Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

'Signature:

KANSAS (**DRPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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

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

OPERATOR: License #: 5046				API No. 15 - 151-22021-00-00											
Name: Raymond Oil Company, Inc.				Spot Description: NE NE NE											
Address 1: P.O. Box 48788															
Address 2:				4,950 Feet from North / South Line of Section											
City: Wichita State: KS Zip: 67202 + 1822															
Contact Person: Art Schoenhofer				Footages Calculated from Nearest Outside Section Corner:											
Phone: (316_) 655-5366				NE NW SE SW											
Type of Well: (Check one) 📝 Oil Well 🔲 Gas Well 🔲 OG 🔲 D&A 🔲 Cathodic				County: Pratt											
Water Supply Well Other: SWD Permit #: Gas Storage Permit #: SACO-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:				Lease Name: Rundell Well #: 4 Date Well Completed:											
								Depth to Top: Bottom: T.D				Plugging Commenced: 8-16-11 Plugging Completed: 8-17-11			
								Борит с	тор						
Show depth and thickness of a	all water, oil and gas fo	ormations.													
Oil, Gas or Water Records Casing				Record (Surface, Conductor & Production)											
Formation	Content	Casing	Size		Setting Depth	Pulled Out									
	-		10-3/	'4 "	250'	None									
					45451	10201									
			5-1/2	<u> </u>	4515'	1920'									
1															
Plugged off bottom pumped 10 sxs. ge and circulated 30 s	sed, state the characte n with sand to el and 50 sxs.	er of same depth placed to 3945' and 5 sac cement, pulled	from (bottom), to cks cemen up to 300,	(top) for each	^{h plug set.} asing loose @	@1920', pulled u	p to 600',								
							₩.								
,				*											
Plugging Contractor License	_{#:} 31529		Name:	Mike's	Testing & Salv	vage, Inc.									
Address 1: P.O. Box 4	67		Addres	s 2:											
City: Chase				_ State: K	ansas	zip: 67524	+ 0467								
Phone: (620) 938-29	943														
Name of Party Responsible for	or Plugging Fees: R	aymond Oil Com	pany, Inc.												
State of Kansas	Cou	_{nty,} Rice		, ss.											
Mike Kelso	(Print Nam	10)		[_] En	nployee of Operator of	or Operator on abov	e-described well,								
being first duly sworn on oath the same are true and correct	, says: That I have kno	owledge of the facts state	ements, and matt	ers herein co	ontained, and the log		rell is as filed, and								

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

OCT 0 3 201



