



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

KANSAS CORPORATION COMMISSION 1072983
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. 037984

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:

Med. Lotself

DATE <i>12-5-11</i>	SEC <i>16</i>	TWP. <i>21S</i>	RANGE <i>16W</i>	CALLED OUT	ON LOCATION	JOB START <i>10:00 am</i>	JOB FINISH <i>12:00 am</i>
LEASE <i>R6W</i>	WELL # <i>H16</i>	LOCATION <i>Leonida, E on 56 to 100th Ave</i>			COUNTY <i>Pawnee</i>	STATE <i>KS</i>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)			<i>2 N, west into</i>				

CONTRACTOR *Sterling Drilling*
 TYPE OF JOB *Rotary plug*
 HOLE SIZE *7 7/8* T.D.
 CASING SIZE DEPTH
 TUBING SIZE DEPTH
 DRILL PIPE *4 1/2* DEPTH *3880'*
 TOOL DEPTH
 PRES. MAX MINIMUM
 MEAS. LINE SHOE JOINT
 CEMENT LEFT IN CSG.
 PERFS.
 DISPLACEMENT

OWNER *Shelby Resources*
 CEMENT
 AMOUNT ORDERED *240 sk x 60:40:4 1/2 sk + 1/4 #9 seal*

EQUIPMENT
 PUMP TRUCK CEMENTER *Matt Thamesh*
 # *360/265* HELPER *Daren Thamesh*
 BULK TRUCK
 # *363/290* DRIVER *Eddie Aper*
 BULK TRUCK
 # DRIVER

COMMON	<i>144 sacks "A"</i>	@	<i>16.25</i>	<i>2340-</i>
POZMIX	<i>96 sacks</i>	@	<i>8.50</i>	<i>816-</i>
GEL	<i>9 sacks</i>	@	<i>21.25</i>	<i>191.25</i>
CHLORIDE		@		
ASC		@		
<i>floseal</i>	<i>60#</i>	@	<i>2.70</i>	<i>162-</i>
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<i>251</i>	@	<i>2.25</i>	<i>564.75</i>
MILEAGE	<i>251 / 0.11 / 25</i>			<i>690.25</i>
TOTAL				<i>4764.25</i>

REMARKS:

*plug 3880' pump 10 bbls H₂O m/r and pump 50 sk cement
 disp 2 bbls H₂O + 40 bbls mud.
 plug at 1080' pump 8 bbls H₂O ahead m/r and pump 50 sk cement
 disp 10 bbls mud.
 plug at 570' pump 8 bbls H₂O m/r and pump 50 sk
 disp 4 bbls H₂O
 plug at 210' pump 8 bbls H₂O m/r and pump 40 sk cement
 disp 1/4 bbls H₂O
 plug at 60' m/r and pump 20 sk
 m/r and pump 30 sk for float/c.*

SERVICE:

DEPTH OF JOB	<i>3880'</i>		
PUMP TRUCK CHARGE			<i>1250-</i>
EXTRA FOOTAGE		@	
MILEAGE	<i>50</i>	@	<i>7.00 350.00</i>
MANIFOLD		@	
<i>W</i>	<i>50</i>	@	<i>4.00 200.00</i>
		@	
TOTAL <i>1800.00</i>			

CHARGE TO: *Shelby Resources*
 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.

SALES TAX (If Any) _____
 TOTAL CHARGES *6564.25*
 DISCOUNT *50/20* IF PAID IN 30 DAYS
NET 4631.28

PRINTED NAME *Jake Fahrnenbrach*
 SIGNATURE *Jacob Fahrnenbrach*