



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

KANSAS CORPORATION COMMISSION 1057819
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



PO BOX 31 Russell, KS 67665

INVOICE

Invoice Number: 126879

Invoice Date: Apr 12, 2011

Page: 1

Voice: (785) 483-3887

Fax: (785) 483-5566

Bill To:
American Energies Corp. 155 N. Market Ste. #710 Wichita, KS 67202

Federal Tax I.D.#: 20-5975804

2026.001

Customer ID	Well Name# or Customer P.O.	Payment Terms	
Am Eng	Dudrey #6-36	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS2-01	Great Bend	Apr 12, 2011	5/12/11

Quantity	Item	Description	Unit Price	Amount
245.00	MAT	Class A Common	16.25	3,981.25
5.00	MAT	Gel	21.25	106.25
9.00	MAT	Chloride	58.20	523.80
259.00	SER	Handling	2.25	582.75
14.00	SER	Mileage 249 sx @.11 per sk per mi	28.49	398.86
1.00	SER	Surface	1,125.00	1,125.00
28.00	SER	Pump Truck Mileage	7.00	196.00
28.00	SER	Light Vehicle Mileage	4.00	112.00
1.00	EQP	8.5/8 Wooden Plug	53.00	53.00
1.00	CEMENTER	David West		
1.00	OPER ASSIST	Greg Redetzke		
1.00	OPER ASSIST	Kevin Weighous		

END MAY -2

Subtotal	7,078.91
Sales Tax	340.49
Total Invoice Amount	7,419.40
Payment/Credit Applied	
TOTAL	7,419.40

ALL PRICES ARE NET, PAYABLE 30 DAYS FOLLOWING DATE OF INVOICE. 1 1/2% CHARGED THEREAFTER. IF ACCOUNT IS CURRENT, TAKE DISCOUNT OF

\$ 1415.78

ONLY IF PAID ON OR BEFORE

May 7, 2011

6003.62

RECD APR 26 2011

ALLIED CEMENTING CO., LLC. 037184

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:

Great Bend KS

DATE <u>4-12-2011</u>	SEC <u>36</u>	TWP <u>29</u>	RANGE <u>12</u>	CALLED OUT	ON LOCATION	JOB START <u>6:00 AM</u>	JOB FINISH <u>6:30 AM</u>
LEASE <u>Durley</u>	WELL # <u>6-36</u>	LOCATION <u>Isabel KS, 1N, 1/2 W</u>			COUNTY <u>Pleasant</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one) <u>NEW</u>		<u>3/1 INTO</u>					

CONTRACTOR Pickroll #1 OWNER American Energy's

TYPE OF JOB

HOLE SIZE 12 1/4 T.D. 283

CASING SIZE 2 5/8 DEPTH 275

TUBING SIZE DEPTH

DRILL PIPE 4 1/2 DEPTH 283

TOOL DEPTH

PRES. MAX 250 PSI MINIMUM -

MEAS. LINE SHOE JOINT 15 FT

CEMENT LEFT IN CSG. 15 FT

PERFS.

DISPLACEMENT Fresh Water 16 1/2 BBL's

EQUIPMENT

PUMP TRUCK CEMENTER David

#224 HELPER Greg Ri

BULK TRUCK

#341 DRIVER Kevin W

BULK TRUCK

DRIVER

REMARKS:

Pipe on bottom break pipe
mix 245SX A + 3% GEL + 2% Gel
Shut Down Release Plug Displace
with 16 1/2 BBL's Fresh Water
Shut in cement did cure

CHARGE TO: American Energy's

STREET

CITY STATE ZIP

CEMENT

AMOUNT ORDERED 245SX A + 3% GEL

2% Gel

COMMON 245 @ 16.25 3,981.25

POZMIX @

GEL 5 @ 21.25 106.25

CHLORIDE 9 @ 58.20 523.80

ASC @

@

@

@

@

@

@

@

HANDLING 259 @ 2.25 582.75

MILEAGE 259 x 14 x .11 398.76 398.76

TOTAL 5,592.91

SERVICE

DEPTH OF JOB 275 FT

PUMP TRUCK CHARGE 1125.00

EXTRA FOOTAGE @

MILEAGE 28 @ 7.00 196.00

MANIFOLD @

Light Truck 28 @ 4.00 112.00

@

TOTAL 1,433.00

PLUG & FLOAT EQUIPMENT

Wooden Plug @ 53.00 53.00

@

@

@

@

TOTAL 53.00

SALES TAX (If Any)

TOTAL CHARGES [scribble]

DISCOUNT [scribble]

IF PAID IN 30 DAYS

PRINTED NAME x Mike Keon

SIGNATURE x Mike Keon

REC'D APR 26 2011

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.



PO BOX 31 Russell, KS 67665

INVOICE

Invoice Number: 126983

Invoice Date: Apr 21, 2011

Page: 1

Voice: (785) 483-3887

Fax: (785) 483-5566

Bill To:
American Energies Corp. 155 N. Market Ste. #710 Wichita, KS 67202

Federal Tax I.D.#: 20-5975804

2152.001

Customer ID	Well Name# or Customer P.O.	Payment Terms	
Am Eng	Dudley #6-36	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-03	Medicine Lodge	Apr 21, 2011	5/21/11

Quantity	Item	Description	Unit Price	Amount
102.00	MAT	Class A Common	16.25	1,657.50
68.00	MAT	Pozmix	8.50	578.00
6.00	MAT	Gel	21.25	127.50
178.00	SER	Handling	2.25	400.50
15.00	SER	Mileage 178 sx @ .11 per sk per mi	19.58	293.70
1.00	SER	Rotary Plug	1,250.00	1,250.00
30.00	SER	Pump Truck Mileage	7.00	210.00
30.00	SER	Light Truck Mileage	4.00	120.00
1.00	CEMENTER	Matt Thimesch		
1.00	EQUIP OPER	Jason Thimesch		
1.00	EQUIP OPER	Raymond Romans		

ENTD MAY 12

Subtotal	4,637.20
Sales Tax	338.52
Total Invoice Amount	4,975.72
Payment/Credit Applied	
TOTAL	4,975.72

ALL PRICES ARE NET, PAYABLE 30 DAYS FOLLOWING DATE OF INVOICE. 1 1/2% CHARGED THEREAFTER. IF ACCOUNT IS CURRENT, TAKE DISCOUNT OF

\$ *927.44*

ONLY IF PAID ON OR BEFORE

May 16, 2011

4048.28

RECD APR 28 2011

ALLIED CEMENTING CO., LLC. 040145

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:
Madison

DATE <u>4-21-11</u>	SEC <u>36</u>	TWP. <u>29S</u>	RANGE <u>12W</u>	CALLED OUT	ON LOCATION	JOB START <u>6:30pm</u>	JOB FINISH <u>7:30pm</u>
LEASE <u>Ordway</u>	WELL # <u>6-36</u>	LOCATION <u>Federal, N.S. 1N, 1 1/2W, State</u>			COUNTY <u>Pratt</u>	STATE <u>KS</u>	
OLD OR <input checked="" type="checkbox"/> NEW (Circle one)							

CONTRACTOR Prockrell Drilling OWNER American Exercise

TYPE OF JOB Rotary Plug

HOLE SIZE _____ T.D. _____ CEMENT AMOUNT ORDERED 170 SK 60:40:4%gd

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4 1/2 DEPTH 690'

TOOL _____ DEPTH _____

PRES. MAX 300psi MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

EQUIPMENT

PUMP TRUCK CEMENTER not Thomasch

471/265 HELPER Jason Thomasch

BULK TRUCK _____

364 DRIVER Raymond R

BULK TRUCK _____

_____ DRIVER _____

REMARKS:

Run pipe to 690' pump 10 bbls H₂O
mix 50SK disp 5 1/2 bbls H₂O
pipe at 300' mix 50SK disp 1/2 bbls H₂O
pipe at 60' mix 20SK
mix 30SK for rot hole
mix 20SK for mesh hole

CHARGE TO: American Exercise

STREET _____

CITY _____ STATE _____ ZIP _____

CEMENT AMOUNT ORDERED 170 SK 60:40:4%gd

COMMON class A 102SK @ 16.25 1657.50

POZMIX 68SK @ 8.50 578.00

GEL 6SK @ 21.25 127.50

CHLORIDE _____ @ _____

ASC _____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

HANDLING 178 @ 2.25 293.70

MILEAGE 15.11/178 344.00

TOTAL 3057.20

SERVICE

DEPTH OF JOB 690'

PUMP TRUCK CHARGE _____ 1250.00

EXTRA FOOTAGE _____ @ _____

MILEAGE 30 @ 7.00 210.00

MANIFOLD _____ @ _____

Light Vehicle 30 @ 4.00 120.00

_____ @ _____

TOTAL 1580.00

PLUG & FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS

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 MIKE KEAN

SIGNATURE Mike Kean

REC'D APR 28 2011