



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

KANSAS CORPORATION COMMISSION 1063620
OIL & GAS CONSERVATION DIVISION
WELL PLUGGING RECORD
 K.A.R. 82-3-117

Form CP-4
 March 2009
Type or Print on this Form
Form must be Signed
All blanks must be Filled

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. 038169

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:
Russell Ks.

DATE <u>9-1-2011</u>	SEC. <u>11</u>	TWP. <u>14 S</u>	RANGE <u>19 W</u>	CALLED OUT	ON LOCATION	JOB START <u>1:00PM</u>	JOB FINISH <u>1:30PM</u>
LEASE <u>STADLEMAN</u> WELL # <u>4</u>		LOCATION <u>HAY'S GOLF COURSE RD.</u>			COUNTY <u>ELLIS</u>	STATE <u>KANSAS</u>	
OLD OR NEW (Circle one)		<u>2 W 1/2 S 1/2 W INTO</u>					

CONTRACTOR Co Tools
 TYPE OF JOB PLUG ABANDONED Well
 HOLE SIZE _____ T.D. _____
 CASING SIZE 4 1/2 DEPTH 3830
 TUBING SIZE 2" DEPTH 3350
 DRILL PIPE 8 5/8 SURFACE DEPTH 294
 TOOL _____ DEPTH _____
 PRES. MAX 500# MINIMUM 300#
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT _____

OWNER _____
 CEMENT _____
 AMOUNT ORDERED 230 SX, 60 4% GEL
500 # Hull's
 COMMON 138 @ 16.25 2242.50
 POZMIX 92 @ 8.50 782.00
 GEL 8 @ 21.25 170.00
 CHLORIDE _____ @ _____
 ASC _____ @ _____
 _____ @ _____
Hull's 10 SKS @ 31.85 318.50
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 HANDLING 238 @ 2.25 535.50
 MILEAGE 11/5K/1.6 78.54

EQUIPMENT

PUMP TRUCK CEMENTER Glenn
 # 417 HELPER Woody
 BULK TRUCK _____
 # 473 DRIVER Ron
 BULK TRUCK _____
 # _____ DRIVER _____

REMARKS:

2" Tubing @ 3350' Spot 100sx Cement w/ 250# Hull's, Pulled to 1850 & Circulated Cement to Surface w/ 105 SX Cement & 250# Hull's Pulled 2" Tubing. 4 1/2 CSG. Hacked to w/ Swage & Squeezed in another 25 SX @ 500# & SHUT IN. 8 5/8 Backside Full of Cement, Pressured to 300# & Held. Could Not Pump INTO. THANK'S

SERVICE

DEPTH OF JOB _____
 PUMP TRUCK CHARGE _____ 1250.00
 EXTRA FOOTAGE _____ @ _____
 MILEAGE 6 @ 7.00 42.00
 MANIFOLD _____ @ _____
6 @ 4.00 24.00
 _____ @ _____

CHARGE TO: Paul Bowman Trust
 STREET _____
 CITY _____ STATE _____ ZIP _____

TOTAL 1316.00

PLUG & FLOAT EQUIPMENT

 @ _____

 @ _____

 @ _____

 @ _____

 @ _____

To Allied Cementing Co., LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or