

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. 1	5				
Name:					Spot Description:				
Address 1:					Sec Twp S. R East West				
Address 2:					Feet from	North /	South Line of Section		
City:	rity:				Feet from East / West Line of Sectio				
Contact Person:					Footages Calculated from Nearest Outside Section Corner:				
Phone: ()					☐ NE ☐ NW ☐ SE ☐ SW				
Type of Well: (Check one)	Oil Well Gas Well	OG D&A Cathoo	dic	County:					
Water Supply Well		SWD Permit #:		Lease Name: \			Well #:		
ENHR Permit #:	Gas S	torage Permit #:		Date Well Completed:					
s ACO-1 filed? Yes	No If not, is we	ell log attached? Yes	No	The plugging proposal was approved on:					
Producing Formation(s): List	•	,		by:(KCC District Agent's Name) Plugging Commenced: Plugging Completed:					
Depth to		rom: T.D							
Depth to		rom: T.D							
Depth to	o Top: Bott	rom:T.D							
Show depth and thickness of	all water oil and gas form	nations							
Oil, Gas or Wate		liations.	Casina l	Pacard (Sur	face, Conductor & Prod	uction)			
Formation	Content	Casing	Size	Record (Sur	Setting Depth	Pulled Out			
Formation	Content	Casing	Size		Setting Depth	Pulled Out			
ement or other plugs were u	sed, state the character of	of same depth placed from (bo	ottom), to ((top) for eac	h plug set.				
Plugging Contractor License #:									
Address 1:			_ Address	2:					
City:				_ State:		Zip:	+		
Phone: ()				_					
Name of Party Responsible for	or Plugging Fees:								
State of	County,			, SS.					
	•				nnlovee of Operator o	Operator on	above-described well,		
	(Print Name)	(Print Name)			ipidyee of Operator of	Operator off	above-described 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

ALLIE OIL & GAS SERVICES, LLC 053652

Federal Tax I.D.# 20-5975804 REMIT TO P.O. BOX 31 SERVICE POINT: **RUSSELL, KANSAS 67665** Great-Bend, 10 SEC. RANGE CALLED OUT ON LOCATION JOB START JOB FINISH COUNTY WELL# OLD OR NEW (Circle one) CONTRACTOR TYPE OF JOB HOLE SIZE T.D. AMOUNT ORDERED **CASING SIZE** DEPTH **TUBING SIZE** DEPTH DRILL PIPE DEPTH TOOL DEPTH PRES. MAX MINIMUM COMMON MEAS. LINE SHOE JOINT POZMIX CEMENT LEFT IN CSG. GEL CHLORIDE DISPLACEMENT ASC **EQUIPMENT** PUMP TRUCK CEMENTER # 166 HELPER **BULK TRUCK** (a) # 378 DRIVER (a) **BULK TRUCK** @ DRIVER HANDLING @ MILEAGE . REMARKS: TOTAL _ SERVICE **DEPTH OF JOB** PUMP TRUCK CHARGE EXTRA FOOTAGE MILEAGE MANIFOLD. @ (a) (a) TOTAL _ STREET STATE ___ ZIP_ PLUG & FLOAT EQUIPMENT @ To: Allied Oil & Gas Services, 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 TOTAL _ done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL SALES TAX (If Any) TERMS AND CONDITIONS" listed on the reverse side. TOTAL CHARGES _____

DISCOUNT ______ IF PAID IN 30 DAYS

PRINTED NAME

OLIFF MAYFIELD

SIGNATURE

Thomas you

ALLIE OIL & GAS SERVICES, LLC 056426 Federal Tax I.D.# 20-5975804

REMIT TO P.O. B RUSS		NSAS 676	65		SER	VICE POINT:	sell Ks.
DATE 6-14-12	SEC.	TWP.	RANGE 26	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
LEASE GARVEY		4-18	LOCATION UTIC	a Ks. 3W	64	COUNTY	STATE KANSAS
CONTRACTOR TYPE OF JOB A HOLE SIZE 7 7/9 CASING	Disco Disco	T.D. T.D. T.D. T.D. T.D. T.D. T.D. T.D.	PTH 221 PTH 221 PTH 1945 PTH INIMUM DE JOINT	COMMONPOZMIXGELCHLORIDEASC	DERED 226	@ _ @ _ @ _ @ _ @ _ @ _ @ _ @ _ @ _ @ _	2 84
BULK TRUCK #	DRIVER					_@ _@	-
25 SX @ 1	1945	MARKS:		_	SERVI		L
40 SX @	211			PUMP TRUCE	K CHARGE		
30 SX @ 1	NOUSE 1	late		MILEAGE	rage	_ @ _ @	
			DERIOR INC			TOTA	L
CITY	S1	TATE	ZIP	65/8U	PLUG & FLOA	2@	
and furnish cemer contractor to do v done to satisfaction contractor. I have	equested nter and work as is on and su e read an	to rent cen helper(s) t s listed. T upervision d understa	nenting equipment	s SALES TAX (lf Any)	@	L
PRINTED NAME	CLIFT	- MAY Voysh	FIELD		OTAL CHARGES IF PAID IN 30 DAY		