



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

KANSAS CORPORATION COMMISSION 1086955
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. 034514

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:
Great Bend

DATE <u>7-7-12</u>	SEC. <u>27</u>	TWP. <u>19</u>	RANGE <u>30</u>	CALLED OUT	ON LOCATION <u>10:00 pm</u>	JOB START <u>11:00 am</u>	JOB FINISH <u>2:00 pm</u>
LEASE <u>Hoye</u>	WELL # <u>27-1</u>	LOCATION <u>Dakota, 115, 8E, 10S,</u>	COUNTY <u>Cove</u>	STATE <u>KS</u>			
OLD OR NEW (Circle one) <u>NEW</u>			<u>3E, Suite</u>				

CONTRACTOR WV #2

TYPE OF JOB PTA

HOLE SIZE 7 7/8 T.D.

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4 1/2 DEPTH 2240'

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT 28.3 bbl

EQUIPMENT _____

OWNER Sams

CEMENT AMOUNT ORDERED 205 sks 6040 49 gal
1/4 # flo seal

COMMON	<u>123 sks @ 16.25</u>	<u>1998.75</u>
POZMIX	<u>82 sks @ 8.50</u>	<u>697.00</u>
GEL	<u>75 sks @ 2.125</u>	<u>159.38</u>
CHLORIDE	@	
ASC	@	
<u>Flo seal 51 #</u>	<u>@ 2.70</u>	<u>137.70</u>
HANDLING	<u>220.17 sks @ 2.10</u>	<u>462.36</u>
MILEAGE	<u>9.19 hrs @ 35K</u>	<u>322.15</u>
		TOTAL <u>4250.64</u>

PUMP TRUCK CEMENTER Kelene Wentz (D)

398 HELPER Dustin

BULK TRUCK Rossin wehner (GB)

347 DRIVER Brandon Wilkison (D)

BULK TRUCK DRIVER _____

REMARKS:

mix 29 sks 2240'

mix 190 sks 1279'

mix 40 sks 2681'

mix 10 sks top of hole w/ plug

plug rat hole 30 sks

Thank you

CHARGE TO: O'Brien Resources

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB 2240'

PUMP TRUCK CHARGE _____ 1250.00

EXTRA FOOTAGE @ _____

MILEAGE 35 @ 7.00 245.00

MANIFOLD @ _____

L.D. mileage 35 @ 4.00 140.00

TOTAL 1635.00

PLUG & FLOAT EQUIPMENT

<u>Wooden plug</u>	@	<u>92.00</u>
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
		TOTAL <u>92.00</u>

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 Jeanne Lang

SIGNATURE Jeanne Lang

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS