## OKLAHOMA CORPORATION COMMISSION

Oil & Gas Conservation Division Post Office Box 52000 Oklahoma City, Oklahoma 73152-2000

Rule 165: 10-3-25

## **PLUGGING RECORD**

OAC 165:10-1-10

**WELL INFORMATION** 

Plug Date: September 19, 2014

**API No:** 3515335187

Well #: 1 Well Name: CANFIELD

Operator: WOODWARD DISPOSAL COMPANY INC Operator #: 16846

Section: 6 Township: 22N Range: 20W Meridian: Indian

1/4: NE4 1/4: NE4 1/4: SW4 1/4:

Total Depth: 0 Base of Treatable: Water: 0 Well Classification: 2DCm

**CONTACT INFORMATION** 

Contact Name: Ramona Mitchell Telephone: 3618763388

Address 1: 707 MAIN ST Address 2:

City: WOODWARD State: OK Zipcode: 73801-3234 Country: US

Email Address: Fax:

PIPE RECORDS

| DEDE | $\cap D \wedge T$ | TON F  | DEPTHS   |
|------|-------------------|--------|----------|
| FERF | URAI              | IUIV L | JEP I NO |

| String Name         | Size  | Run  | Pulled | From Depth |
|---------------------|-------|------|--------|------------|
| SURFACE             | 11.75 | 506  | 0      | 415        |
| INTERMEDIATE CASING | 8.625 | 3436 | 0      |            |
| PRODUCTION          | 5.5   | 8386 | 0      |            |

| From Depth | To Depth |  |
|------------|----------|--|
| 4150       | 4270     |  |

## **PLUGS**

| Plug Type     | Hole Size | Depth | No. Sacks of Cement | Slurry Volume | Calculated TOC | Top of Plug |
|---------------|-----------|-------|---------------------|---------------|----------------|-------------|
| CIBP +<br>CEM | 5.5       | 3260  | 2                   | 2             | 3250           | 3250        |
| CEM           | 5.5       | 590   | 65                  | 77            | 4              | 4           |

Remarks:

Reason For Plugging: UNECONOMICAL

## **CEMENTER CERTIFICATION INFORMATION**

Name: Title:

Company Name: SARGENT & LILLARD CASING PULL Permit No: 803

Address 1: 1506 CEDAR Address 2: P.O. Box 1450

**City:** WOODWARD **State:** OK **Zipcode:** 73802-1450 **Phone:** (580) 254-1881

I declare that I have knowledge of the contents of this report and am authorized by my organization to make this report, which was prepared by me or under my supervision and direction with the data and facts stated herein to be true, correct and complete to the best of my knowledge and belief.

Electronic Signature: WOODWARD DISPOSAL COMPANY INC

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