



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

KANSAS CORPORATION COMMISSION 1081304
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

4-2-y REPL #1

STATE KANSAS CO. ROOKS MAP NO. _____ S-T-R 20-7S-17W D

OPER. C P I LOC. NE NE SW INIT. _____

8 PARKADE PLAZA COLUMBIA, MO 65201

WELL J KRILEY "E" DO

CONTR. EMPHASIS OIL FIN. _____


FIELD RIFFE (MULTIPAY) ELEV. *1765 KB

IP *P 120 BOPD, NW (ARB) 3280-88, OH SUBSTRUCTURE _____

API 15-163-21565 FR 2/1/82 COMP. *1/3/82

SPUD 12/19/81, 8 5/8 @ 757 w/325, Geol: Eric Wadde11
 RTD 3281, 5 1/2 @ 3280
 *CO + DD 3288 DDTD, swbd 66 BOPH, nat
 *IPP 120 BOPD, NW (ARBUCKLE) 3280-88, OH
 *COMPLETED 1/3/82
 *ADDED/CORRECTED DATA
 *REPLACES COMP ISSUED 4/13/82
 .PL #1 ISSUED 11/30/82

*KB LOG TOPS:
 LANSING 2941 - 1176
 ARBUCKLE 3278 - 1513
 RTD 3281 - 1516
 DDTD 3288 - 1523
 TD IN ARBUCKLE

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GREAT GUNS

R A Guard Log

FILE NO.	COMPANY <u>C. P. I.</u>			
	WELL <u>KRILEY 'E' NO. 1</u>			
	FIELD _____			
	COUNTY <u>ROOKS</u>	STATE <u>KANSAS</u>		
	LOCATION: <u>SE-SE-SE</u>			OTHER SERVICES
	SEC <u>20</u>	TWP <u>7S</u>	RGE <u>17W</u>	
Permanent Datum	<u>GROUND LEVEL</u> Elev. <u>1763</u>			Elevations: KB <u>1768</u>
Log Measured from	<u>KELLY BUSHING 5</u> Ft. Above Permanent Datum			DF <u>--</u>
Drilling Measured from	<u>KELLY BUSHING</u>			GL <u>1763</u>
Date <u>1-5-82</u>	GAMMA RAY	NEUTRON	GUARD	CALIPER
Run No.	ONE	ONE	ONE	ONE
Depth—Driller	3281	3281	3281	3281
Depth—Logger	3278	3278	3278	3278
Bottom Logged Interval	3269	3277	3273	3266
Top Logged Interval	2650	2650	2650	2650
Casing—Driller	@	@	8-5/8 @ 757	@
Casing—Logger			757	
Bit Size			7-7/8	
Type Fluid in Hole			SALT GEL STARCH	
Density and Viscosity			10.9 52	
pH and Fluid Loss		cc	7.0 14.4cc	cc
Source of Sample			FLOW LINE	
Rm @ Meas. Temp.	@ °F	@ °F	.47 @ 68 °F	@ °F
Rmf @ Meas. Temp.	@ °F	@ °F	.35 @ 68 °F	@ °F
Rmc @ Meas. Temp.	@ °F	@ °F	.82 @ 68 °F	@ °F
Source of Rmf and Rmc			CHART\$	
Rm @ BHT	@ °F	@ °F	.31 @ 103 °F	@ °F
Time Since Circ.			2 HOURS	
Max. Rec. Temp. Deg. F.		°F	103 °F	°F
Equip No. and Location			45 HAYS	
Recorded By			D. SCHUKMAN	
Witnessed By			MR. ERIC WADDELL	

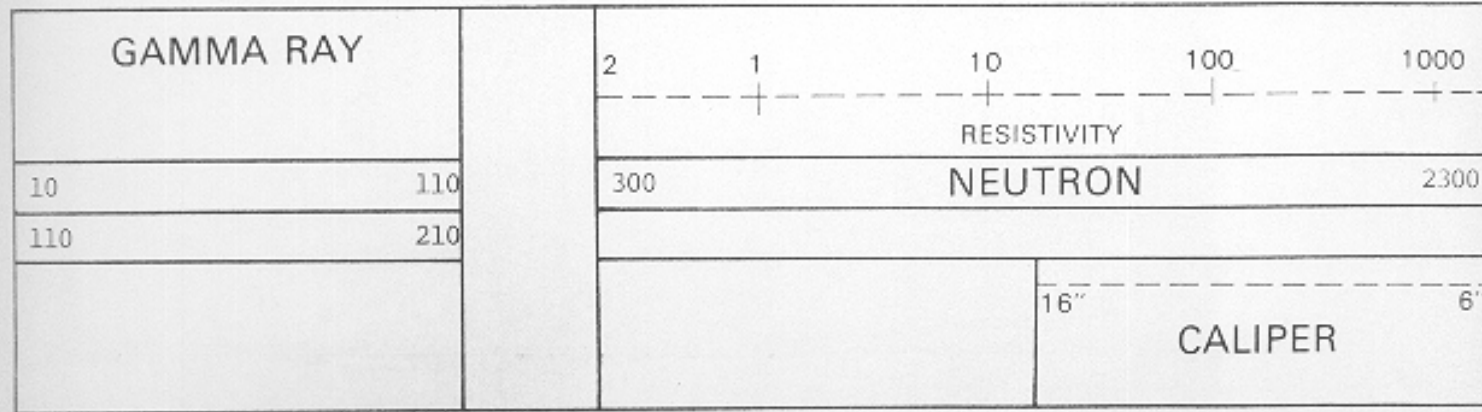
Great Guns does not guarantee the accuracy of any interpretation of log data, conversion of log data to physical rock parameters, or recommendations which may be given by Great Guns personnel or which may appear on the log or in any other form. Any user of such data, interpretations, conversions, or recommendations agrees that Great Guns is not responsible except where due to negligence or willful misconduct, for any loss, damages, or expenses resulting from the use thereof.

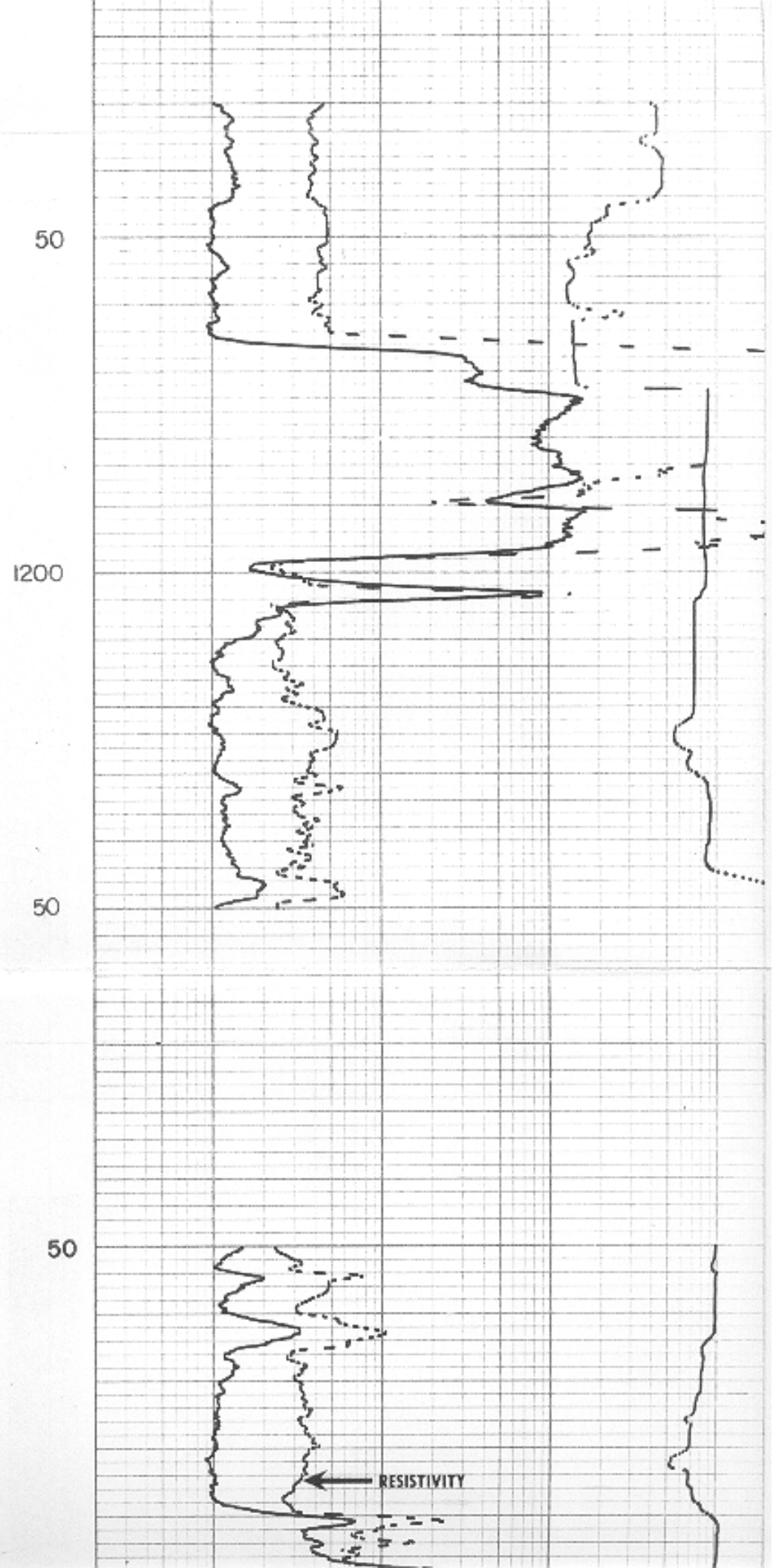
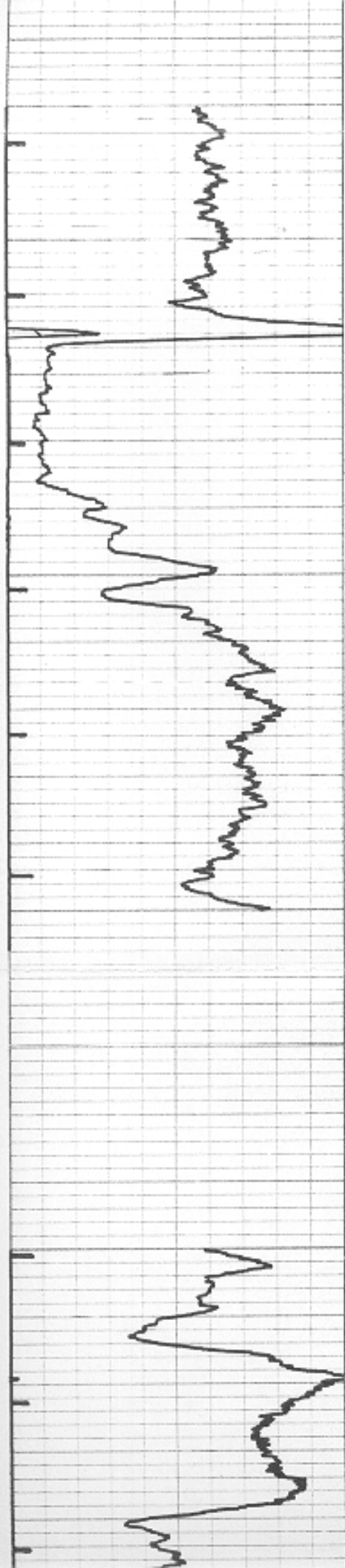
REMARKS _____

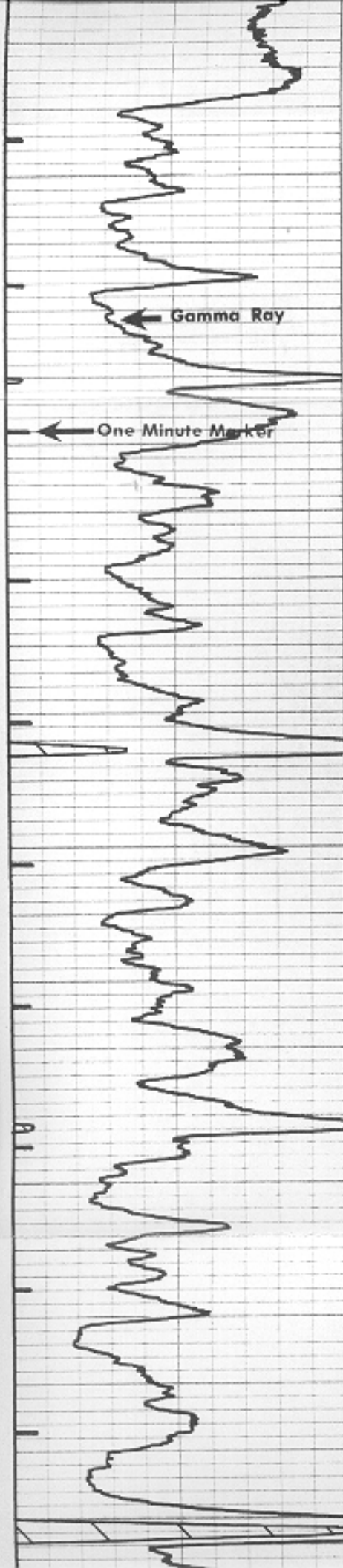
Changes in Mud Type or Additional Samples					Scale Changes				
Date	Sample No.				Type Log	Depth	Scale Up Hole	Scale Down Hole	
Depth-Driller		3281							
Type Fluid in Hole		SALT-GEL STARCH							
Dens.	Visc.	10.9	52						
pH	Fluid Loss	7.0	14.4 cc						
Source of Sample		FLOW LINE			Equipment Data				
Rm @ Meas. Temp.	.47 @ 68 °F	@	°F	Run. No.	Tool Type	Pad Type	Tool Position	Other	
Rmf @ Meas. Temp.	.35 @ 68 °F	@	°F						
Rmc @ Meas. Temp.	.82 @ 68 °F	@	°F						
Source Rmf	Rmc	CHARIS							
Rm @ BHT	.31 @ 103 °F	@	°F						
Rmf @ BHT	.23 @ 103 °F	@	°F						
Rmc @ BHT	.54 @ 103 °F	@	°F						

EQUIPMENT DATA				
Gamma Ray			Neutron	
Run No.	ONE		Run No.	ONE
Tool Model No.	GCN56XU4A		Log Type	NEU-NEU
Diameter	3.5 IN.		Tool Model No.	GCN56XU4A
Detector Model No.	A. P. A.		Diameter	3.5 IN.
Type	SCINTILLATION		Detector Model No.	H. S. P.
Length	3 IN.		Type	PROPORTIONAL
Distance to N. Source	107 IN.		Length	6 IN.
General			Source Model No.	SEALED
Hoist Truck No.	45		Serial No.	040
Instrument Truck No.	45		Spacing	17 IN.
Tool Serial No.	3304		Type	AM BE
			Strength	3 CURIES

LOGGING DATA											
General			Gamma Ray		Neutron						
Run No.	Depths		T. C. Sec.	Sens. Settings	Zero Div. L or R	API G.R. Units per Log Div.	T. C. Sec.	Sens. Settings	Zero Div. L or R	API N. Units per Log Div.	
ONE	3278	2650	20	3	.90	1 I.	10 P.D.	2	.20	2 R	100 P.D.







2700

Gamma Ray

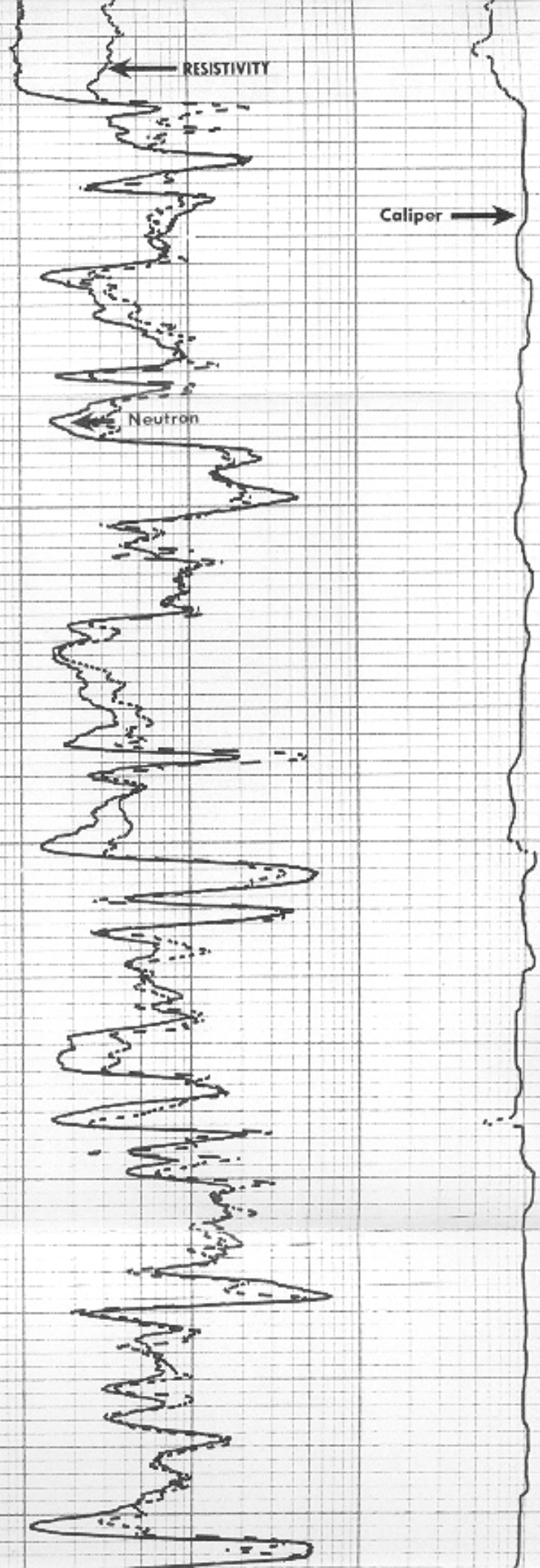
One Minute Marker

50

2800

50

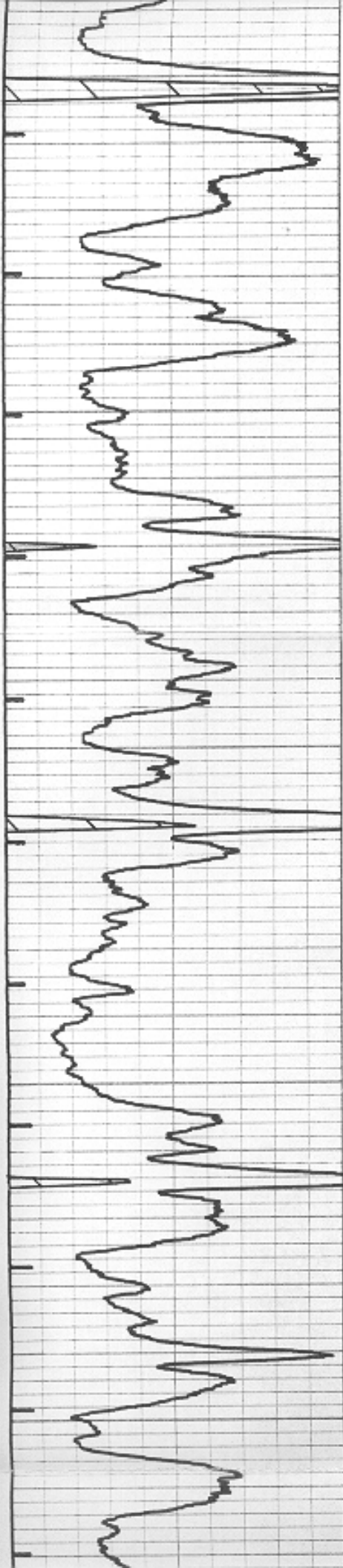
2900



RESISTIVITY

Neutron

Caliper



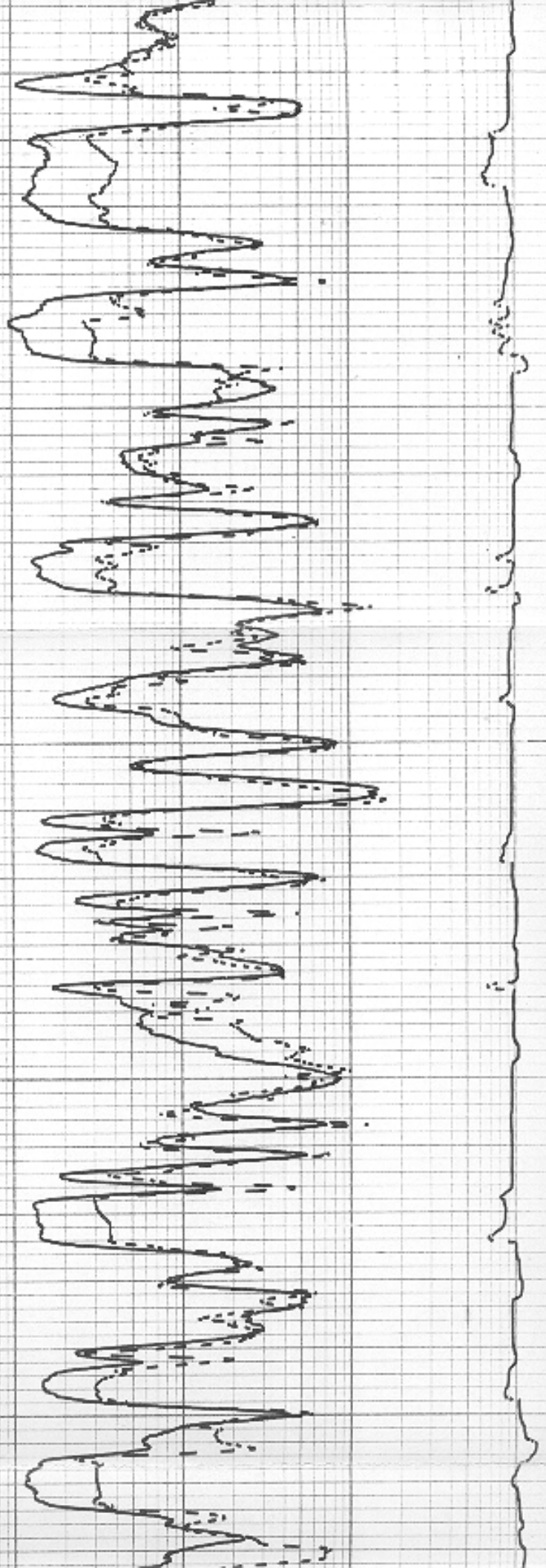
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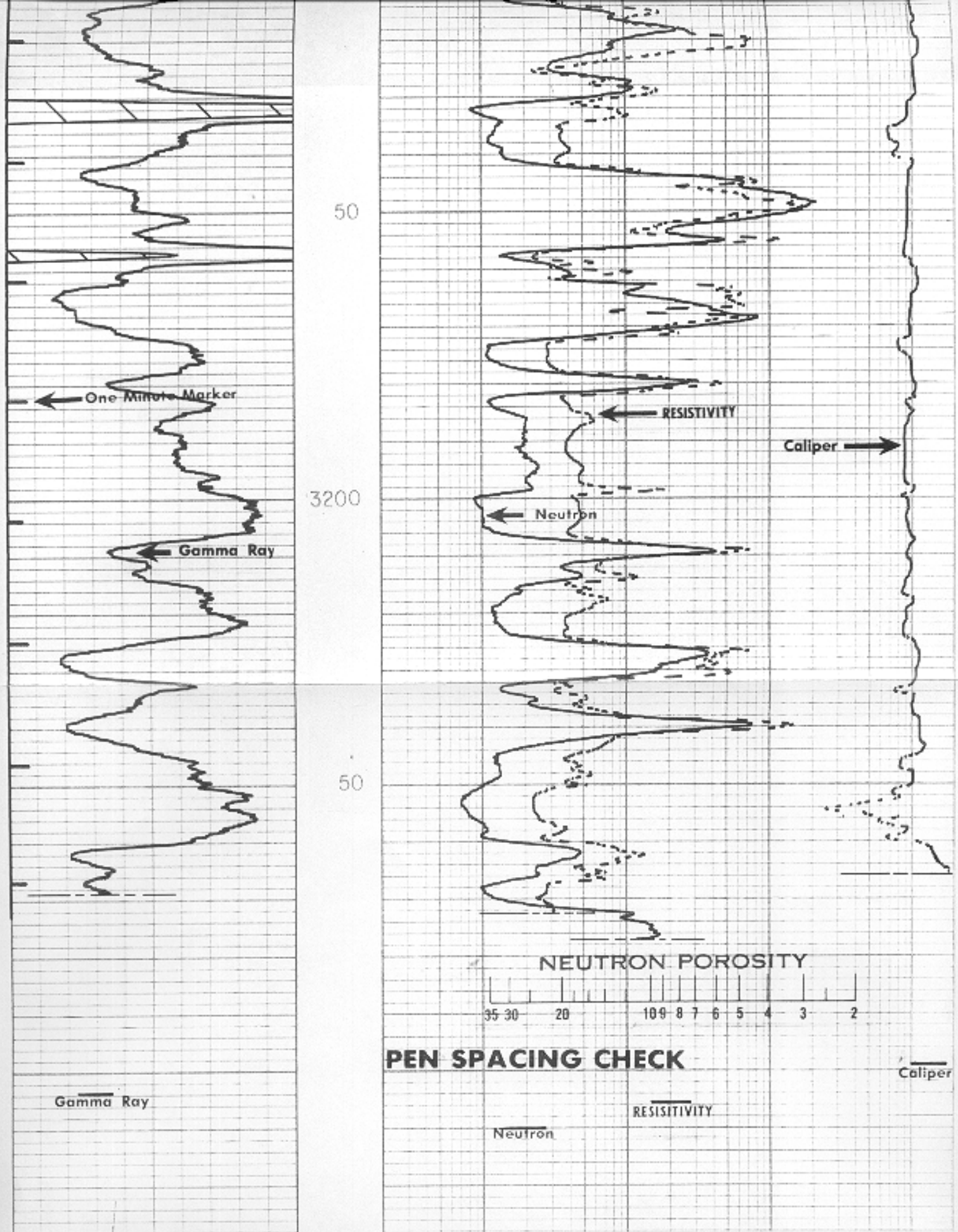
50

3000

50

3100





GAMMA RAY

RESISTIVITY