

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 #: 6655
Name: Crawford Production Company
Address 1: P.O. Box 727
Address 2: _____
City: El Dorado State: KS Zip: 67042 + _____
Contact Person: Brance Crawford
Phone: (316) 323-5513
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. 2308
_____ Depth to Top: _____ Bottom: _____ T.D. _____
_____ Depth to Top: _____ Bottom: _____ T.D. _____

API No. 15 - 115-20615-00-00
Spot Description: NE NW SW
NE NW SW Sec. 21 Twp. 21 S. R. 5 East West
2167 2157 Feet from North / South Line of Section
4059 4064 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Marion
Lease Name: Strait Well #: 16
Date Well Completed: 1980
The plugging proposal was approved on: 9/15/10 (Date)
by: Shane Jones (KCC District Agent's Name)
Plugging Commenced: 9/20/10
Plugging Completed: 9/20/10

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
Viola Hunton		8 5/8	5 1/2		

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.

Tubing at 2257 pumped 22 bbls. water mixed 35 sks. 60/40 mix. Tagged cement at 2162. Perforated 5 1/2 at 250ft. broke circulation - mixed 103 sks. 60/40. Circulated cement to surface. Shut casing in.

DR

Plugging Contractor License #: 5870 Name: Phillips Well Service
Address 1: 315 Industrial Rd. Address 2: _____
City: El Dorado State: KS Zip: 67042 + _____
Phone: (316) 323-5513
Name of Party Responsible for Plugging Fees: Crawford Production Company
State of Kansas County, Butler, ss.
Brance Crawford 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: _____

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

RECEIVED
OCT 07 2010
KCC WICHITA