RECEIVED

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

AUG 02 2010

Form CP-4 March 2009

## WELL PLUGGING RECORD K.A.R. 82-3-117

KCC WICHITA Type or Print on this Form Form must be Signed All blanks must be Filled

OPERATOR: License #: 6131			API No. 15 - 115-21072 <b>DPDD</b>			
Name: Drillers & Producers, Inc			•	ription:		
Address 1: P.O. Box 385			S2 -SE SW Sec. 5 _ Twp. 22 S. R. 4 ▼ East West			
Address 2:			Feet from North / 📈 South Line of Section			
City: Newton State: Ks Zip: 67114 +			3,472 Feet from 🕢 East / West Line of Section			
Contact Person: Bill Hanson			Footages Calculated from Nearest Outside Section Corner:			
Phone: (316.) 841-0022			□ NE □ NW ✓ SE □ SW			
Type of Well: (Check one) Oll Well Gas Well OG D&A Cathodi Water Supply Well Other: SWD Permit #:			County: Marion			
ENHR Permit #: Gas Storage Permit #:			Lease Name: Lattitop-Hawk A Well #: 2			
Is ACO-1 filed?   Yes No If not, is well log attached? Yes   Yes ✓			Date Well	Completed: 2-12-	-84 	
Producing Formation(s): List All (If needed attach another sheet)			The plugging proposal was approved on: 6-30-10 (Date) by: Verbal per phone (KCC District Agent's Name)			
Mississippi Depth to Top: 2346' Bottom: 2372' T.D.			Plugging Commenced: 6-30-10 Plugging Completed: 6-30-10			
Depth to Top: Bottom: T.D						
Depth to Top: Bottom: T.D						
		i				
Show depth and thickness of all water, oil and gas formations.						
Oil, Gas or Water Records		Casing Rec	ng Record (Surface, Conductor & Production)			
Formation Content	Casing	Size	- w. · · · · · · · · · · · · · · · · · ·	Setting Depth	Pulled Out	
	surface	8 5/8"		212'kb		
	casing	4 1/2'		2546'kb	350'	
		""		2040 %0	000	
		ļ				
set 2 7/8" tubing at 2350' pumped 7 line and tagged cement at 1510', st pumped 152 sks class A to surface	70 sks class A 3%0 not off 4 1/2" casin	cc and c g at 350	displac O' pulle	ed to2350', p		
Plugging Contractor License #: 5870			Jame: Phillips Well Service			
Address 1: P.O. Box1263						
City: El Dorado			ate: Ks		z <sub>ip:</sub> 67042+	
Phone: (316_) 321-6650						
Name of Party Responsible for Plugging Fees:	rs & Producers Inc.					
State of Ks County, I	Harvey		SS.			
Drillers & Producers Inc.				loyee of Operator or	(X) Operator on above-described well,	
being first duly sworn on oath, says: That I have knowledge the same are true and correct, so help me God.  Signature:	ge of the facts statements, an	d matters he	erein cont	ained, and the log of	the above-described well is as filed, and	