



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

KANSAS CORPORATION COMMISSION 1094165  
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

Form	CP4 - Well Plugging Record
Operator	BEREXCO LLC
Well Name	Seeber B 2
Doc ID	1094165

Producing Formations

Formation	Top	Bottom	Total Depth
Herrington/Winfield	1781	1838	3549
Lansing	3243	3301	3549
Conglomerate	3469	3474	3549
Reagan Sand	3536	3549	3549

# QUALITY WELL SERVICE, INC.

5676

Federal Tax I.D. # 481187368

Home Office 324 Simpson St., Pratt, KS 67124

Heath's Cell 620-727-3410  
Office / Fax 620-672-3663

Rich's Cell 620-727-3409  
Brady's Cell 620-727-6964

Date	9-17-12	Sec.	10	Twp.	19	Range	15	County	Barton	State	Ks	On Location		Finish	2130	
Lease	Saber B		Well No.		2		Location Albert 2E 2 1/2 S E into									
Contractor								Owner								
Barexco								To Quality Well Service, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.								
Type Job								T.D.								
PTA																
Hole Size								Depth								
Csg.								Charge To								
5								Barexco								
Tbg. Size								Street								
2 3/8								3350'								
Tool								City								
								State								
Cement Left in Csg.								Shoe Joint								
								The above was done to satisfaction and supervision of owner agent or contractor.								
Meas Line								Displace								
								Cement Amount Ordered 400sx 60/40 4% Gel								
<b>EQUIPMENT</b>								11 Gel on side 500 # Hulls. Used 345sx.								
Pumptrk	8	No.	Cody					Common					210			
Bulktrk	7	No.	<del>Paul Mike</del>					Poz. Mix					135			
Bulktrk		No.						Gel.					23			
Pickup		No.	Heath					Calcium								
<b>JOB SERVICES &amp; REMARKS</b>								Hulls 400 #								
Rat Hole								Salt								
Mouse Hole								Flowseal								
Centralizers								Kol-Seal								
Baskets								Mud CLR 48								
D/V or Port Collar								CFL-117 or CD110 CAF 38								
								Sand								
1st Pumped 11sx 60l 50sx cement								Handling								368
100 # hulls @ 3350'								Mileage								15
<b>FLOAT EQUIPMENT</b>																
2nd Pumped 100sx cement 100 # Hulls								Guide Shoe								
@ 1800'								Centralizer								
								Baskets								
3rd Pumped 115sx cement 100 # Hulls								AFU Inserts								
@ 900'								Float Shoe								
								Latch Down								
4th Pumped 70sx cement 100 # hulls 5 1/2 csg.																
circulated to surface																
								Pumptrk Charge								PTA
								Mileage								15
								Tax								
								Discount								
X Signature								Total Charge								