

KANSAS CORPORATION COMMISSION RECEIVED
OIL & GAS CONSERVATION DIVISION KANSAS CORPORATION COMMISSION

Form CP-1
September 2003

WELL PLUGGING APPLICATION JUN 01 2004

This Form must be Typed
Form must be Signed
All blanks must be Filled

Please TYPE Form and File ONE Copy

CONSERVATION DIVISION
WICHITA, KS

API # 15 - 111-20418-00-00 (Identifier Number of this well). This must be listed for wells drilled since 1967; if no API # was issued,

indicate original spud or completion date 7/19/03

Well Operator: Wolverine Environmental Production LLC KCC License #: 33240
(Owner / Company Name) (Operator's)

Address: 1 Riverfront Plaza, 55 Campau NW City: Grand Rapids

State: Michigan Zip Code: 40503 Contact Phone: (616) 458 - 1150-ext 119

Lease: Whittington Well #: C4-26 Sec. 26 Twp. 17 S. R. 12 East West

Aprx. 30' N x 70' W E/2 - NE - SE Per CP-4 Spot Location / QQQQ County: Lyon

2010 Feet (in exact footage) From North / South (from nearest outside section corner) Line of Section (Not Lease Line)

400 Feet (in exact footage) From East / West (from nearest outside section corner) Line of Section (Not Lease Line)

Check One: Oil Well Gas Well D&A Cathodic Water Supply Well

SWD Docket # _____ ENHR Docket # _____ Other: _____

Conductor Casing Size: 8.625 Set at: 101 Cemented with: 50 Sacks

Surface Casing Size: 5.500 Set at: 2140 Cemented with: 110 Sacks

Production Casing Size: _____ Set at: _____ Cemented with: _____ Sacks

List (ALL) Perforations and Bridgeplug Sets: 1750.5'-1751.5'; 1956.5'-1957.5'; 1993.0'-1994.0'; 1998.5'-1999.5

Elevation: 1172 (G.L. / K.B.) T.D.: 2142' PBTD: 2100 Anhydrite Depth: _____
(Stone Corral Formation)

Condition of Well: Good Poor Casing Leak Junk in Hole

Proposed Method of Plugging (attach a separate page if additional space is needed): RIH w/tbg. work-string tag btm pull up 1 jnt.. MIRU Consolidated fill csg. w/gel. Pull up just above top perforation & set a 50' cement plug 1732'-11682'. POOH w/tgg. & MIRU Log Tech & shoot off csg. at 491' . Set 50' cement plug 491'-441' and set final cement from 350' to surface. (cement 50-50 poz 15.5#

Is Well Log attached to this application as required? Yes No Is ACO-1 filed? Yes No

If not explain why? _____

Plugging of this Well will be done in accordance with K.S.A. 55-101 et. seq. and the Rules and Regulations of the State Corporation Commission.

List Name of Company Representative authorized to be in charge of plugging operations: Exact Engineering Inc.

Phone: (918) 599 - 9400

Address: 415 S. Boston - Suite 734 City / State: Tulsa, Oklahoma 74103

Plugging Contractor: Consolidated Oil Well Services, Inc KCC License #: 34440 31440
(Company Name) (Contractor's)

Address: 2631 Eisenhower Ave. , Ottawa, Ks. 66067 Phone: (785) 242 - 4044

Proposed Date and Hour of Plugging (if known?): 5/7/04 3.00PM Plugged

Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator or Agent

Date: 4-30-04 Authorized Operator / Agent: Steven R. Hersh, EXACT Engineering Inc.
(Signature)

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

5/04

4/05

RECEIVED
KANSAS COMMISSION

JUN 27 2004

LOG-TECH, INC.

1011 240th Ave.

HAYS, KANSAS 67601

(785) 625-3858

12426

Date 7-7-04

CHARGE TO: W. W. ... LLC

ADDRESS _____

R/A SOURCE NO. _____ CUSTOMER ORDER NO. 1160

LEASE AND WELL NO. W. W. ... FIELD ...

NEAREST TOWN _____ COUNTY Lyon STATE KS

SPOT LOCATION _____ SEC _____ TWP. _____ RANGE _____

ZERO _____ CASING SIZE _____ WEIGHT _____

CUSTOMER'S T.D. _____ LOG TECH _____ FLUID LEVEL _____

ENGINEER _____ OPERATOR _____

PERFORATING				
Description	No. Shots	Depth		Amount
		From	To	

DEPTH AND OPERATIONS CHARGES					
Description	From	Depth To	Total No. Ft.	Price Per Ft.	Amount

MISCELLANEOUS			
Description	Quantity	Amount	
Service Charge			

PRICES SUBJECT TO CORRECTION BY BILLING DEPARTMENT

RECEIVED THE ABOVE SERVICES ACCORDING TO THE TERMS AND CONDITIONS SPECIFIED ON THE REVERSE SIDE TO WHICH WE HEREBY AGREE.

Code Ref.	Sub Total	
	Tool Insurance	
	Tax	

Customer Signature _____ Date _____



CONSOLIDATED
OIL WELL
SERVICES
AN INFINITY COMPANY

211 W. 14TH STREET, CHANUTE, KS 66720
620-431-9210 OR 800-467-8676

KANSAS

CONSERVATION DIVISION
WICHITA, KS

RECEIVED
KANSAS CORPORATION COMMISSION

JUN 01 2004

CONSERVATION DIVISION
WICHITA, KS

TICKET NUMBER 22087

LOCATION Ottawa

FIELD TICKET

DATE 5-7-04	CUSTOMER ACCT #	WELL NAME Whittington Ch-26	QTR/QTR 26	SECTION 17	TWP 12	RGE 24	COUNTY 24	FORMATION
CHARGE TO Wolverine Environmental				OWNER				
MAILING ADDRESS One Riverfront Plaza 55 Campaign Mill				OPERATOR				
CITY & STATE Grand Rapids MI 49503				CONTRACTOR Hurricane				

ACCOUNT CODE	QUANTITY OF UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
5403A	1	PUMP CHARGE plug one well of two		675 ⁰⁰
1118	17	Premium gel		200 ⁶⁰
5404		misc equipment		825 ⁰⁰
5609	5	pump truck time		600 ⁰⁰
5406	1/2 of 50	pump truck miles		56 ²⁵
5406X	1/2 of 50	flashed miles		81 ⁰⁵
BLENDING & HANDLING				
5407A		TON-MILES		246.50
		STAND BY TIME		
		MILEAGE		
		WATER TRANSPORTS		
5502 C.10	8	VACUUM TRUCKS		600 ⁰⁰
		FRAC SAND		
1124	142	CEMENT 50150 po2		937 ²⁰
		by/on 5.370	SALES TAX	65 ⁹⁹
ESTIMATED TOTAL				4287 ⁷⁹

Ravin 2790

CUSTOMER or AGENTS SIGNATURE [Signature] CIS FOREMAN Alan Mader

CUSTOMER or AGENT (PLEASE PRINT) _____ DATE 5-7-04

RECEIVED
CONSOLIDATED OIL WELL SERVICES, INC.

211 W. 14TH STREET, CHANUTE, KS 66620

620-431-9210 OR 800-467-8676

JUN 01 2004

CONSERVATION DIVISION
 WICHITA, KS

TICKET NUMBER **29083**

LOCATION Offawa

FOREMAN Alan Mader

TREATMENT REPORT

DATE	CUSTOMER #	WELL NAME	FORMATION
5/9/04		ton bud (grub)	
SECTION	TOWNSHIP	RANGE	COUNTY
26	47	12	Osage
CUSTOMER			
Wolverine Environmental			
MAILING ADDRESS			
One Main St, Offawa, MO			
CITY			
Grand Rapids			
STATE	ZIP CODE		
MO	64103		
TIME ARRIVED ON LOCATION			

WELL DATA	
HOLE SIZE	PACKER DEPTH
7.88	
TOTAL DEPTH	PERFORATIONS
CASING SIZE	OPEN HOLE
5.0	
CASING DEPTH	
2106	
CASING WEIGHT	TUBING SIZE
	2.75
CASING CONDITION	TUBING DEPTH
	2106
	TUBING WEIGHT
	TUBING CONDITION
TREATMENT VIA	

INSTRUCTION PRIOR TO JOB: 1732 cement displacement

AUTHORIZATION TO PROCEED: _____ TITLE: _____ DATE: _____

TRUCK #	DRIVER	TRUCK #	DRIVER
386	A. Mader		
305	C. Clemens		
106	C. Clemens		
22	C. Clemens		
	A. Mader		
	H. [unclear]		

TYPE OF TREATMENT

<input type="checkbox"/> SURFACE PIPE	<input type="checkbox"/> ACID BREAKDOWN
<input type="checkbox"/> PRODUCTION CASING	<input type="checkbox"/> ACID STIMULATION
<input type="checkbox"/> SQUEEZE CEMENT	<input type="checkbox"/> ACID SPOTTING
<input checked="" type="checkbox"/> PLUG & ABANDON	<input type="checkbox"/> FRAC
<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> FRAC + NITROGEN
<input type="checkbox"/> MISP. PUMP	
<input type="checkbox"/> OTHER	

PRESSURE LIMITATIONS

	THEORETICAL	INSTRUCTED
SURFACE PIPE		
ANNULUS LONG STRING		
TUBING		

TIME	STAGE	BBL'S PUMPED	INJ RATE	PROPPANT PPG	SAND / STAGE	PSI
2106-1732		921	9.5x	35x		BREAKDOWN PRESSURE
1732-1082		Cement	105x			DISPLACEMENT
1082-1941			2800	95x		MIX PRESSURE
1941-1411				155x		MIN PRESSURE
1411-352			6.051	25x		ISIP
352-1082		Cement		105x		15 MIN.
						MAX RATE
						MIN RATE

Alan Mader