

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

the same are true and correct, so help me God.

#### KANSAS CORPORATION COMMISSION 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 #:			API No	. 15				
Name:								
Address 1:				Sec	Twp S. R East	West		
Address 2:				Feet from North / South Line of S				
City:	State:	Zip: +		Feet from East / West Line of Sect				
Contact Person:			Footag					
Phone: ( )				NE NW	SE SW			
Type of Well: (Check one)	Oil Well Gas We	I OG D&A Cath	hodic					
Water Supply Well	Other:	SWD Permit #:						
ENHR Permit #:		s Storage Permit #:			Well #:			
Is ACO-1 filed? Yes	No If not, is	s well log attached? Yes		•	proved on:			
Producing Formation(s): I					(KCC <b>District</b> Agent's	, ,		
•	•	Bottom: T.D						
•	•	Bottom: T.D	Pluggir	•				
		Bottom: T.D	Pluggir	ng Completed:				
r								
Show depth and thicknes	s of all water, oil and gas	formations.						
	Vater Records	I	Casing Record (S	Surface, Conductor & Prod	duction)			
Formation	Content	Casing	Size	Setting Depth	Pulled Out			
Tomaton	Content	Casing	GIZE	Octung Deptin	1 diled Out			
		ter of same depth placed from	•		nods used in introducing it into the	noie. II		
Plugging Contractor Licer	nse #:		Name:					
Address 1:			Address 2:					
City:			State: _					
Phone: ( )								
Name of Party Responsib	ole for Plugging Fees:							
State of	Cou	inty,	, ss.					
		•		Employee of Operator o	r Operator on above-describe	ad well		
	(Print Nar			Employee of Operator o	. Deciator on above-describe	, a well,		

Submitted Electronically

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



470 Yucca Ln Pratt, K\$ 67124 Office Phone (620)672-9100 Fax (620)672-5020

Bill To: AMERICAN ENERGIES COPPE PO BOX 516 CANTON, KS 67428



## INVOICE

DATE INVOICE # January 19, 2012

4896

Lease Name AE Green Leaf Well Number

County State Kingman KS

QUANTITY	DESCRIPTION	Table 1	UNIT PRICE	AMOUNT
(** ** ** ** ** ** ** ** ** ** ** ** **				
	01/03/2012 Work Ticket #13603			Para Marca Care
4.5	Rig #22 Operator & 2 men		225.00	1 0 12 50
2.0	Gal Wash Gas	·	3.20	640
	01/04/2012 Work Ticket #13604	· [.		
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	, and a second		100.00	300.00
		<u> </u>	0.1070741	
	# 1		SUBTOTAL	2,225.30
	••	•	TAX RATE	7.05%
			SALES TAX	156-88
			TOTAL	SVALVE E E STEINE

Nº 13603

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FLOOR HAND	Dovald	•				41/2	<b></b>		
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PO Box 31 Russell, KS 67665

Voice:

(817) 546-7282

Fax:

(817) 246-3361

Bill To:

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

### INVOICE

Invoice Number: 129800

Invoice Date: Jan 4, 2012

Page:

1

Federal Tax I.D.#: 20-5975804

192152

1.51 4. 11	Customer ID	Well Name/# or Customer P.O.	Paymen	t Terms
	Am Eng	DWWD AE Greenleaf#1	Net 30	Days
	Job Location	Camp Location	Service Date	Due Date
	KS2-09	Medicine Lodge	Jan 4, 2012	2/3/12

Quantity	ltem -	Description Sea	Unit Price	Amount
50.00	MAT	Class A Common	16.25	812.50
1.00	SER	Handling (min)	344.00	344.00
100.00	SER	Mileage	5.50	550.00
1.00	SER	Top Off	1,250.00	1,250.00
100.00	SER	Heavy Vehicle Mileage	7.00	700.00
100.00	SER	Light Vehicle Mileage	4.00	400.00
1.00	CEMENTER	David Felio		
1.00	EQUIP OPER	Ron Gilley		•
1.00	OPER ASSIST	George Wright		
ALL DDICES AF	DE NET DAVADU	Subtotal		4,056.50

ALL PRICES ARE NET, PAYABLE
30 DAYS FOLLOWING DATE OF
INVOICE. 11/2% CHARGED
THEREAFTER. IF ACCOUNT IS
CURRENT, TAKE DISCOUNT OF

\$ 8(1,30

ONLY IF PAID ON OR BEFORE
Jan 29, 2012

Subtotal	4,056.50
Sales Tax	255.56
Total Invoice Amount	4,312.06
Payment/Credit Applied	
TOTAL	4,312.06

# ALLIED CEMENTING CO., LLC. 037868 Federal Tax I.D.# 20-5975804

RUSSELL, KANSAS 67665	SER	VICE POINT:	pelegals
DATE 01-04-12 SEC 3 TWP. RANGE C	ALLED OUT ON LOCATION	JOB START	JOB FINISH 11:00 Am
LEASE GREEN WELL # LOCATION		COUNTY	STATE
OLDOR NEW (Circle one)  CONTRACTOR  TYPE OF JOB Tow off	OWNER American	′	<u> </u>
HOLE SIZE / Z/A T.D.  CASING SIZE S/C DEPTH  TUBING SIZE DEPTH  DRILL PIPE DEPTH  TOOL DEPTH	CEMENT AMOUNT ORDERED 200 SX class A	•	
PRES. MAX 300 MINIMUM — MEAS, LINE SHOE JOINT — CEMENT LEFT IN CSG. PERFS.	COMMON_50SCCKS "A' POZMIX GEL CHLORIDE	@	
DISPLACEMENT — EQUIPMENT	ASC	@	
PUMPTRUCK CEMENTER D. Felio #471-302 HELPER R. Gilley BULK TRUCK #364 DRIVER G. WRight BULK TRUCK # DRIVER		@ @ @ @ @	
REMARKS: Runin 1" Pump 405x class A into Annials, Runin 1" into 8 % Pump 101x class A, topped off.	HANDLING_50Lmm MILEAGE_100x.11x50 SERV		344.00 - 550.00 \$1706.50
	MILEAGE IO	of 1" 2	1250 700.00 400.00
CHARGE TO: American Energies  STREET		TOTAL	\$2350.00
CITYSTATEZIP	PLUG & FLOA	T EQUIPME	NT.
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  SIGNATURE	SALES TAX (If Any)  TOTAL CHARGES  DISCOUNT 200  NLt S1	### TOTAL  ###################################	.50 ID IN 30 DAYS