

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 #: 5039
Name: AGV Corp.
Address 1: PO Box 377
Address 2: _____
City: Attica State: KS Zip: 67009 + _____
Contact Person: Kent Roberts
Phone: (316) 215-1683
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)
None Depth to Top: _____ Bottom: _____ T.D. _____
_____ Depth to Top: _____ Bottom: _____ T.D. _____
_____ Depth to Top: _____ Bottom: _____ T.D. _____

API No. 15 - 191-21133-00-01
Spot Description: _____
_____ SW NE Sec. 5 Twp. 33 S. R. 4 ☐ East ☒ West
3,300 Feet from ☐ North / ☒ South Line of Section
1,980 Feet from ☒ East / ☐ West Line of Section
Footages Calculated from Nearest Outside Section Corner:
☐ NE ☐ NW ☒ SE ☐ SW
County: Sumner
Lease Name: Tracy Well #: 1
Date Well Completed: 2/7/2006
The plugging proposal was approved on: 8/5/2010 (Date)
by: Steve VanGieson (KCC District Agent's Name)
Plugging Commenced: 12/7/2010
Plugging Completed: 12/7/2010

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
Surface	Water	Surface	8-5/8	323'	None
		Production	4-1/2"	3429'	1515'

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.

CIBP @ 2120' w/ 2 sacks cement on top.
Shot casing @ 1515' and pulled.
1st plug @ 850' w/ 35 sacks cement
2nd plug @ 500' w/ 35 sacks cement
Circulated from 375' to surface w/ 50 sacks and topped off w/ 15 sacks
Total 135 sacks 60/40 poz 4% gel

Plugging Contractor License #: 34227 Name: Amercian Well Service, LLC
Address 1: PO Box 464 Address 2: _____
City: Pratt State: KS Zip: 67124 + _____
Phone: (620) 770-0621
Name of Party Responsible for Plugging Fees: AGV Corp.
State of Kansas County, Sedgwick, ss.
Kent Roberts ☒ 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: Kent Roberts