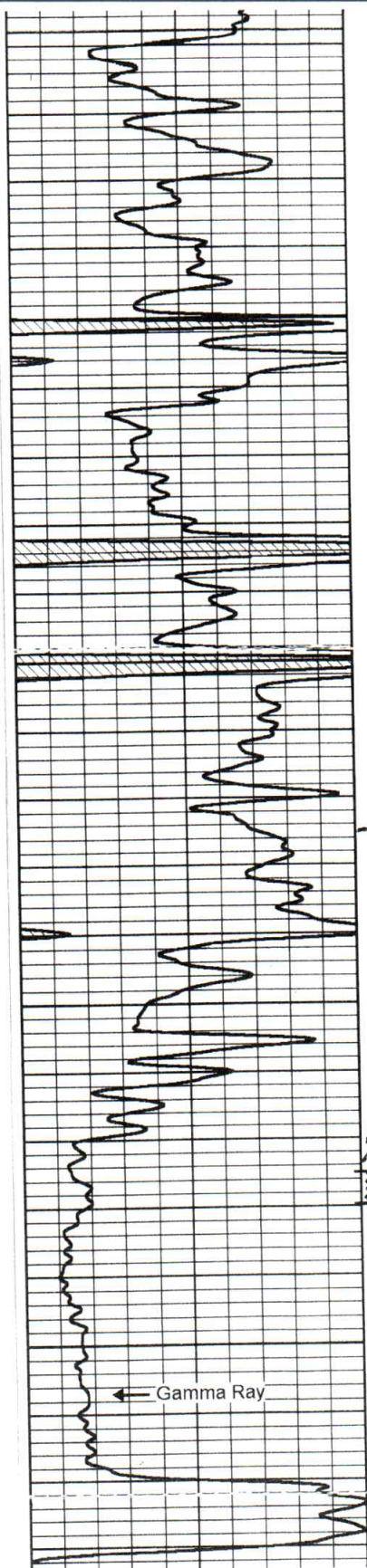
Witnessed By **Terry Bandy**

Borehole Record

Casing Record

Run No.	Bit	From	To	Size	Wgt.	From	To
				4.5		0	TD





1750

1800

1850

1900

ParBS.
1875-80

