



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

KANSAS CORPORATION COMMISSION 1056466
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

ALLIED CEMENTING CO., LLC. 039930

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:

Oakley KS

DATE <u>5/4/11</u>	SEC. <u>21</u>	TWP. <u>18</u>	RANGE <u>31</u>	CALLED OUT	ON LOCATION	JOB START <u>5:30 AM</u>	JOB FINISH <u>6:30 AM</u>
LEASE <u>Riney</u>	WELL # <u>1-21</u>	LOCATION <u>Scott City E to Union SW</u>			COUNTY <u>Scott</u>	STATE <u>Ks</u>	
OLD OR NEW (Circle one)		INTO					

CONTRACTOR Beresco #2

TYPE OF JOB PTA

HOLE SIZE 7 7/8 T.D. _____

CASING SIZE 8 7/8 DEPTH 497'

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4 1/2 DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

OWNER Same

CEMENT

AMOUNT ORDERED 295 60/40 4 90 gal

114 Flo Seal

COMMON	<u>177</u>	@ <u>16.25</u>	<u>2896.25</u>
POZMIX	<u>118</u>	@ <u>8.50</u>	<u>1003.00</u>
GEL	<u>10</u>	@ <u>21.50</u>	<u>212.50</u>
CHLORIDE		@	
ASC		@	
		@	
<u>Flo Seal</u>	<u>7416</u>	@ <u>2.70</u>	<u>199.80</u>
		@	
		@	
		@	
		@	
		@	
HANDLING	<u>308 SKs</u>	@ <u>2.25</u>	<u>693.00</u>
MILEAGE	<u>119 SK/mile</u>		<u>1863.00</u>
			TOTAL <u>6847.95</u>

EQUIPMENT

PUMP TRUCK CEMENTER Alan

422 HELPER Wayne

BULK TRUCK

390 DRIVER Miky

BULK TRUCK

_____ DRIVER _____

REMARKS:

50 SKs @ 2220'

125 SKs @ 1500'

50 SKs @ 540'

20 SKs @ 60'

30 SKs Rat Hole

20 SKs Mouse Hole

SERVICE

DEPTH OF JOB 2220'

PUMP TRUCK CHARGE 2125.00

EXTRA FOOTAGE @ _____

MILEAGE 55 x 2 @ 7.00 770.00

MANIFOLD @ _____

Lite Vehicle 55 x 2 @ 4.00 440.00

@ _____

TOTAL 3335.00

CHARGE TO: Beresco Inc

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 TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME Gilbert Davila Jr

SIGNATURE [Signature]

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS