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
December 2003
Type or Print on this Form
Form must be Signed
All blanks must be Filled

	Petroleum, Inc.				API Number: 15 - 015-21795-0000		
Address: P.O. Box 438, Haysville, KS 67060					Lease Name: Anderson		
Phone: (316) 524 -	1225 Opera	Well Number: #1					
Type of Well: Oil (Oil, Gas D&A, SWD, ENHR		Spot Location (QQQQ): NE - SE - SW - 990 Feet from North / South Section Line					
The plugging proposal wa	as approved on: 10-8-0	7		(Date)	2970 Feet from East / West Se		
_{by:} Duane Krueger			(KCC Distric	t Agent's Name)	Sec. $\frac{34}{\text{Twp.}}$ Twp. $\frac{25}{\text{S}}$ S. R. $\frac{5}{\text{V}}$ Ea		
Is ACO-1 filed? Yes	No If not, is	well log attache	d? Yes	s No	County:	st West	
Producing Formation(s): L		•			Date Well Completed: 7/15/1981		
Hunton	Depth to Top: 2	528 Bottom	2534	_{T.D.} <u>2588</u>	Plugging Commenced: 10/8/07	***************************************	
	Depth to Top:	Bottom	ı:	T.D			
	Depth to Top:	Bottom	ı:	T.D	Plugging Completed: 11/7/07		
Show depth and thickness	s of all water, oil and ga	s formations.				-	
	Water Records		,	Casing Record (S	Surface Conductor & Production)		
Formation	Content	From	То	Size	Put In Pulled Out		
	Surface	Surface	207	8 5/8"	207 0		
	Production	Surface	2588	4 1/2"	2588 1000		
			,				
cement to surface. Total cement - 105 sack	Job complete.	ks cement. Cu	it casing loo	se at 1000' and	layed down. Ran pipe to 260' and circulated 100		
	s 60/40 poz 4% gel.) sacks	
	s 60/40 poz 4% gel.		·	- MANAGEMENT - LANGE - PAR AND	DEO		
	,	-b 1			KANSAS CORPOR	EIVED	
Name of Plugging Contrac	_{stor.} Mike's Testing & S	alvage, Inc.			KANSAS CORPOR License #: 31529	EIVED ATION COMMI	
Name of Plugging Contrac	_{olor.} Mike's Testing & S 7, Chase, KS 6752	alvage, Inc. 4-0467			KANSAS CORPOR License #: 31529	EIVED	
Name of Plugging Contrac	_{olor.} Mike's Testing & S 7, Chase, KS 6752	alvage, Inc. 4-0467			License #: 31529 NOV 3 CONSERVAT	EIVED ATION COMMIN 0 2007	
Name of Plugging Contrac Address: P.O. Box 467 Name of Party Responsible State of Kansas	olor. Mike's Testing & S 7, Chase, KS 6752 e for Plugging Fees: Be	alvage, Inc. 4-0467			License #: 31529 NOV 3 CONSERVAT	EIVED ATION COMMIN 0 2007	
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Name of Plugging Contract Address: P.O. Box 467 Name of Party Responsible State of Kansas R. A. Schremmer worn on oath, says: That I	ctor. Mike's Testing & S 7, Chase, KS 6752 e for Plugging Fees: Be County,	alvage, Inc. 4-0467 ear Petroleun Sedgwick	n, Inc.	, ss.	License #: 31529 NOV 3 CONSERVATION CONSE	EIVED ATION COMMI 0 2007 TON DIVISION ITA, KS	
Name of Plugging Contrac Address: P.O. Box 467 Name of Party Responsible State of <u>K</u> ansas R. A. Schremmer	ctor. Mike's Testing & S 7, Chase, KS 6752 e for Plugging Fees: Be County,	alvage, Inc. 4-0467 ear Petroleun Sedgwick	n, Inc.	, ss.	License #: 31529 NOV 3 CONSERVAT	EIVED ATION COMMI 0 2007 TON DIVISION ITA, KS	
Name of Plugging Contrac Address: P.O. Box 467 Name of Party Responsible State of Kansas R. A. Schremmer	ctor. Mike's Testing & S 7, Chase, KS 6752 e for Plugging Fees: Be County, I have knowledge of the so help me God.	alvage, Inc. 4-0467 ear Petroleum Sedgwick facts statement (Signature)	n, Inc.	, ss. (Employee of rs herein contain	License #: 31529 NOV 3 CONSERVAT WICH Operator) or (Operator) on above-described well, being and the log of the above-described well is as file	EIVED ATION COMMI 0 2007 TON DIVISION ITA, KS	
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FIELD ORDER Nº C 32253

BOX 438 • HAYSVILLE, KANSAS 67060

		207(100	316-524-1225		ويتتستم عين	, general, y
		R	<i>(</i>)	DATE	-07	200/
IS AUTHOF	RIZED BY:	DEAR_	(NAME OF CUSTOM	OLEUM		
Address			_ City	ich)	State	
To Treat We As Follows:	II lease <u></u>	INDERSON	_ Well No	ý.		
Sec. Twp. Range				BULTER		
CONDITIONS: not to be held implied, and not treatment is pa our invoicing d The unders	Diepresentation Lyable. There wi lepartment in ac- igned represent	consideration hereof it is agreed that Co mage that may accrue in connection with s have been relied on, as to what may be il be no discount allowed subsequent to s cordance with latest published price sche s himself to be duly authorized to sign thi	peland Acid Service n said service or trea the results or effect tuch date. 6% intere	is to service or treat at owner: atment. Copeland Acid Servic of the servicing or treating sa st will be charged after 60 day	s risk, the hereinbefo e has made no repre	re mentioned well and is
THIS ORDER M BEFORE WORK	UST BE SIGNED (IS COMMENCE)			Bv		
		Well Owner of	r Operator		Agent	
CODE	QUANTITY	<u> </u>	DESCRIPTION		UNIT COST	AMOUNT
MILE	55	MILEAGE	Picke	$ \rho $	100	55-00
4111	<u> </u>	MILEAGE	Pumo	TRuck	300	16500
<u> 4/00</u>		Pump Ch+	Hec.			J00 00
#19	100 3	60/40 POZ 290 Addition	290 ge AL 6	1 Allowed	805	80500
1/20/						
4/100		Bulk Charge			Mari	1000
401		Bulk Truck Miles			Mal	15000
		Process License Fee on_		Gallons		
				TOTAL BILLING		
		material has been accepted and tion, supervision and control of t	used; that the a			nd workmanlike rs below.
Copeland F	Representative	H.G. CURT	<u>></u>	N		
Station		<u>68</u>		BICK	KANSA	RECEIVED S CORPORATION COMMISS
Remarks_			NET 30 DAYS	Well Owner, Ope	erator or Agent	NOV 3 0 2007

CONSERVATION DIVISION WICHITA, KS



TREATMENT REPORT

cid &	Cement				0
ne [] - Q	107 Diet	rict 6	B. 5.0	No. 30255 Bkdown Bbl. /Gal.	
mpany	BCA	LIPL	7 20 00 0	Bbl. /Gal. Bbl	
				Bbi./Gai.	
cation	12 LTC	12	State.	Flush Bbl./Gal.	
unty				Treated fromft. to	
sing: Size	T	Type & Wt		Set at	
rmation: · ·			Perf	toft. No. ft.	***************************************
mation:			Perf	Actual Volume of Oll/Water to Load Hole:	Bbl. /Gal.
mation:			Perf	Bottom at ft. Pump Trucks. No. Used: Std. 320 Sp. Twin	
er: Size,		Danforstad fre	10p at	Bottom atft. Pump Trucks. No. Used: Std	
Cemse	nter res/No.	remorated in	Swung at	ft. Packer: Set at.	
nng; size at Parfe	orad from	,	ft. to	ft. Auxiliary Tools	
				Plugging or Sealing Materials: Type	
en Hole Size.		ፕ.ኮ	ft. P.1	3. to	
mpany R	eprsentative		Ch	Treater Ailo, (MRTT)	
TIME	PRESS I bing	Casing	Total Fluid Pumped	REMARKS	
.m /p.m.	'A DING	Casing		0.1 10000000	
2:00			<u> </u>	UN WATING	
				KUN POLY PIPE to 260	
-:				7(4)	
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				CIRCILIATO COMPAIT TO	
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				TAN /RWAD POTO	
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-				MARK YOU RE	CEIVED
-:-				KANSAS CORF	ORATION COMM
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