



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

KANSAS CORPORATION COMMISSION 1037983  
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 #: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Address 1: \_\_\_\_\_  
 Address 2: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_  
 Contact Person: \_\_\_\_\_  
 Phone: ( \_\_\_\_\_ ) \_\_\_\_\_  
 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 - \_\_\_\_\_  
 Spot Description: \_\_\_\_\_  
 \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West  
 \_\_\_\_\_ Feet from  North /  South Line of Section  
 \_\_\_\_\_ Feet from  East /  West Line of Section  
 Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
 County: \_\_\_\_\_  
 Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_  
 Date Well Completed: \_\_\_\_\_  
 The plugging proposal was approved on: \_\_\_\_\_ (Date)  
 by: \_\_\_\_\_ (KCC District Agent's Name)  
 Plugging Commenced: \_\_\_\_\_  
 Plugging Completed: \_\_\_\_\_

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

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.

Plugging Contractor License #: \_\_\_\_\_ Name: \_\_\_\_\_  
 Address 1: \_\_\_\_\_ Address 2: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_  
 Phone: ( \_\_\_\_\_ ) \_\_\_\_\_  
 Name of Party Responsible for Plugging Fees: \_\_\_\_\_  
 State of \_\_\_\_\_ County, \_\_\_\_\_, ss.  
 \_\_\_\_\_  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.

Submitted Electronically

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

# Cementing Job Summary

Fluid Data										
Stage/Plug #: 1										
Fluid #	Stage Type	Fluid Name	Qty	Qty uom	Mixing Density lbm/gal	Yield ft <sup>3</sup> /sk	Mix Fluid Gal/sk	Rate bbl/min	Total Mix Fluid Gal/sk	
1	PLUG AT 1760	POZ PREMIUM 40/60 - SBM (15075)	100.0	sacks	13.5	1.58	7.95		7.95	
	2 %	BENTONITE, BULK (100003682)								
	0.25 lbm	POLY-E-FLAKE (101216940)								
	7.948 Gal	FRESH WATER								
2	PLUG AT 590	POZ PREMIUM 40/60 - SBM (15075)	40.0	sacks	13.5	1.58	7.95		7.95	
	2 %	BENTONITE, BULK (100003682)								
	0.25 lbm	POLY-E-FLAKE (101216940)								
	7.948 Gal	FRESH WATER								
3	PLUG AT 60	POZ PREMIUM 40/60 - SBM (15075)	20.0	sacks	13.5	1.58	7.95		7.95	
	2 %	BENTONITE, BULK (100003682)								
	0.25 lbm	POLY-E-FLAKE (101216940)								
	7.948 Gal	FRESH WATER								
4	PLUG: RAT 30 sk & MOUSE HOLE 20 sk	POZ PREMIUM 40/60 - SBM (15075)	50.0	sacks	13.5	1.58	7.95		7.95	
	2 %	BENTONITE, BULK (100003682)								
	0.25 lbm	POLY-E-FLAKE (101216940)								
	7.948 Gal	FRESH WATER								
<b>Calculated Values</b>			<b>Pressures</b>			<b>Volumes</b>				
Displacement		Shut In: Instant		Lost Returns		Cement Slurry		Pad		
Top Of Cement		5 Min		Cement Returns		Actual Displacement		Treatment		
Frac Gradient		15 Min		Spacers		Load and Breakdown		Total Job		
<b>Rates</b>										
Circulating		Mixing		Displacement			Avg. Job			
Cement Left In Pipe		Amount	0 ft	Reason	Shoe Joint					
Frac Ring # 1 @	ID	Frac ring # 2 @	ID	Frac Ring # 3 @	ID	Frac Ring # 4 @	ID			
<b>The Information Stated Herein Is Correct</b>				Customer Representative Signature						

# Cementing Job Log

*The Road to Excellence Starts with Safety*

Sold To #: 348223		Ship To #: 2771955		Quote #:		Sales Order #: 7229310	
Customer: EOG RESOURCES INC EBUSINESS				Customer Rep:			
Well Name: Bane			Well #: 36-2		API/UWI #:		
Field:		City (SAP): ELKHART		County/Parish: Morton		State: Kansas	
Legal Description:							
Lat:				Long:			
Contractor: KENAI			Rig/Platform Name/Num: 55				
Job Purpose: Plug to Abandon Service						Ticket Amount:	
Well Type: Development Well				Job Type: Plug to Abandon Service			
Sales Person: BLAKEY, JOSEPH			Srvc Supervisor: WILTSHIRE, MERSHEK			MBU ID Emp #: 195811	

Activity Description	Date/Time	Cht #	Rate bbl/min	Volume bbl		Pressure psig		Comments
				Stage	Total	Tubing	Casing	
Call Out	03/09/2010 02:00							
Arrive At Loc	03/09/2010 07:00							
Pre-Job Safety Meeting	03/09/2010 07:15							
Start Job	03/09/2010 08:29							FIRST PLUG 1760'
Test Lines	03/09/2010 08:29					3000.0		
Pump Spacer 1	03/09/2010 08:31		6	20		225.0		WATER
Pump Cement	03/09/2010 08:35		6	28		225.0		100 SKS 40/60 POZ PP @ 13.5#
Pump Displacement	03/09/2010 08:40		6	18		135.0		END CEMENT// DISP. W/ WATER
Other	03/09/2010 08:42		6	18		135.0		END DISPLACEMENT
Other	03/09/2010 08:44							LAYDOWN DRILL PIPE
Other	03/09/2010 09:31							SECOND PLUG @ 592'
Pump Spacer 1	03/09/2010 09:31		7	20		200.0		WATER
Pump Cement	03/09/2010 09:40		7	11		200.0		40 SKS 40/60 POZ @ 13.5#
Pump Displacement	03/09/2010 09:42		7	6		90.0		END CEMENT// DISP. W/ WATER
Other	03/09/2010 09:43		7	6		90.0		END DISPLACEMENT
Other	03/09/2010 09:44							LAYDOWN DRILL PIPE // NIPPLE DOWN BOP
Other	03/09/2010 11:46							THRID PLUG @ 62' , RAT & MOUSE HOLE

Sold To #: 348223

Ship To #: 2771955

Quote #:

Sales Order #:

7229310

SUMMIT Version: 7.20.130

Tuesday, March 09, 2010 12:42:00

## Cementing Job Log

Activity Description	Date/Time	Cht #	Rate bbl/min	Volume bbl		Pressure psig		Comments
				Stage	Total	Tubing	Casing	
Pump Spacer 1	03/09/2010 11:46		7	20		80.0		WATER
Pump Cement	03/09/2010 11:52		5	20		100.0		20 SKS 40/60 POZ @ 13.5# /// 30 SKS RAT HOLE// 20 SKS MOUSE HOLE
Other	03/09/2010 12:07		2	20		30.0		END CEMENT
End Job	03/09/2010 12:09							

Sold To # : 348223

Ship To # :2771955

Quote # :

Sales Order # : 7229310

SUMMIT Version: 7.20.130

Tuesday, March 09, 2010 12:42:00

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
October 2008  
Form Must Be Typed

**WELL COMPLETION FORM**  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 5278  
Name: EOG Resources, Inc.  
Address 1: 3817 NW Expressway, Suite 500  
Address 2: \_\_\_\_\_  
City: Oklahoma City State: OK Zip: 73112 + 1483  
Contact Person: Sheila Rogers  
Phone: ( 405 ) 246-3236  
CONTRACTOR: License # 34000  
Name: Kenai Mid-Continent, Inc.  
Wellsite Geologist: \_\_\_\_\_  
Purchaser: N/A

Designate Type of Completion:  
 New Well  Re-Entry  Workover  
 Oil  SWD  SLOW  
 Gas  ENHR  SIGW  
 CM (Coal Bed Methane)  Temp. Abd.  
 Dry  Other Lost circ, stuck pipe, P&A  
(Core, WSW, Expl., Cathodic, etc.)

If Workover/Re-entry: Old Well Info as follows:  
Operator: \_\_\_\_\_  
Well Name: \_\_\_\_\_  
Original Comp. Date: \_\_\_\_\_ Original Total Depth: \_\_\_\_\_  
 Deepening  Re-perf.  Conv. to Enhr.  Conv. to SWD  
 Plug Back: \_\_\_\_\_ Plug Back Total Depth \_\_\_\_\_  
 Commingled Docket No.: \_\_\_\_\_  
 Dual Completion Docket No.: \_\_\_\_\_  
 Other (SWD or Enhr.?) Docket No.: \_\_\_\_\_  
3/02/10 P&A 3/9/10  
Spud Date or Date Reached TD Completion Date or Recompletion Date

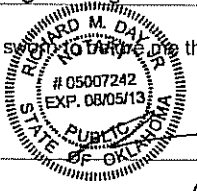
API No. 15 - 189-22692-00-00  
Spot Description: \_\_\_\_\_  
N2 NW SW SW Sec. 36 Twp. 33 S. R. 39  East  West  
1070' Feet from  North /  South Line of Section  
330' Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: Stevens  
Lease Name: Bane Well #: 36 #2  
Field Name: Wildcat  
Producing Formation: N/A  
Elevation: Ground: 3237' Kelly Bushing: 3248'  
Total Depth: 4176' Plug Back Total Depth: N/A  
Amount of Surface Pipe Set and Cemented at: \_\_\_\_\_ Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set: \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from: \_\_\_\_\_  
feet depth to: \_\_\_\_\_ w/ \_\_\_\_\_ sx cmf.

**Drilling Fluid Management Plan**  
(Data must be collected from the Reserve Pit)  
Chloride content: 4,000 ppm Fluid volume: 1,000 bbls  
Dewatering method used: Evaporation  
Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name: West Sunset Disposal, LLC.  
Lease Name: Roher License No.: 32462  
Quarter \_\_\_\_\_ Sec. 36 Twp. 34 S. R. 36  East  West  
County: Stevens Docket No.: D27649

**INSTRUCTIONS:** An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: Sheila Rogers  
Title: Drilling Engineering Tech Date: 05/11/2010  
Subscribed and sworn to before me this 11th day of May, 2010.  
Notary Public: \_\_\_\_\_  
Date Commission Expires: 08/05/13



**KCC Office Use ONLY**

Letter of Confidentiality Received  
If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution

Operator Name: EOG Resources, Inc. Lease Name: Bane Well #: 36 #2  
 Sec. 36 Twp. 33 S. R. 39  East  West County: Stevens

**INSTRUCTIONS:** Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i>  List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Top Datum  N/A
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CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
N/A							

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	N/A			

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth
	N/A		

TUBING RECORD: Size: <u>N/A</u> Set At: _____ Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of First, Resumed Production, SWD or Enhr. _____		Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____	
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls. Gas-Oil Ratio Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input checked="" type="checkbox"/> Other (Specify) <u>Lost circ, stuck pipe, P&amp;A</u>	PRODUCTION INTERVAL: _____ _____
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