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

### **KANSAS CORPORATION COMMISSION**

**OIL & GAS CONSERVATION DIVISION** 

1087310

March 2009 Type or Print on this Form Form must be Signed All blanks must be Filled

Form CP-4

# WELL PLUGGING RECORD K.A.R. 82-3-117

| OPERATOR: License #:  | API No. 15  |
|---|---|
| Name:   | Spot Description:   |
| Address 1:  | Sec Twp S. R East West  |
| Address 2:  | Feet from North / South Line of Section   |
| City: State: Zip: +   | Feet from East / West Line of Section   |
| 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       Cathodic         Water Supply Well       Other:       SWD Permit #:       SWD Permit #:       SWD Permit #:         ENHR Permit #:       Gas Storage Permit #:       Gas Storage Permit #:       No         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. | County: Well #: Well #: Date Well Completed: The plugging proposal was approved on: (Date) by: (KCC District Agent's Name) Plugging Commenced: Plugging Completed: Plugging Pl |
| Depth to Top: Bottom:T.D  |   |
|   |   |

Show depth and thickness of all water, oil and gas formations.

| Oil, Gas or Wate | r Records | Casing Record (Surface, Conductor & Production) |      |               | ction)     |
|------------------|-----------|---|------|---------------|------------|
| 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 Plugg  | ging Fees:                         |  |                        |                        |
| State of                             | County,                            | , SS.  |                        |                        |
|                                      | (Print Name)                       | Employee of Operator                                 | or Operator on ab      | ove-described well,    |
| boing first duly sworn on ooth save: | That I have knowledge of the facts | statements and matters berein contained, and the loc | of the above-described | I wall is as filed and |

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

| 06/28/2012   | 10:59                                  | 6206284435                              |                                       | AMERIC            | AN EN         | <b>ERGI</b>        | ES                               |              | F         | AGE          | 07/10        |
|--|--|---|---------------------------------------|-------------------|---------------|--------------------|----------------------------------|--------------|-----------|--------------|--------------|
|  | P 0 B0                                 | CAN ENERGIES CORP.<br>X 516, 136 N MAIN |                                       |                   |               |                    | Ρυιι                             | NG UNIT      | #1 "jį    | M 2 8        | 3 2012       |
|  |  | N, KS. 67428                            | PHONE: 6                              | 20-628-4          | 4424          | FAX:               | 620-628-4                        | 435          |           |              |              |
| DATE JOB STAF  | RTED 6-                                | -7-12                                   | DATE JOB<br>WELL #                    |                   | LETEC         | ); <u> </u>        | 6-7-1                            |              |           | <u>ה ו ה</u> | . 20717      |
| COUNTY   | chare                                  |   |                                       |                   |               | _                  |                                  |              | /5-0      | 577-         |              |
| Pump Change:   | <u>WORK P</u><br>(Please c             | ERFORMED:<br>ircle appropriate job)     |                                       | ueeze Jo          | b V           | Work               | over                             | -            |           |              |              |
|  | built                                  | Size of pump                            | Rod Part:<br>Rod Break-I              | Size i            | & Type        | of Re              | placement                        | Kind of D    |           |              |              |
|  | <u> </u>                               |   | NOU DIQUE                             | umber o           | 1 118. 01     |                    |                                  |              | ear       |              |              |
| Tubing Failure;<br>Tubing leak-Numbe<br>Replaced with New_ | r of Jts Dow                           | n Kind of Brea<br>or Used               | k                                     | Size 8            | & Туре        | of Re              | placement_                       |              |           |              |              |
| Plugging Well:   | Please Co                              | mplete Information                      |                                       |                   |               |                    |                                  |              |           |              |              |
| Hottom to  |  |   |                                       | feet              | Type          | of Ce              | ment used:                       |              |           |              |              |
| 1.012  |  | Sacks cement at<br>Sacks cement at      |                                       | feet              | Ticket        | numb               | er: <u>3799</u>                  | 4            | ,         |              |              |
|  |  | Sacks cement at                         |                                       | feet              | Data F        | nting C<br>Nurrain | company: <u>0</u><br>g Completer |              | <u>,</u>  |              |              |
| 225×   |  | er of Sacks of Cement                   | ·                                     | 1 <del>4</del> 4( | State         | Pluggi             | ng Agent:                        | atric        | k Sh      | istde        | -            |
| Description of Work I                                      | Dorforments                            |   |                                       |                   |               |                    |                                  | •            |           |              |              |
| C-71 Don   |  | bottom - Purp                           |                                       |                   | 1             |                    | 0                                | // 1         |           |              |              |
| ( Vinan  | 170                                    | UDTTOM - [UM                            | <u>2 C.I.m.en</u>                     | <u>f tu</u>       | _top          | 2 -                | Full                             | <u>" + C</u> | Kan       | <u>up</u>    | <b>_</b>     |
| Kigdowh  |  |   |                                       |                   |               |                    |                                  |              |           |              | _            |
|  |  |   |                                       |                   |               |                    |                                  |              |           |              |              |
|  |  | -                                       |                                       |                   |               |                    |                                  |              |           |              | -            |
|  |  |   |                                       |                   |               |                    |                                  |              |           |              | -            |
|  | ······································ |   |                                       |                   |               | _                  | •                                |              |           |              | <del>.</del> |
|  |  |   |                                       |                   |               |                    |                                  |              |           |              | -            |
| · · · · · · · · · · · · · · · · · · ·                      |  |   |                                       |                   |               |                    |                                  | <u>.</u>     |           |              | -            |
|  | */                                     |   |                                       |                   |               |                    |                                  |              |           |              |              |
|  |  |   |                                       |                   |               |                    |                                  |              |           |              | -            |
|  |  |   |                                       |                   |               |                    |                                  |              |           |              | •            |
|  |  |   |                                       |                   |               |                    |                                  | ·····        |           |              |              |
| ·  |  | · · · · · · · · · · · · · · · · · · ·   |                                       |                   |               |                    | ·                                | ,            | •         |              |              |
|  |  |   |                                       |                   |               |                    |                                  |              |           |              |              |
|  |  |   |                                       |                   |               |                    |                                  |              |           |              |              |
| Joints Feet Size   | <u>P</u>                               | ulled from Well;                        | Equipment                             | Joints            | Feet          | Size               |                                  | Run in       | Well:     |              |              |
|  |  |   | Packer                                |                   |               |                    |                                  |              |           |              |              |
| ·  |  |   | Anchor                                | <u> </u>          |               |                    | ļ                                |              |           |              |              |
|  |  |   | Polished Rod<br>Rods                  | ┦────┤            |               |                    |                                  |              |           |              |              |
|  |  |   | Rods                                  | ┉┈╴┟              |               |                    |                                  |              |           |              |              |
| 2  | 4                                      | 6' 8' 10'                               | Rod Subs                              | ╀╴╴╀              |               |                    | 2' 4'                            | 6'           | 8'        | 10'          |              |
|  |  |   | Pump                                  | ╋                 |               |                    | <u> </u>                         | <u> </u>     |           |              |              |
|  |  |   | Tubing                                | 1                 |               |                    |                                  | <b>.</b>     |           |              |              |
| 2  | 4'                                     | 6' 8' 10'                               | Tubing Subs                           | 1                 |               |                    | 2' 4'                            | 6            | 8'        | 10'          |              |
| <b></b>  |  |   | Barrel                                |                   |               | ,                  |                                  |              |           |              |              |
|  |  |   | Mud Anchor                            |                   |               |                    |                                  |              |           |              |              |
|  |  | Services                                | <u>Hours</u>                          | Pe                | <u>r Hour</u> |                    |                                  | <u>Amou</u>  | <u>nt</u> |              |              |
|  |  | Unit and Power Tools                    | 2                                     |                   | \$17          | 75.00              | \$                               | <b></b>      |           |              | ٦            |
|  |  | Road Time - Per hour                    | · · · · · · · · · · · · · · · · · · · |                   |               | 75.00              |                                  |              |           |              |              |
|  |  | Supervisor time                         |                                       |                   | \$4           | 10.00              |                                  |              |           |              |              |
| $\sim$   |  | Material Transfer                       |                                       |                   |               |                    | \$                               |              |           |              |              |
| N.   | · ~                                    | Swab Cups                               |                                       | Coles T           |               | _                  | \$                               |              |           |              |              |
| igned au   | P                                      | Date: 6-87                              | >                                     | Sales Ta          |               | ŀ                  | \$                               |              |           |              |              |
|  | <u> </u>                               |   |                                       | Total D           | ue            |                    | \$                               | <u> </u>     |           |              |              |

RECEIVE:



Acid & Cement

BURRTON, KS (620) 463-5161 FAX (620) 463-2104

▲ GREAT BEND, KS (620) 793-3366

**AMERICAN ENERGIES CORP.** 

3165241027

**POST OFFICE BOX 438** 

HAYSVILLE, KS 67060

(316) 524-1027 FAX

(316) 524-1225

Page: 16/24

Invoice

Page: 1

BILL TO:

P.O. BOX 516 **CANTON, KS 67428** 

FAX (620) 793-3536

INVOICE NUMBER: C37945-IN

LEASE: STAUFFEN 6

DATE ORDER SALESMAN ORDER DATE **PURCHASE ORDER** SPECIAL INSTRUCTIONS 06/12/2012 C37945 06/07/2012 **NET 30** QUANTITY U/M **ITEM NO./DESCRIPTION** D/C PRICE **EXTENSION** ÉA 1.00 CEMENT PUMP CHARGE 0.00 650.00 650.00 22.00 SAX 60-40 POZ MIX 4% GEL 0.00 9.69 213.18 1.00 EΑ POLY TRAILER RENTAL 0.00 250.00 250.00 THE FOLLOWING ITEMS ARE SPLIT BETWEEN 8 WELLS 1.00 Mł CEMENT MILEAGE 0.00 37.50 37.50 1.00 MI MILEAGE PU SPLIT 0.00 100.00 100.00 1.00 EA BULK CHARGE SPLIT 0.00 77.03 77.03 1.00 BULK TRUCK-TON MILES MI 0.00 223.70 223.70 COP-B **REMIT TO:** Net Invoice: 1.551.41 P.O. BOX 438 HAYSVILLE, KS 67060 FUEL SURCHARGE IS NOT TAXABLE AND IS ADDED TO CHSCO Sales Tax: 65.70 MILEAGE, PUMP AND OR DELIVERY CHARGES ONLY. Invoice Total: 1,617.11 RECEIVED BY NET 30 DAYS 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

Greased Oil Field Service reserves a security Interest in the goods cold until the same are paid for in full and reserve all the rights of a secured party under the Uniform Commercial Code

NO.9002

| JUN-12-2012 15:21 From:          | 3165241027   | To:2631851            | Page:17/24 |
|----------------------------------|--|-----------------------|------------|
| <b>BOTELIND</b><br>Acid & Cement |  | FIELD<br>ORDER        | № C 37945  |
| BOX 438                          | <ul> <li>HAYSVILLE, KANSAS 6706<br/>316-524-1225</li> <li>D</li> </ul> | 0<br>ATE <u>Sux 7</u> | 20_12      |
| IS AUTHORIZED BY:                | (NAME OF CUSTOMER)   |                       |            |
| Address                          | Čity   | S                     | itate      |
| To Treat Well As Follows: Lease  | Well No  | Customer Orde         | r Na       |
| Sec. Twp.<br>Range               | _ County Chrone  | S                     | tate       |

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 wall 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 50 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   | Agent        |  |
|-----------|---------------------------------------|--|--------------|--|
| CODE      | QUANTITY                              | DESCRIPTION  | UNIT<br>COST | AMOUNT   |
|           | <u>\</u>                              | Pup class to plan walk   |              | 6.0  |
|           | 32 mil                                | a man Mar & Contantes  |              | <u><u><u></u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u></u> |
|           |                                       | Palm - reaching second c- and  |              | 350  |
|           | TEmi                                  | - they go the denies toply & used  |              |  |
|           | TEach                                 | Par But you applie 3 the Par Mile liter 1                                    |              | 80c *  |
|           | <br>                                  |  | ·j           |  |
| •n •      |                                       |  |              |  |
|           |                                       |  | l.           |  |
|           |                                       |  |              |  |
|           |                                       |  |              |  |
|           |                                       |  |              |  |
|           |                                       |  |              |  |
|           |                                       |  |              |  |
|           |                                       |  |              |  |
|           | Wissen                                | Bulk Charge 127 Bole Soline Count  |              | 1.1.4  |
|           | 10.26                                 | Bulk Truck Miles   |              |  |
| r1        | · ·                                   | Process License Fee onGallons  |              |  |
|           |                                       | TOTAL BILLING  |              |  |
| certify 1 | that the above                        | material has been accepted and used; that the above service was perform      |              | and workmanli  |
| nanner    | under the dire                        | ction, supervision and control of the owner, operator or his agent, whose si | gnature app  | ears below.  |
| Copeland  | 1 Representativ                       | e the the  |              |  |
|           |                                       |  |              |  |
| Station   | the second                            | Well Owner, Operat   | lor or Agent |  |
| lemarks   | J-J                                   | 2. N. 285  |              |  |



#### TREATMENT REPORT



|                                       |   | •               | _                     |                                       | Type Treatment:                         |                       | Type Fluid | Gand Size )                            | uunds of Band             |
|---------------------------------------|---|-----------------|-----------------------|---------------------------------------|---|-----------------------|------------|--|---------------------------|
| Date S.S                              | <u></u>                                 | intrict         | × •                   | D, No                                 | Bidown                                  | Bbi./Gal              |            |  |                           |
| Company                               | Barene                                  |                 | gins Kasag.           |                                       |   |                       |            |  |                           |
| Well Nation /                         | A No                                    |                 | Ŭ2                    |                                       |   |                       |            |  |                           |
|                                       |   |                 |                       |                                       | #************************               |                       | /          |  | ************************* |
| Caunty                                |   |                 |                       |                                       | Flush                                   |                       |            | imerk settannonenne van                |                           |
|                                       |   |                 |                       |                                       | Treuted from                            |                       |            | ······································ | ····                      |
| ("antinir) Stre                       |   | Type & WI       |                       |                                       |   |                       |            |  |                           |
|                                       |   |                 |                       |                                       | L.L.D.M.                                |                       | lo         | annaalt. No. ft.,                      |                           |
|                                       |   |                 |                       |                                       | romana                                  |                       | LQ         | Mo. It.                                |                           |
|                                       |   |                 |                       | to                                    | Actual Volume of C                      | )))<br>/Water to Lond | Hale       |  | The second                |
| Furmation:.                           | • | ****            |                       | ······                                |   |                       |            |  |                           |
| Liner: Size.                          | TYPE & W                                | 't              | Top et                | . Boilom al                           | Pump Trucks. No.                        | Used: Bid             | <b>b.</b>  |  |                           |
| Ce                                    | mented; Yes/No.                         | . Performied fr | om                    | .ft, toft,                            | Auxiliary Equipment                     | n Bulk 30             | <u>~</u>   | 5 133                                  |                           |
| Tubing: Bise                          | e 🛦 🖤 L                                 |                 | Bwung at,             | ,                                     | Packer                                  |                       |            | Set ni.                                | *1                        |
| 24                                    | erforaled from                          |                 |                       |                                       | Auxiliary Tools                         |                       |            |  |                           |
|                                       |   | · /2            |                       |                                       | Plugaing or Bealing                     |                       |            |  |                           |
| litert Hole B                         | (14e.,                                  | <b>T.</b> D.    |                       | Ա. լզ                                 | • |                       |            |  |                           |
|                                       |   |                 |                       |                                       |   | <u> </u>              | <u> </u>   | Linle.                                 |                           |
| Commenter                             | Demandation                             |                 |                       |                                       | the last                                | KL                    | A          |  |                           |
|                                       | Representativ                           | e               |                       |                                       | Treater 7                               |                       | <u>/1</u>  |  |                           |
| TIMB<br>4. m / 5. m.                  |   | Cerios          | Total Fluid<br>Pumped |                                       |   | REMARK                | 8          |  |                           |
|                                       |   | 000104          |                       |                                       |   |                       | ·····      |  |                           |
| 11 12                                 |   |                 | l                     | Know Addr                             | - supert                                | 0_252'                | dow- 2     | the concil                             |                           |
|                                       |   |                 |                       | Rome Suga                             | <u>dece oro</u>                         | a Other               | wood in    |  |                           |
| :                                     |   |                 | 0                     | Ster m                                | iver as                                 | a) Older              |            |  |                           |
| :                                     |   |                 | 5-BAL                 | HA QUI                                | Contrad                                 | Jall.                 | poly of    | use ourt                               |                           |
| :                                     |   |                 |                       | 25 000                                | 100-610 000                             | + Ooly                | Lid h      | une cont                               |                           |
| 1127                                  | 1                                       |                 |                       | move l'un                             |   | E DOIN                | pipe.      |  |                           |
| -1712-1                               | ···                                     | t               | 1                     | 1.10/0-114                            | er                                      | - West-               |            |  |                           |
|                                       |   |                 | ł                     |                                       |   |                       |            |  |                           |
|                                       |   | ł               |                       |                                       |   |                       |            |  |                           |
| · · · · · · · · · · · · · · · · · · · |   | <u>+</u>        | ·                     |                                       |   |                       |            |  |                           |
|                                       |   |                 | <u> </u>              |                                       |   |                       |            |  |                           |
|                                       |   |                 | ·                     |                                       |   |                       |            |  |                           |
|                                       |   | <b></b>         |                       |                                       |   |                       |            |  |                           |
|                                       |   | <u></u>         | ļ                     |                                       |   |                       |            |  |                           |
| ;                                     |   | l               | 1                     |                                       | ····                                    |                       |            |  |                           |
| <u> </u>                              |   | ļ               |                       |                                       |   |                       |            |  |                           |
|                                       |   |                 |                       |                                       |   | _                     |            | <u> </u>                               |                           |
| :                                     |   |                 |                       |                                       |   |                       |            |  |                           |
|                                       |   |                 |                       |                                       |   |                       |            |  |                           |
|                                       |   |                 |                       |                                       |   |                       |            |  | Presidence -              |
| ;                                     |   |                 |                       | · · · · · · · · · · · · · · · · · · · | ·····                                   | <b>And Address</b>    |            |  | <del></del>               |
|                                       |   | 1               |                       |                                       | ····· •                                 |                       |            |  |                           |
| *                                     |   |                 | 1                     |                                       |   |                       | ·          |  |                           |
| <u> </u>                              | 1                                       | <u> </u>        | -                     | ┝ <u>──</u> ─ <i>───</i> <u>· •</u>   |   |                       |            | ·                                      | ·                         |
| ·                                     |   | <u> </u>        | ·                     |                                       |   |                       |            |  |                           |
|                                       |   | <b></b>         |                       |                                       |   |                       |            |  |                           |
| <u> </u>                              |   | <u> </u>        | +                     |                                       |   |                       |            |  |                           |
|                                       |   |                 | +                     |                                       |   |                       |            |  |                           |
|                                       |   | <b> </b>        |                       |                                       |   |                       |            |  |                           |
|                                       |   | ļ               | L                     |                                       |   |                       |            |  |                           |
|                                       |   | ļ               |                       |                                       |   |                       |            |  |                           |
|                                       |   |                 |                       |                                       |   |                       |            |  |                           |
| k<br>V                                |   |                 |                       | ,                                     |   | ·                     |            |  |                           |
|                                       | 1                                       | 1               |                       |                                       |   |                       | ·····      |  |                           |
| :                                     | 1                                       | 1               | 1                     |                                       |   |                       |            |  |                           |
|                                       | - <u>+</u>                              | <b> </b>        | <b> </b>              | ·····                                 |   |                       |            |  |                           |
|                                       |   |                 |                       |                                       |   |                       |            |  |                           |

## KGS Oil and Gas Well Database

Oil & Gas

Specific Well--15-017-20717

All Well Data

| API: 15-017-20717                               | Permit Date: Jan-17-1995     |
|---|------------------------------|
| KID: 1002894499                                 | Spud Date: Feb-01-1995       |
| Lease: STAUFFER                                 | Completion Date: Feb-14-1995 |
| Well 6  |                              |
| Original operator: YELLOW ROSE ENERGY           | Plugging Date:               |
| Current operator: American Energies Corporation |                              |
|   | Status: Inactive Well        |
| Field: Elmdale                                  | Total Depth: 1102            |
| Location: T19S R7E, Sec. 35                     | Elevation: 1355 GL           |
| NE SW NW  | Producing Formation:         |
| 1520 South, 1290 East, from NW corner           | IP Oil (bbl): 0              |
| Longitude: -96.63038                            | IP Water (bbl): 100          |
| Latitude: 38.358391                             | IP GAS (MCF): 15             |
| Lat-long from GPS                               |                              |
| County: Chase                                   |                              |

**ACO-1** and Driller's Logs

PDF files from the KGS

• ACO-1 Form

For information on software to view and use the files we distribute on our web pages, please view our File Format Tools page.

### Wireline Log Header Data

| Logger: Midwest Surveys                   | • Download Black and White Scan (Zip size: 366 k) |
|---|---|
| Tool: Gamma Ray Neutron                   |   |
| <b>Operator on log</b> Yellow Rose Energy |   |
| <b>Top:</b> 500; <b>Bottom:</b> 1099      |   |
| Log Date: Feb-23-1995                     |   |
| BHT: F                                    |   |
| Gamma Ray: Y                              |   |
| Spontaneous Potental:                     |   |
| Holdings at: Lawrence                     |   |
| For information on softw                  | are to view and use the files we distribute       |
| on our web pages, ple                     | ase view our <u>File Format Tools</u> page.       |

 $\left\| \right\|$ 

**Tops Data** 

http://chasm.kgs.ku.edu/apex/qualified.well\_page.DisplayWell?f kid=1002894499

7/11/2012

| NRM MUST BE TYPED  |   |
|--|---|
| STATE CORPORATION CONVISSION OF KANSAS                     | API NO. 15- 017-207170000   |
| OIL & GAS CONSERVATION DIVISION                            | County Chase  |
| ACO-1 WELL HISTORY<br>Description of Well and Lease        | <u>C-NW</u> Sec. 35 Twp. 19 Rge. 7 W  |
| rator: License # 31595                                     |   |
| Name: Yellow Rose Energy                                   | 1290 Fuer from B/W (circle one) Line of Section   |
| Address Box 448  | Footages Calculated from Nearest Outside Section Corner:  |
| Cottonwood Falls,  | NE, SE, (NW)or SW (circle one)  |
| City/State/Zip Kansas 66845                                | Lease Name Stauffer Well # 6  |
| rchaser:   | Field Name Elmdale  |
| erstor Contact Person: <u>Clay Sylvester</u>               | Producing Formation Ireland   |
| Phone (316) 273-6842                                       | Elevation: Ground 1355 KB   |
| ntractor: Name: Evans Energy                               | Total Depth PBTD CANCER AND   |
| License: 8509  | Amount of Surface Pipe Set and Cemented at200 <sup>3 Tubles of</sup> Feet   |
| lisite Geologist: None                                     | Multiple Stage Cementing Collar Used? Yes X No  |
| signata Type of Completion                                 | If yes, show depth set Feet   |
| New Veli Re-Entry Workover                                 | If Alternate II completion, cement circulated from  |
| OilSUDSIONTemp. Abd.                                       | feet depth to W/ sx cmt.  |
| Gas ENHR X SIGW Dry Other (Core, WSW, Expl., Cathodic, e   | etc) Drilling Fluid Management Plan   |
| Workover:  | (Data must be collected from the Reserve Pit) $8-30-85$   |
| Operator:  | Chloride content NA Fluid volumebbis  |
| -Well Name:  | Dewatering method used  |
| Comp. Date Old Total Depth                                 |   |
| Deepening Re-perf Conv. to inj/SWD                         |   |
| Plug Back PBTD Commingled Docket No.                       | Operator Name AUG 7 1995  |
| Dual Completion Docket No<br>Other (SHO or Inj?) Docket No | Lease NameLicense No  |
| 2/1/95 2/13/95 2/14/95                                     | Quarter SecTwpS Ring  |
| d Date Date Reached TD Completion Date                     | County Docket No.   |
|  |   |
| , YYM AVIG, WICHILA, NAMSAS OFZUZ, WITHIN IZU MAVE AT      | all be filed with the Kansas Corporation Commission, 130 S. Market<br>the spud date, recompletion, workover or conversion of a well.  |
| months if requested in writing and submitted with          | on side two of this form will be held confidential for a period of  |
| ILIIST, GRE GODY UI BLL WITELINE LOOS BOD GEOLOGIST MA     | ill report shall be attached with this form. ALL CEMENTING TICKETS<br>wells. Submit CP-111 form with all temporarily abandoned wells. |
|  |   |
| and the statements herein are condicte and correct to      | mulgated to regulate the oil and gas industry have been fully complied o the best of my knowledge.                                    |
| Class States   | a second a s                       |
|  | K.C.C. OFFICE USE ONLY  |
| le <u>Vice-President</u> Date                              | 8/21/95 C Wireline Log Received C Geologist Report Received   |
| spribed and sworn to before me this <u>22</u> day of       | designant .   |
|  | KCCND/Rep NGPA  |
| e commission Expires                                       | KGS Plug VOther<br>(Specify)  |
| e Commission Expires (e 1997)                              |   |
|  |   |
| AMAL JOAN L. BURTON  | Form ACO-1 (7-91)   |

|               | -70         | P1-    | 35          | SIDE THO         |               |                                   | 108845         |  |
|---------------|-------------|--------|-------------|------------------|---------------|-----------------------------------|----------------|--|
| Operator Name | Yellow Rose | Energy | N-          | Lease Name Staut | ffer          | Well #                            | 6              |  |
| sec. 35 Tup.  | 10"         | East   |             | county Chase     |               | A LEAST CONSTRUCTION OF 10        |                |  |
|               | N¥e         | . West | • • • • • • |                  | 3.00 t.3 - 12 | erria ciau e-an<br>Conta de Conta | n<br>Evidentia |  |

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface during test. Attach extra sheet if more space is needed. Attach copy of log.

| rill Stem Tests Take<br>(Attach Additional | Sheets.)  |   |                                       |   |   |   | s Sample                               |  |
|--|---|---|---------------------------------------|---|---|---|--|--|
| amples Sent to Geolo                       |   |   | Name<br>State                         |   |   | •   | Datim                                  |  |
| ores Taken                                 |   |   | o   <u>o S</u> ever                   | y   |   | 100 ()<br>Name of a local contraction of the second | +7 <del>60</del>                       |  |
| lectric Log Run (Submit Copy.)             | n ha <sup>1</sup> 4 an an 19<br>A 19 <mark>89</mark> a tao  | Yes No                                    | Irela                                 | nd  |   |   | •* +7 <del>60</del>                    |  |
| ist All: E.Logs Run:                       | in internet   | a dae regi eath gan.                      |                                       |   |   |   | NA CARA                                |  |
|  |   | auffer biffer biffer                      |                                       | na a constanta da series.<br>Antenno e a series de series d   | n a faran an an Arbitan | Erican<br>Maria<br>Maria Maria  |  |  |
| isal <u>ana manaka</u> la                  | t internet to be a final de la companya de la compa | n na marang kalan digagén                 | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | ang san ang sa<br>Ang san ang san | a Maria ana ang ang ang ang ang ang ang ang an  | (efit, f  | Haisbiss en                            |  |
|  |   | CASING RECORD                             | ال لکة يوني ال                        |   |   |   | Lisu soll                              |  |
| Purpose of String                          | Size Hole<br>Drilled  | Size Casing<br>Set (In 0.D.)              | Weight<br>Lbs./Ft.                    | Setting<br>Depth  | Type of<br>Cement   | # Sacks<br>Used   | Type and Percen<br>Additives           |  |
| Surface                                    | 9 7/8"  | 7"  | 20                                    | 200;  | A   | 85  | 3% CaCl2                               |  |
| Production                                 | 6 1/4"  | 4 1/2"                                    | 10.5                                  | 1066  | A   | 125   | -                                      |  |
|  |   | ;   |                                       |   | · · · · ·   |   |  |  |
|  | ADDITIONAL CE   | MENTING/SQUEEZE REC                       | ORD                                   | rand 41   |   | اير - بويود . د   |  |  |
| Purpose:                                   | Depth<br>Top Bottom   |   |                                       | Type and Percent Additives  |   |   |  |  |
| Protect Casing<br>Plug Back TD             |   |   |                                       |   |   |   |  |  |
| Plug Off Zone                              | I   |   |                                       | inne er se se   |   | lungan i Prat pat pagan i ya  | ······································ |  |
|  | PERFORATION<br>Specify Footage  | RECORD - Bridge Plu<br>of Each Interval P | igs Set/Type<br>Perforated            | (Amount and   |   | int Used)   | Depth                                  |  |
| • • •                                      |   |   |                                       | · · ·   |   |   |  |  |
| n an   | ·   |   |                                       | ويعاقبون والأراب  | 1.20  | rta da re   | 1. 17 E 83                             |  |
| * ***                                      | · · ·   |   |                                       | en ferial a co  |   |   | rthanar Arlang i i i                   |  |
| · · · · · · · · · · · · · · · · · · ·      |   |   | 1.2                                   | s de ser s  | 1 19 E.   | investigate   | 19.2                                   |  |
|  | <b>Size</b><br>2 3/8"   | Set At<br>1080'                           | Packer At                             | Liner Run   | 🗆 Yes 🕅   | No  | · · · · · · · · · · · · · · · · · · ·  |  |
| Date of First, Resume<br>Test 4/1/95       | d Production,   |   | cing Method                           |   | ing Gas L   | ift 🗆 ot  | her (Explain)                          |  |
| stimated Production<br>Per 24 Nours        | <b>01</b> U   | Bbls. Gas<br>15                           | Ncf Water                             |   | Gas-Dil   |   | Gravity                                |  |
|  |   |   |                                       |   |   |   |  |  |

Other (Specify)

...