

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

the same are true and correct, so help me God.

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1103624

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 #:			APIN	No. 15				
Name:			I					
Address 1:				Sec T	wp S. R East West			
Address 2:				Feet from	North / South Line of Section			
City:				Feet from East / West Line of Section				
Contact Person:			Foota	ages Calculated from Near	est Outside Section Corner:			
Phone: ()				NE NW	SE SW			
Type of Well: (Check one)			ic Coun	ty:				
Water Supply Well	Other:	SWD Permit #:		Lease Name: Well #: Date Well Completed:				
ENHR Permit #:	Gas Sto	orage Permit #:	Date					
Is ACO-1 filed? Yes	No If not, is well	I log attached? Yes	A.		roved on: (Date)			
Producing Formation(s): List A		r sheet)	by:		(KCC District Agent's Name)			
Depth to		m: T.D	l Plugo	ging Commenced:				
Depth to		m: T.D	Plugg	Plugging Completed:				
Depth to	o Top: Botto	m: T.D						
Show depth and thickness of		ations.						
Oil, Gas or Water				ing Record (Surface, Conductor & Production)				
Formation	Content	Casing	Size	Setting Depth	Pulled Out			
					_			
cement or other plugs were us	. 00		•		ods used in introducing it into the hole. If			
Plugging Contractor License #	# :		Name:					
Address 1:			Address 2:					
City:			State	:	Zip:+			
Phone: ()								
Name of Party Responsible fo	or Plugging Fees:							
State of	County, _		, SS.					
	(Print Name)			Employee of Operator or	Operator on above-described well,			

Submitted Electronically

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

Form	CP4 - Well Plugging Record
Operator	Anderson Energy, Inc.
Well Name	MUNSCH 2
Doc ID	1103624

Producing Formations

Formation	Тор	Bottom	Total Depth
Lansing I	3452	3460	
Lansing J	3476	3476	
Lansing H	3431	3431	
Topeka	3033	3033	
Conglomerate	3593	3598	

ALLIED OIL & GAS SERVICES, LLC 053585

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31 RUSSELL, KANSAS 67665					SERVICE POINT: Lover Beady + S				
DATE 10-26-12	sec. 5	TWP.	RANGE	Š CALI	LED OUT		ON LOCATION	JOB START	JOB FINISH
	WELL#	2	LOCATION	Hay's . K	5 55	14	Ws W	CEYYTY	STATE
OLD OR NEW (Cir	cle one)		1/270	,,,,				1,03	
CONTRACTOR	Exercis	s Well	94411		OWNER			'A'	
TYPE OF JOB O	11 1101	e plag						pa.	
HOLESIZE 7	1/6				CEMEN	T	24	, 1	
CASING SIZE V	1/2	DEI	TH		AMOUN	T ORI	DERED A	5K3 607	1. Closs A
TUBING SIZE 2	114	DEI	тн 3 <i>51.</i>	2	4040	υ2	4+401 V	1810	

TUBING SIZE	2 <i>14</i> DEPTH 35/2	40402 4	Fac1 14	610	
DRILL PIPE	DEPTH	/	/		
TOOL	DEPTH				40
PRES. MAX	MINIMUM	COMMON	120	@ 17.90	2.148, dg
MEAS, LINE	SHOE JOINT	POZMIX	80	@ <u>9.35</u>	748.22
CEMENT LEFT	IN CSG. A	GEL	15	@ 23.40	351.00
PERFS.		CHLORIDE		@	
DISPLACEMEN	T fresh usser	ASC		@	
	EOUIPMENT	-Plo Seal	50	@ 2.97	148.50
		590 m		@	
	on the last	43 Hulls		@ 31-05	93.15
PUMPTRUCK	CEMENTER DUSTYA Chambers !	7.		@	
# 7.24	HELPER Joh Isaac 2			@	
BULK TRUCK		***************************************	and the second s	@	
# 473	DRIVER Toel Monagen 1	And the second s		@	***************************************
BULK TRUCK				_@	

BI DRIVER HANDLING 214.99 V MILEAGE 8.97 X

REMARKS:

CHARGE TO: And	lerson Energ	y	
STREET	*		
CITY	STATE	7.IP	

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 X Teiry W. Piesker SIGNATURE J. Tenry W. Riesker

SERVICE

DEPTH OF JOB		3512	
PUMP TRUCK CHA	RGE_	1250.9	22
EXTRA FOOTAGE_		@	
MILEAGE L/U	u 8	@ <u>7-70</u>	61.60
MANIFOLD		@	
huv	u 8	@4.40	35, 20
		@	

TOTAL 11346.80

TOTAL 4. 208.

PLUG & FLOAT EQUIPMENT

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	@		
	@		
	@	************************	.,
	@	-	
HILLIAN STATE OF THE STATE OF T	. @		

SALES TAX (If Any). TOTAL CHARGES. IF PAID IN 30 DAYS