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

Form CP-4
March 2009
Type or Print on this Form
Form must be Signed
All blanks must be Filled

		K.A.R.	. 82-3-117	•		All blanks !	nust be rinet
OPERATOR: License #:	32145			API No. 15	003-0	1820-00-00	
Name: B& Boil Recovery				Spot Description:			
Address 1: 275/4 NE 2250R				NE-NE-NE Sec. 17 Twp. 21 S. R. 20 Fast West			
Address 2:							
City: Greeley State: KS Zip: 66033+				Feet from 🔀 East / 🗍 West Line of Section			
Contact Person: Tom Baugher				Footages Calculated from Nearest Outside Section Corner:			
Phone: (785) _ 867 - 24/3				NE NW SE SW			
Type of Well: (Check one)	Oil Well Gas Well	OG D&A Catho	dic				
Water Supply Well Other: SWD Permit #:						Well #:	
ENHR Permit #: Gas Storage Permit #:					•		
Is ACO-1 filed? Yes No If not, is well log attached? Yes No				Date Well Completed:			
Producing Formation(s): List All (If needed attach another sheet)				by:(KCC District Agent's Name)			
Squired Depth to Top: Bottom: T.D				Plugging Commenced: 9/22/05			
Depth to Top: Bottom: T.D				Plugging Completed: 9 /28/09			
Depth to Top: T,D				,ggg			
Show depth and thickness of	all water, oil and gas form	ations.	i		·		
				Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size		Setting Depth	Pulled Out	
C . 1	C 0					. Gliod Odi	
Squirres	Sarface	10"			NA		
	producin		á	\ h	NA		
	/						
			"				
		<u> </u>					
Describe in detail the manner	in which the well is plugg	ed, indicating where the mu	d fluid was	s placed and	the method or meth	ods used in introducina it int	to the hole if
cement or other plugs were us	sed, state the character of	same depth placed from (bo	ottom), to (	(top) for each	plug set.		
Kun 314" dow.	n all to 155	Filled to Top will	L com	et. Run	~ 11' down	outside to 63	501
*	234 sacks						
filled to lot	. 20/3445					RECEIVED KANSAS CORPORATION CO	MMISSION
						MINORS CONFORMION CO.	WINNESSICIA
						DEC <b>0 4</b> 200	19
•							•
						CONSERVATION DI	
Plugging Contractor License #	: 33749	<u> </u>	Name: _	K	15, LLC	WICHITA, KS	j
Address 1: 19 245							
City: Chanut	FORA NOWA		. Address	2:			
				State:	_ KS	zip: <u>66 720</u> +	·
Phone: ( )	W4*1v4						
Name of Party Responsible for	r Plugging Fees:	BEBOIL Recou	urp		P-12		
State of							
juin pl	(Print Name)			_	oyee of Operator or	Operator on above-de	scribed well,
being first duly sworn on oath,	says: That I have knowled	ge of the facts statements, a	and matter	s herein conta	lined, and the log of	the above-described well is	as filed, and
the same are true and correct,	so help me God.						
Signature:	+ Lougher	×	-vv				./
//							<del></del>