**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 #: 33608			API No. 15 - 035-19217 - 00 00			
Name: W.D. Short Oil Co., LLC			Spot Description:			
Address 1: P.O. Box 729			SW -NE NW SW Sec.5 Twp. 34 S. R. 6 V East West			
Address 2:			2310 2172 Feet from North South Line of Section			
City: Oxford State: KS Zip: 67119 +			990 4498 Feet from East West Line of Section			
Contact Person: Don Short			Footages Calculated from Nearest Outside Section Corner:			
Phone: (620 ) 455-3576				NE NW SE SW		
Type of Well: (Check one) ✓ Oil Well Gas Well OG D&A Cathodic			County: Cowley			
Water Supply Weil Other: SWD Permit #:			Lease Name: Waldschmidt Well #: 2-A			
ENHR Permit #: Gas Storage Permit #:			Date Well Completed:			
Is ACO-1 filed? Yes No If not, is well log attached? Yes No				The plugging proposal was approved on:(Date)		
Producing Formation(s): List All (If needed attach another sheet)  Depth to Top: Bottom: T.D			by:(KCC District Agent's Name)			
Depth to Top: Bottom: T.D.			I Plugging Completed: U8-D7-D9			
Departo top, Bottom, 1.D.						
Show depth and thickness of all water, oil and gas form	nations,			•		
				Record (Surface, Conductor & Production)		
Formation Content	Casing	Size		Setting Depth	Pulled Out	
	DC.	E 4/0		0450	000	
	PC	5 1/2		2153	960'	
	SURF	8 5/8		221	-0-	
·						
*						
Describe in detail the manner in which the well is plug- cement or other plugs were used, state the character of Set CIBP w/cmt 1510'. Pipe parte	f same depth placed from (bo	ttom), to tubir	(top) for each	n plug set.  Circulate cm		
	Kee		<b>-</b>	- Dar	KCC WICHITA	
Plugging Contractor License #: 34271 32475 Br				James DBP Etroleun Y Yugging & Pipe	well pluge; of co	
Address 1: P.O. Box 134	4.	Address	. 2.			
City: Blackwell			State: OF	<u> </u>	z <sub>ip:</sub> 74631 +	
Phone: (580 ) 363-3036		···········	State. Of	<u> </u>	Zip, 14001 4	
Name of Party Responsible for Plugging Fees:	D. Short Oil	Co	//			
State of KANSAS County 6	S	ω,	<u> </u>			
William D Short, JR. (Print Name)			_ 🗶 Emi	ployee of Operator or	Operator on above-described well,	
being first duly sworn on oath, says: That I have knowle the same are true and correct, so to pre God. Signature:	dge of the facts statements, a	nd matte	rs herein con	tained, and the log of	the above-described well is as filed, and	