

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  
July 2014  
Type or Print on this Form  
Form must be Signed  
All blanks must be Filled

OPERATOR: License #: 34824  
Name: Terry George  
Address 1: 30110 Maple Lane  
Address 2: \_\_\_\_\_  
City: Spring Hill State: KS Zip: 66083 + \_\_\_\_\_  
Contact Person: Terry George  
Phone: ( 913 ) 302-1792  
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. \_\_\_\_\_  
\_\_\_\_\_ Depth to Top: \_\_\_\_\_ Bottom: \_\_\_\_\_ T.D. \_\_\_\_\_  
\_\_\_\_\_ Depth to Top: \_\_\_\_\_ Bottom: \_\_\_\_\_ T.D. \_\_\_\_\_

API No. 15 - 059-25925-00-00  
Spot Description: \_\_\_\_\_  
\_\_\_\_\_ Sec. 33 Twp. 15 S. R. 21  East  West  
3,540 Feet from  North /  South Line of Section  
1,920 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: Franklin  
Lease Name: Newhouse Well #: 2  
Date Well Completed: \_\_\_\_\_  
The plugging proposal was approved on: \_\_\_\_\_ (Date)  
by: \_\_\_\_\_ (KCC District Agent's Name)  
Plugging Commenced: 7/27/2016  
Plugging Completed: 7/27/2016

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	7	23	
		Completion	2.8750	786	

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.

Pump cement through pipe from bottom to surface. Pumped sacks of cement to T.D. top off well.

Received  
KANSAS CORPORATION COMMISSION

AUG 01 2016

CONSERVATION DIVISION  
WICHITA, KS

Plugging Contractor License #: 33715 Name: Town Oilfield Services  
Address 1: PO Box 339 Address 2: \_\_\_\_\_  
City: Louisburg State: KS Zip: 66053 + \_\_\_\_\_  
Phone: ( 913 ) 710-5400

Name of Party Responsible for Plugging Fees: Terry George  
State of Kansas County, Franklin, ss. \_\_\_\_\_  
Justin Baker  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: Justin Baker

Mail to: KKCC - Conservation Division, 266 N Main St, Ste 220, Wichita, KS 67202-1513

NS  
8-26-16

# Town Oilfield Service

P.O Box 339 Louisburg, Ks 66053  
913-837-8400

Ticket Number \_\_\_\_\_  
Location \_\_\_\_\_  
Foreman \_\_\_\_\_

## Field Ticket & Treatment Report Cement

Date	Customer#	Well Name & Number	Section	Township	Range	County
7-27-16		new house 2	33	15	21E	Franklin
Customer Terry George		Mailing Address				
		City	State	Zip Code		

Job Type Plug Hole Size 2 1/2 Hole Depth 750 Casing Size & Weight \_\_\_\_\_  
Casing Depth \_\_\_\_\_ Drill Pipe \_\_\_\_\_ Tubing \_\_\_\_\_ Other \_\_\_\_\_  
Displacement \_\_\_\_\_ Displacement PSI \_\_\_\_\_ Mix PSI \_\_\_\_\_ Rate \_\_\_\_\_

Remarks \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Account Code	Quantity or Units	Description of Services or Product	Unit Price	Total
		Pump Charge		500
		Cement Truck		200
		Water Truck		75
	25	Cement		225
		Gel		
		Plug		
<b>Received</b> <b>KANSAS CORPORATION COMMISSION</b> <b>AUG 01 2016</b> <b>CONSERVATION DIVISION</b> <b>WICHITA, KS</b>				
			Sales Tax	
				Estimated Total

Authorization [Signature] Title \_\_\_\_\_ Date \_\_\_\_\_

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.