

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 #: 33409
Name: Gal Jones Producer Jones, Charles
Address 1: 2504 Meridan
Address 2: _____
City: Canton State: Ks. Zip: 67428 + _____
Contact Person: Charles Jones
Phone: (620) 628-4731
Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic
 Water Supply Well Other: _____ SWD Permit #: _____
 ENHR Permit #: _____ Gas Storage Permit #: _____
Is ACO-1 filed? Yes No If not, is well log attached? Yes No

Producing Formation(s): List All (If needed attach another sheet)

Depth to Top: _____ Bottom: _____ T.D. _____

Depth to Top: _____ Bottom: _____ T.D. _____

Depth to Top: _____ Bottom: _____ T.D. _____

API No. 15 - 113-20805-0000
Spot Description: SW-NE-SW NW 1/4 Sec 36

1650/1060 Feet from North / South Line of Section
330/623 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: McPherson
Lease Name: Jones Well #: 5
Date Well Completed: _____
The plugging proposal was approved on: _____ (Date)
by: Greg Evers (KCC District Agent's Name)
Plugging Commenced: 10-15-09
Plugging Completed: 10-16-09

KCC
DKT
per
CPS

Show depth and thickness of all water, oil and gas formations.

Oil, Gas or Water Records		Casing Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size	Setting Depth	Pulled Out
			8-5/8"	136'	None
			5-1/2"	3347'	1024'

Describe in detail the manner in which the well is plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same depth placed from (bottom), to (top) for each plug set.

Plugged off bottom with sand to 2700' and 5 sacks cement. Cut casing loose @1024', pulled up to 350', pumped 160 sacks cement and circulated to surface, 60/40 pos, 4% gel. Laid down rest of casing, Plugging Complete.

Plugging Contractor License #: 31429 31529 Name: Mike's Testing & Salvage, Inc.
Address 1: P.O. Box 467 Address 2: _____
City: Chase State: Kansas Zip: 67524 + 0467
Phone: (620) 938-2943
Name of Party Responsible for Plugging Fees: Gal Jones Producer Jones Charles
State of Kansas County, Rice, ss.
Mike Kelso Employee of Operator or Operator on above-described well,
(Print Name)

being first duly sworn on oath, says: That I have knowledge of the facts statements, and matters herein contained, and the log of the above-described well is as filed, and the same are true and correct, so help me God.
Signature: Mike Kelso

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

RECEIVED

NOV 06 2009

KCC WICHITA