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

	Lease Operator: Buckhorn Production Company, LP					API Number: 15 - 025-21474-00-00	
Address: P.O. Box K Garden City, Kansas 67846				Lea	Lease Name:		
Phone: (620) 271 -0236 Operator License #: 33938					ll Number:		
Type of Well: (Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) Docket #: (If SWD or ENHR)					Spot Location (QQQQ): NW - SW - SE		
The plugging proposal was ap	pproved on: 1-16-09			(Date) 21.	23 Feet from 🗸	Bast / West Section Line	
_{by:} Steve Pfeifer	by: Steve Pfeifer (KCC District Agent's Name)					S. R. 24 East West	
Is ACO-1 filed? Yes	No If not, is we	ell log attache	d? Yes [Clark unty:		
Producing Formation(s): List All (If needed attach another sheet)					Date Well Completed:		
Depth to Top: Bottom: 1			D Plu	Plugging Commenced:			
Depth to Top:					Plugging Completed: 1-20-09		
	Depth to Top:	Bottom): T.0	D	gging Completed.		
Show depth and thickness of a	all water, oil and gas	formations.					
Oil, Gas or Water		F			e Conductor & Product	T	
Formation	Content	From 0	To	Size	Put In	Pulled Out	
		 	679	8-5/8*	Yes	No	
			ļ				
			<u> </u>				
2nd Plug: 700' w/ 30 sacks of 2nd Pl		oipe				KANSAS CORPORATION COMMISSION FEB 0 2 2009	
3rd Plug: 210' w/ 30 sacks					CONSERVATION DIRECT		
	lathole w 30 sacks, I	Mousehole w	/ 20 sacks			MARIANTA	
Top Plug: 60' w 20 sacks, R						WICHITA, KS	
Name of Plugging Contractor:		· · · · · · · · · · · · · · · · · · ·			_ License #: 5929	WICHITA, KS	
		as 67530			_ License #: 5929	WICHITA, KS	
Name of Plugging Contractor: Address: P.O. Box 823 Gi	reat Bend, Kansa		duction Con		_ License #: <u>5929</u>	WIGHTA, KS	
Name of Plugging Contractor:	reat Bend, Kansa	ckhorn Pro	duction Con	npany, LP	_ License #: <u>5929</u>	WIGHTA, KS	
Name of Plugging Contractor: Address: P.O. Box 823 Gr Name of Party Responsible for	reat Bend, Kansa	ckhorn Pro		npany, LP		· · · · · · · · · · · · · · · · · · ·	
Name of Plugging Contractor: Address: P.O. Box 823 GI Name of Party Responsible for State of Kansas	r Plugging Fees: But County, ave knowledge of the help me God.	ckhorn Pro		npany, LP _ , ss (Employee of Oper	ator) or (Operator) o	n above-described well, being first duly	
Name of Plugging Contractor: Address: P.O. Box 823 GI Name of Party Responsible for State of Kansas sworn on oath, says: That I ha	r Plugging Fees: But County, ave knowledge of the help me God.	facts statement	nts, and matters	npany, LP _ , ss (Employee of Oper	ator) or (Operator) or and the log of the ab L	n above-described well, being first duly	
Name of Plugging Contractor: Address: P.O. Box 823 Gi Name of Party Responsible for State of Kansas sworn on oath, says: That I ha same are true and correct, so	r Plugging Fees: But County, ave knowledge of the help me God.	facts statement (Signature)	nts, and matters OMO O. Box K Gard	npany, LP _ , ss (Employee of Opers is herein contained, a contain	ator) or (Operator) or and the log of the ab L	n above-described well, being first duly love-described well is as filed, and the	
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