Statice: 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

Form CP-4
December 2003
Type or Print on this Form
Form must be Signed
All blanks must be Filled

K.A.R. 82-3-117

		•	•		•	• 1	21245	00 00
Lease Operator: Oil Producers Inc. of Kansas					API Number.		-21231	00-00
Address: 1710 Waterfront Parkway					Lease Name: Feiertag			
Phone: (316) 681 -(0231 Opera	tor License #: 8	061	<u>:</u>	Well Number:	3-26 🗶	· · · · · · · · · · · · · · · · · · ·	
Type of Well: Gas Oli, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) (If SWD or ENHR)					Spot Location (QQQQ):			
The plugging proposal wa	es approved on:		e.	(Date)				
by:(KCC District Agent's Name) Is ACO-1 filed? Yes No If not, is well log attached? Yes No					Twp. 31 S. R 3/32 East West Section Line Sec. 26 Twp. 31 S. R 3/32 East West County: Seward			
	Depth to Top: 5		5437 T.	D	Date Well Con	mpleted:	4/291	Toc
	Depth to Top:				Plugging Corr	menced:	1/2/	<u>~</u>
	Depth to Top:				Plugging Con	npleted:	7/30/0	<u>9</u>
Show depth and thickness	of all water oil and o	as formations		·				
	Valer Records		C	asing Record (Surface Conductor	& Production	.)	
Formation	Content	From	То	Size	Put In		Pulled Out	
Atoka ·	Gas	0	5698	4 1/2	5698			
			, .					
				-				
<u> </u>								· · ·
Describe in detail the man hole. If cement or other p	olugs were used, state t	he character of s	ame depth pla	iced from (bolto	com), to (top) for	each plug se	اله مراج عراب	e @ 3428
FOOH w/ 4%	-					<u>; 50 م</u>	CK @ 11	70
50 Sx @ 60	O , circulate	cust to	surtice.	47 70			D.	CEN/ED
					·		175	.VEIVEU
Name of Plugging Contract	ctor: Blackhawk Well S	Service, LLc			License i	_{#:} 34091	MA	Y 2 8 2009
Address: 1710 Waterfi	ront Parkway, Wicl	nita, KS 6720	6				- KOC	·MCPITA
Name of Party Responsible	le for Plugging Fees: C	il Producers	Inc. of Kans	sas	 		1100	- VAIOIIIIA
State of Kansas		Sedawic		. SS.				,
Oil Producers		0		(Employee of	Operator) or (Op	perator) on a	bove-described	I well, being first duly
sworn on oath, says: That	i have knowledge of th	e facts statemen	is, and mailers	s herein contair	ned, and the log	of the above	-described we	ll is as filed, and the
same are true and correct	, so help me God.	•	73	_	-7.	_		
Notary Public	A. ZEHR :- State of Kansas 5/5//0	(Signature) 'Address)	110 Wate	r-front Pr	arkway.	viai	Fay Ks C	NO6
My Appt. Expires	SUBSCRIBED and	SWORN TO bef	ore me this _	2 7+11 day of _			May	20 09
: .	_ Lou	: A.Zh	W	Mv	Commission Exp	oires:1	lay 5,2	2010
		Notan Publ	lic				J '	