



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

KANSAS CORPORATION COMMISSION 1086431  
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

AMERICAN ENERGIES CORP.  
P O BOX 516, 136 N MAIN  
CANTON, KS. 67428

PULLING UNIT #1

JUN 18 2012

PHONE: 620-628-4424 FAX: 620-628-4435

DATE JOB STARTED 5-29-12  
LEASE: Marshall  
COUNTY Chase Co.

DATE JOB COMPLETED: 6-1-12  
WELL # A

Acidizing \_\_\_\_\_ Frac Well \_\_\_\_\_ Perforating Well \_\_\_\_\_  
Squeeze Job \_\_\_\_\_ Workover \_\_\_\_\_

**WORK PERFORMED:**  
(Please circle appropriate job)

**Pump Change:**  
New: \_\_\_\_\_ Rebuilt \_\_\_\_\_ Size of pump \_\_\_\_\_

**Rod Part:** Size & Type of Replacement \_\_\_\_\_  
Rod Break-Number of jts. Down \_\_\_\_\_ Kind of Break \_\_\_\_\_

**Tubing Failure:**  
Tubing leak-Number of Jts Down \_\_\_\_\_ Kind of Break \_\_\_\_\_ Size & Type of Replacement \_\_\_\_\_  
Replaced with New \_\_\_\_\_ or Used \_\_\_\_\_

**Plugging Well:** Please Complete Information  
Bottom to Number of Sacks cement at \_\_\_\_\_  
Top Number of Sacks cement at \_\_\_\_\_  
Number of Sacks cement at \_\_\_\_\_  
Number of Sacks cement at \_\_\_\_\_  
50 sacks Total Number of Sacks of Cement

\_\_\_\_\_ feet Type of Cement used: \_\_\_\_\_  
\_\_\_\_\_ feet Ticket number: 37939  
\_\_\_\_\_ feet Cementing Company: Gresel  
\_\_\_\_\_ feet Date Plugging Completed: 6-1-12  
State Plugging Agent: Patrick Shields

**Description of Work Performed:**

(5-29-12) Rig up - Pull out rods, pump & tubing, sand off well (2 1/2)  
(5-30-12) Tag sand at 1125 - Spot 4 sacks of cement on top (1 1/2)  
(6-1-12) Plug well. (1)

Took all equip. to Lehigh yd. used

Joins	Feet	Size	Pulled from Well:				Equipment	Run In Well:					
							Packer						
							Anchor						
1	16	1 1/2					Polished Rod						
47		5/8					Rods						
							Rods						
1	2	5/8	2'	4'	6'	8'	10'	Rod Subs	2'	4'	6'	8'	10'
1		2 x 1 1/2 x 8'						Pump					
37		2 3/8						Tubing					
			2'	4'	6'	8'	10'	Tubing Subs	2'	4'	6'	8'	10'
								Barrel					
1	10'	2 3/8						Mud Anchor					

Services	Hours	Per Hour	Amount
Unit and Power Tools	<u>5</u>	\$175.00	\$
Road Time - Per hour		\$175.00	\$
Supervisor time		\$40.00	\$
Material Transfer			\$
Swab Cups			\$
		Sales Tax	\$
		<b>Total Due</b>	\$

Signed Paul P.

Date: \_\_\_\_\_

# COPELAND

Acid & Cement

POST OFFICE BOX 438  
 HAYSVILLE, KS 67060  
 (316) 524-1225  
 (316) 524-1027 FAX

**Invoice**

Page: 1

BURRTON, KS ♦ GREAT BEND, KS  
 (620) 463-5161 (620) 793-3366  
 FAX (620) 463-2104 FAX (620) 793-3536

INVOICE NUMBER:  
**C37939-IN**

**BILL TO:**  
**AMERICAN ENERGIES CORP.**  
**P.O. BOX 516**  
**CANTON, KS 67428**

LEASE: **MARSHAL A**

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE ORDER	SPECIAL INSTRUCTIONS	
06/12/2012	C37939		06/01/2012		NET 30	
QUANTITY	U/M	ITEM NO./DESCRIPTION		D/C	PRICE	EXTENSION
1.00	EA	CEMENT PUMP CHARGE		0.00	650.00	650.00
50.00	SAX	60-40 POZ MIX 4% GEL		0.00	9.69	484.50
1.00	EA	POLY TRAILER RENTAL		0.00	250.00	250.00
16.00	MI	CEMENT MILEAGE PUMP TRUCK		0.00	4.00	64.00
32.00	MI	CEMENT MILEAGE		0.00	2.00	64.00
1.00	EA	MIN. BULK CHARGE		0.00	150.00	150.00
211.30	MI	BULK TRUCK - TON MILES		0.00	1.10	232.43
<b>REMIT TO:</b> P.O. BOX 438 HAYSVILLE, KS 67060		COP-B FUEL SURCHARGE IS NOT TAXABLE AND IS ADDED TO MILEAGE, PUMP AND OR DELIVERY CHARGES ONLY.		Net Invoice: CHSCO Sales Tax: Invoice Total:		1,894.93 65.70 <u>1,960.63</u>
RECEIVED BY _____		<b>NET 30 DAYS</b>				

There will be a charge of 1.5% "per month" (18% annual rate) on all accounts over 30 days past due.

Copeland Acid & Cement is a subsidiary of Gressel Oil Field Service  
 Gressel Oil Field Service reserves a security interest in the goods sold until the same are paid for in full and reserve all the rights of a secured party under the Uniform Commercial Code



**FIELD ORDER N° C 37259**

BOX 498 • HAYSVILLE, KANSAS 67060  
316-524-1225

DATE June 1 20 12

IS AUTHORIZED BY: Amelia Ferguson Co.  
(NAME OF CUSTOMER)

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

To Treat Well \_\_\_\_\_  
As Follows: Lease Marble Well No. 11 Customer Order No. \_\_\_\_\_

Sec. Twp. \_\_\_\_\_  
Range \_\_\_\_\_ County Chase State K

CONDITIONS: As a part of the consideration hereof it is agreed that Copeland Acid Service is to service or treat at owners risk, the hereinbefore mentioned well and is not to be held liable for any damage that may accrue in connection with said service or treatment. Copeland Acid Service has made no representation, expressed or implied, and no representations have been relied on, as to what may be the results or effect of the servicing or treating said well. The consideration of said service or treatment is payable. There will be no discount allowed subsequent to such date. 6% interest will be charged after 60 days. Total charges are subject to correction by our invoicing department in accordance with latest published price schedules.

The undersigned represents himself to be duly authorized to sign this order for well owner or operator.

THIS ORDER MUST BE SIGNED BEFORE WORK IS COMMENCED

Well Owner or Operator

By

Agent

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
	1	Pump Charge		600
	50 gal	Drill Water 4-8 PPM 900/500		480
	1	Rly Tanker Rental		300
	16	Yield total water to pump 400		160
	16	Yield total water to pump 900		160
	50 gal	Bulk Charge 12" drill 11 in 400		120
	11 mi	Bulk Truck Miles 11 mi		232
		Process License Fee on _____ Gallons		
<b>TOTAL BILLING</b>				1112

I certify that the above material has been accepted and used; that the above service was performed in a good and workmanlike manner under the direction, supervision and control of the owner, operator or his agent, whose signature appears below.

Copeland Representative \_\_\_\_\_

Station \_\_\_\_\_

Well Owner, Operator or Agent \_\_\_\_\_

Remarks \_\_\_\_\_

**NET 30 DAYS**



### TREATMENT REPORT

Acid Stage No. RT

Unit: 6-1-12 District: Bullet F. O. No. \_\_\_\_\_  
 Company: American Energy Corp  
 Well Name & No.: Marshal A  
 Location: \_\_\_\_\_ Field: \_\_\_\_\_  
 County: Onondaga State: NY

Casing: Size: 4 1/2 Type & Wt. \_\_\_\_\_ Set at \_\_\_\_\_ ft.  
 Formation: \_\_\_\_\_ Perf. to \_\_\_\_\_ to \_\_\_\_\_  
 Formation: \_\_\_\_\_ Perf. to \_\_\_\_\_ to \_\_\_\_\_  
 Formation: \_\_\_\_\_ Perf. to \_\_\_\_\_ to \_\_\_\_\_

Liner: Size \_\_\_\_\_ Type & Wt. \_\_\_\_\_ Top at \_\_\_\_\_ ft. Bottom at \_\_\_\_\_ ft.  
 Cemented: Yes/No. Perforated from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 Tubing: Size & Wt. \_\_\_\_\_ Spung at \_\_\_\_\_ ft.  
 Perforated from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Open Hole Size: \_\_\_\_\_ T. I. \_\_\_\_\_ ft. P. H. to \_\_\_\_\_ ft.

Type Treatment: Aml. Type Fluid \_\_\_\_\_ Sand Size \_\_\_\_\_ Pounds of Sand \_\_\_\_\_  
 Bkdown: \_\_\_\_\_ Bbl./Gal. \_\_\_\_\_  
 \_\_\_\_\_ Bbl./Gal. \_\_\_\_\_  
 \_\_\_\_\_ Bbl./Gal. \_\_\_\_\_  
 \_\_\_\_\_ Bbl./Gal. \_\_\_\_\_  
 Flush \_\_\_\_\_ Bbl./Gal. \_\_\_\_\_  
 Treated from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. No. ft. \_\_\_\_\_  
 from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. No. ft. \_\_\_\_\_  
 from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. No. ft. \_\_\_\_\_

Actual Volume of Oil/Water to Load Hole: 10 1/2 (G) / Gal.

Pump Trucks, No. Used: 323 No. \_\_\_\_\_ Twin \_\_\_\_\_  
 Auxiliary Equipment: Bulk 302 Hickup 1050 poly trails  
 Packers: \_\_\_\_\_ Set at \_\_\_\_\_ ft.  
 Auxiliary Tools \_\_\_\_\_  
 Mudding or Healing Materials: Type: 50 sacks 60-40-200 Pz

Company Representative \_\_\_\_\_

Treater: Jay Dyl

TIME a.m. <u>PM</u>	PRESSURES		Total Fluid Pumped	REMARKS
	Tubing	Casing		
1:35				Remains TSA fig up low poly to 260'
2:00			0	
:			10 1/2	Street mixing going down hole ✓ 4 1/2 slurry
:				No fluid in casing blew poly pipe pull pipe out
:			135	Repair hole in line top well all
2:15				Casing pull wash up
3:00				End time
:				All tools cleaned up took down left head
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