

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

1102847

Form CP-4

March 2009

Type or Print on this Form

Form must be Signed

All blanks must be Filled

WELL PLUGGING RECORD

| ODEDATOR: L' " | | | 3-117 | ADIA: 15 | | |
|--|------------------------------|---------------|---------|--|-----------------------|--|
| DPERATOR: License #: | | | | API No. 15 - | | |
| | | | | -1 | ription: | |
| Address 1: | | | | | | wp S. R East We |
| Address 2: | | | | | Feet from | |
| City: | | | | Feet from East / West Line of Section | | |
| Contact Person: | | | | Footages Calculated from Nearest Outside Section Corner: | | |
| | | | _ | | NE NW | SE SW |
| Type of Well: (Check one) | | | | County: | | |
| Water Supply Well C | | SWD Permit #: | | Lease Nar | ne: | Well #: |
| BNHR Permit #: Gas Storage Permit #: Is ACO-1 filed? Yes No If not, is well log attached? Yes No | | | | Date Well Completed: | | |
| | | | NO | | | oved on: (Da |
| Producing Formation(s): List A | , | , | | by: | | (KCC District Agent's Nan |
| Depth to Top: Bottom: T.D Depth to Top: Bottom: T.D | | | | Plugging Commenced: | | |
| Depth to | • | | | Plugging C | Completed: | |
| Depth to | 10p: Bottoi | m:T.D | | | | |
| Show depth and thickness of a | all water, oil and gas forma | tions. | | | | |
| | | | | Record (Surface, Conductor & Production) | | |
| Formation | Content | Casing | Size | (| Setting Depth | Pulled Out |
| | | | 0.20 | | g coming a cp in | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Describe in detail the mainter cement or other plugs were us | | - | | • | | ds used in introducing it into the hole. |
| Plugging Contractor License #: | | | Name: . | ame: | | |
| Address 1: Addre | | | Address | ss 2: | | |
| City: | | | | State: + + | | |
| Phone: () | | | | _ | | |
| Name of Party Responsible for | r Plugging Fees: | | | | | |
| State of County, | | | | , SS. | | |
| | | | | | ployee of Operator or | Operator on above-described we |

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.

(Print Name)