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

1057374

March 2009 Type or Print on this Form Form must be Signed All blanks must be Filled

Form CP-4

WELL PLUGGING RECORD K.A.R. 82-3-117

OPERATOR: License #:	API No. 15
Name:	Spot Description:
Address 1:	Sec Twp S. R East West
Address 2:	Feet from North / South Line of Section
City: State: Zip: +	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	NE NW SE SW
Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic Water Supply Well Other: SWD Permit #: SWD Permit #: SWD Permit #: ENHR Permit #: Gas Storage Permit #: Gas Storage Permit #: No Is ACO-1 filed? Yes No If not, is well log attached? Yes No Producing Formation(s): List All (If needed attach another sheet)	County: Well #: 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	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.					
	(Print Name)		or or Operator on above-described well,				
haing first duly sugars an asthe source The	t I have knowledge of the facto at	stamanta, and matters barain contained, and the l	an of the choice described well is as filed and				

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

M & S Well Service LLC

346 S LULU WICHITA, KS 67211

(785) 324-0990 - DISPATCH (316) 295-4355 - BILLING

Bill To

AMERICAN ENERGIES CORPORATION 155 N MARKET, SUITE 710 WICHITA, KS 67202

lease remit all payments to
M & S Well Service, LLC 346 S Lulu St Wichita, KS 67211

Date

5/23/2011

		Lease	Terms	
		WAUGH #6	10% IF PAID IN 10, NET 30	
Description	Quantity	Rate	Amount	
WORK ORDER #798 IOB TYPE: PLUG SUMNER, KS 15282 DOUBLE DRUM PULLING UNIT SUMNER CO SALES TAX			0.00 640.00T 80% 49.92	
• •				
·				
10% DISCOUNT IF PAID IN 10 DAYS, NET 30		Total	\$689.	
THANKS FOR YOUR BUSINESS!	entre a secondaria de la constante de la const			

Invoice

Invoice #

9372

RECEIVE:

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RIG W/	2 MEN	UBBERS	h		160°° PER HOI	UR EACH		TOTAL TOTAL	\$ 64	0.00	
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PAGE 05/11

RECEIVE:

NO.4828 06/07/2011/TUE 11:13AM

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OII Well Services,		; Chanut 620/431-9210 ▼ 1-80	Main Office P.O. Box 884 A.KS 66720 00/467-8676 20/431-0012	
INVOICE	·		J Invoice #	241530
Invoice Date: 05/24/2011			teresterestere Pa	ga l
AMERICAN ENERGIES CO 155 N. MARKET SUITE WICHITA KS 67202 (316)263-5785		WAUGH #6 31005 30-31S-1W 05-19-11 KS		
1131 60/4 1102 CALC	ription 0 POZ MIX IUM CHLORIDE (50#) IUM GEL / BENTONITE	150.00 360.00	,7000	1792.50
Description 446 CEMENT PUMP 446 EQUIPMENT MILEAGE (491 MIN. BULK DELIVERY	ONE WAY)	Hours 1.00 57.00 1.00	4.00	975.00

No. 5761 P. 2/3

여러우림음놀으럼뱅	\$\$\$\$\$\$\$\$\$\$\$\$\$		****		**********		232842242242
Parts:		Freight:		Tax:	158.01		3055.51
Labor:	.00	Miac:	.00	Total:	3855.51		
Sublt:	.00	Supplies:	.00	Change:	.00		
즟헑르眞님点볞뻡티민교森성물벅렌민금박권민금소》, ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~							

Signed						Date		
BARTLESMILE, OX	ELDOHADO, KS	Eureka, Ks	Gillerne, Wy	Oakley, K\$	Ottawa, Ks	Тратев, Ке	WOBLAND, WY	
915/338-0808	316/322-7022	620/583-7884	307/686-4914	785/672-2227	785/242-4044	620/839-6269	3077347-4577	

CONSOLID OH West Sarvit) ENTER	ied	TICKET NUMBER 31005 LOCATION # 80 GIBOROND						
PO Box 684, Chanute, KS 66720 FIELD TICKET & TREATMENT REPORT 620-431-9210 or 600-467-8876 CEMENT										
DATE CUSTOMER#	WELL NAME & NUI	MBER	SECTION	TOWNSHIP	RANGE	COUNTY				
5-19-11 1040	Waugh 2	#6	30	315	Iw.	Summer				
CUSTOMER AMECICAN COM MAILING ADDRESS 155 N Marker CITY WIChita JOB TYPE Plug CASING DEPTH	:cgizs	HOLE DEPTH	' <u>A</u>	DRIVER Jeff Steve Jacob Casing size & W	OTHER PHA	DRIVER				
SLURRY WEIGHT 13 DISPLACEMENT O REMARKS: Scifty Nece 3/CC Caculatic		MIX PSI HOU	opsi	cement left in RATE <u>36pm</u> <u>d 1505</u> 6 И.		40 рог И /де				

No. 5761 P. 3/3

1.

ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401		PUMP CHARGE	975,00	978.00
5406	57	MILEAGE	4.00	228.00
5407		min bulk delivery	.330.00	<u>330,00</u>
1131	150 5KS	60/40 pmz	11.95	179250
1131 1102	3601b	Calcium chloride	0.20	252.00
11/8 B	60016	gal	120	120.00
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		· · · · · · · · · · · · · · · · · · ·	Subtotal	3697.50
			Suotoki	267/00
			SALES TAX	58.0
Ravin 9797	177	-/ 241530-	ESTIMATED	3155.61
	Thas	ton TITLE Formon	TOTAL DATE S-1	1-11 1-11

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/