



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

**KANSAS CORPORATION COMMISSION 1095934**  
**OIL & GAS CONSERVATION DIVISION**  
**WELL PLUGGING RECORD**  
 K.A.R. 82-3-117

Form CP-4  
March 2009

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

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 OIL & GAS SERVICES, LLC 056507

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:  
Koss 11 KS

DATE 3-22-12	SEC 12	TWR 34	RANGE 10	LOCATION	JOB START	JOB FINISH
LEASE # 2626	WELL # 1	LOCATION	Has 2 chgs	KS 2 1/2 S 14 S 2 hole	12:30 PM	1:00 PM
OWNER				COUNTY	STATE	
OLD OR NEW (Circle one)				Recher	KS	

CONTRACTOR  
TYPE OF JOB PTA  
HOLE SIZE \_\_\_\_\_ TD \_\_\_\_\_  
CASING SIZE 4 1/2 DEPTH \_\_\_\_\_  
TUBING SIZE 2 3/8 DEPTH 625  
DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_  
TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_  
PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_  
MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_  
CEMENT LEFT IN CSG. \_\_\_\_\_  
PERFS. \_\_\_\_\_  
DISPLACEMENT \_\_\_\_\_

OWNER \_\_\_\_\_  
CEMENT AMOUNT ORDERED 150 bags 4 1/2 gal.  
used 88 lbs  
COMMON \_\_\_\_\_ 53 @ 16.25 = 861.25  
POZMIX \_\_\_\_\_ 35 @ 8.5 = 297.50  
GEL \_\_\_\_\_ 3 @ 21.25 = 63.75  
CHLORIDE \_\_\_\_\_ @ \_\_\_\_\_  
ASC \_\_\_\_\_ @ \_\_\_\_\_

EQUIPMENT  
PUMP TRUCK CEMENTER Robert & Bob S.!  
# 417 HELPER Woody O. S.  
BULK TRUCK # 410 DRIVER Kevin R. S.  
BULK TRUCK # \_\_\_\_\_ DRIVER \_\_\_\_\_

REMARKS:

Loose hole with 16 bbls water mixed 12 1/2 gal. 4 1/2 gal. displaced 1/2 bbl. Water to clean lines each 400 tubing mixed 3 bbl to top of 1100s w/ 11 wash up clean

SERVICE  
DEPTH OF JOB \_\_\_\_\_  
PUMP TRUCK CHARGE \_\_\_\_\_ 1350.00  
EXTRA FOOTAGE \_\_\_\_\_ @ \_\_\_\_\_  
MILEAGE Had 35 @ 7.00 = 245.00  
MANIFOLD 1 hr 35 @ 4.00 = 140.00  
TOTAL 1635.00

CHARGE TO: RUB Oil and Gas  
STREET \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PLUG & FLOAT EQUIPMENT  
@ \_\_\_\_\_  
@ \_\_\_\_\_  
@ \_\_\_\_\_  
@ \_\_\_\_\_  
TOTAL 1635.00

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 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 Logan Logan  
SIGNATURE [Signature]

SALES TAX (if any) 293.93  
TOTAL CHARGES 3752.58  
DISCOUNT 2050 IF PAID IN 30 DAYS  
9net 3721.24 85 8-22  
before tax

8-21-12



<b>Company</b> RTB	<b>Customer Order #</b> aw			<b>City</b> aw		<b>ST</b>	<b>Zip</b>
<b>Billing Address</b>				<b>Legal Description (coordinates)</b> S12 T34S R10W			
<b>Lease &amp; Well #</b> Palllock #1				<b>Field Name</b>		<b>Casing Weight</b>	
<b>Nearest Town</b> Hazelton	<b>County / Parish</b> Barber	<b>ST</b> KS	<b>Rig</b> K3	<b>Permit #</b>	<b>Price Zone</b>	<b>Casing Size</b> 4.5"	<b>Casing Weight</b>
<b>Fluid</b> 1250	<b>Level (surf.)</b>	<b>Reading from</b> REL	<b>Customer T.D.</b> 4550	<b>Pioneer T.D.</b> 4550	<b>Elevation</b>	<b>KB Elevation</b> GL	
<b>Engineer</b> E Bates	<b>Truck Driver</b> D Hezel		<b>Crew Members</b>		<b>Unit #</b> 13	<b>Miles</b>	

Product Code	Description	Qty	Unit Price	Depth		\$ Amount
				From	To	
1	Set 4.5 Briggs Plog	4543		4550	1750	00
1	Dump Barrel 25K's cnt	7		4550	910	00
	Truck Rental			A13	950	00

THE UNDERSIGNED HEREBY CERTIFIES THAT HE HAS FULL AUTHORITY TO ENTER INTO THIS CONTRACT ON BEHALF OF THE CUSTOMER AND AGREES TO THE TERMS AND CONDITIONS SET FORTH ON THE REVERSE SIDE HEREOF.

**Customer Approval**  
Name Printed: [Signature]  
Signature / Date: 8-21-12

**Pioneer Field Representative**  
Name Printed: Craig A Bates  
Signature / Date: Craig A Bates 8-21-12

SUBTOTAL	3610 <sup>00</sup>
DISCOUNT	960 <sup>00</sup>
SUBTOTAL	2650 <sup>00</sup>
TAX	193.45
NET TOTAL	2843.45

**PIONEER OFFICE USE ONLY - Manager Approval**  
Name Printed: [Signature]  
Signature / Date: 8-21-12