



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

KANSAS CORPORATION COMMISSION 1050632
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

H D DRILLING, LLC PLUGGING ORDER & REPORTS

OPERATOR: G&T PETROLEUM RIG: #3 LEASE NAME & #: MORRIS TRUST

ORDERS RECEIVED FROM: JERRY STAPLETON DATE: 1-31-11 TIME: 11:30 A.M.

1ST PLUG @ 900 FT. w/ 50 SX. STANDS: 15

2ND PLUG @ 240 FT. w/ 50 SX. STANDS: 4

3RD PLUG @ 60 FT. w/ 20 SX. STANDS: 1

4TH PLUG @ _____ FT. w/ _____ SX. STANDS: _____

5TH PLUG @ _____ FT. w/ _____ SX. STANDS: _____

MOUSEHOLE: w/ NA SX

RATHOLE: w/ 30 SX

TOTAL CEMENT USED: 150 SX TYPE OF CEMENT USED: 60/40 P02, 4% GEL

PLUG DOWN @: 10:30 P.M. 2-1-11 By ALISED CALL STATE WHEN COMPLETED:

NAME: ERIC McLaren DATE: 02-02-2011 TIME: 9:30 AM

API #: 15-185-23660-00-00 COUNTY: STAFFORD

340 FNL & 2300 FWL Sec. 14 Twp. 24 South R. 14 West

8 5/8 CASING SET @: 222 FT. ANHYDRITE: 845 FT. to 860 FT.

RTD: 4250 FT. LTD: 4250 FT. BY: LOG TECH

FORMATION @ TD. ARBUCKLE

ALLIED CEMENTING CO., LLC. 038685

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Great Bend

DATE <u>2-1-11</u>	SEC. <u>14</u>	TWP. <u>24S</u>	RANGE <u>14W</u>	CALLED OUT	ON LOCATION	JOB START <u>10^{am}</u>	JOB FINISH <u>10^{pm}</u>
LEASE <u>Morris Trust</u>	WELL # <u>1</u>	LOCATION <u>Saint Johns 1 South</u>			COUNTY <u>Stafford</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)		<u>2 west 1 South 2 1/2 west south 10</u>					

CONTRACTOR H-O Rig 3
 TYPE OF JOB Rotax Plus
 HOLE SIZE 7 7/8 T.D. 4250
 CASING SIZE 4 1/2 DEPTH 900
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX MINIMUM
 MEAS. LINE SHOE JOINT
 CEMENT LEFT IN CSG.
 PERFS.
 DISPLACEMENT

OWNER G-T Petroleum
 CEMENT
 AMOUNT ORDERED 150 SX 60/40 4% 1/4 flo seal

COMMON	<u>90</u>	@	<u>13.50</u>	<u>1,215.00</u>
POZMIX	<u>60</u>	@	<u>7.55</u>	<u>453.00</u>
GEL	<u>5</u>	@	<u>20.25</u>	<u>101.25</u>
CHLORIDE		@		
ASC		@		
<u>flor seal</u>	<u>37</u>	@	<u>2.45</u>	<u>90.65</u>
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>150</u>	@	<u>2.25</u>	<u>337.50</u>
MILEAGE	<u>150 x 20 x 10</u>			<u>300.00</u>

EQUIPMENT

PUMP TRUCK CEMENTER Wayne - Mike
 # 366 HELPER Bob - R
 BULK TRUCK
 # 341 DRIVER C - J
 BULK TRUCK
 # DRIVER

TOTAL 2,497.40

REMARKS:
900 ft mix 50 SX
240 ft mix 50 SX
3-d plus 60 ft 200X
Rat 30 SX

SERVICE

DEPTH OF JOB	<u>900 ft</u>			
PUMP TRUCK CHARGE				<u>990.00</u>
EXTRA FOOTAGE		@		
MILEAGE	<u>20</u>	@	<u>7.00</u>	<u>140.00</u>
MANIFOLD		@		
		@		

TOTAL 1,130.00

CHARGE TO: GT Petroleum
 STREET _____
 CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

	@			
	@			
	@			
	@			
	@			

TOTAL _____

To Allied Cementing Co., LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL

Thank you 499