

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

1107200

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 #:				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: + Contact Person:				Feet from East / West Line of Section Footages Calculated from Nearest Outside Section Corner: NE NW SE SW											
									Type of Well: (Check one)	Oil Well Gas Well	OG D&A Cathod	ic C	County		
									Water Supply Well Other: SWD Permit #:				Lease Name: Well #:		
ENHR Permit #: Gas Storage Permit #:				Date Well Completed:											
Is ACO-1 filed? Yes No If not, is well log attached? Yes No				The plugging proposal was approved on: (Date)											
Producing Formation(s): List A	All (If needed attach another	sheet)	b	y:		(KCC District Agent's Name)									
Depth to	o Top: Botto	m: T.D	_	Pluaain	na Commenced:										
Depth to	o Top: Botto	m: T.D													
Depth to	o Top: Botto	m:T.D	'	luggiii	ig Completed.										
Show depth and thickness of	all water, oil and gas forma	ations.													
Oil, Gas or Wate	r Records		Casing Rec	ord (S	urface, Conductor & Produc	etion)									
Formation	Content	Casing	Size		Setting Depth	Pulled Out									
cement or other plugs were u	sed, state the character of	same depth placed from (bot	ttom), to (top) for ea	ach plug set.										
Plugging Contractor License #	#:		Name:												
Address 1:			Address 2:												
City:			S	tate:_		Zip:+									
Phone: ()															
Name of Party Responsible for	or Plugging Fees:														
State of	County, _		,	SS.											
(Print Name)				E	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

LIED CENENTING CO., LLC. 32704

To the property of the control of th		,	"		
To Allied Cementing Co., 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 Those Capps	CHARGETO: K&B oiltgas STREET STATE ZIP		MCX MCX MCX MCX MCX	IDW LOCATION Sharen EJ	JSSELL, KANSAS 67665
SALES TAX (If Any) 299,71 SALES TAX (If Any) 299,71 TOTAL CHARGES DISCOUNT 821,/3 IF PAID IN 30 DAYS At 3284.50	PLUG & FLOAT EQUIPMENT	SERVICE SERVICE DEPTH OF JOB FUND TRUCK CHARGE EXTRA FOOTAGE MANIFOLD AA+UAide SERVICE 6 29 1250 1250 MANIFOLD AA+UAide SERVICE 6 29 1350 13	HANDLING 143.5 75.3 @ @ @ @ @ @ @ @ @ @ @ @ @ @ @ @ @ @ @	OWNER R& B ONE CEMENT AMOUNT ORDERED 120 SX 60:4 AMOUNT	SERVICE POINT: 108 FINISH ONLOCATION 108 START 108 FINISH



CEMENTING LOG

STAGE NO.

100	200 150 100	tt	Depths: Top	Date // O District M M Company K & B District M M Company K & B District M M Company K & B District M M District M Distr
3 12	3.7% d-10 3.7% d-10 3.7% d-10	Lin. ft./Bbl	Bottom Bottom Collars T.D ft. P.B. to ft.	Ticket No. 37774 Rig 5ha 107 cc 077 Rig 5ha 107 cc 077 Well No. 3 Well No. 3 State 65 State 65 State 65 Squeeze 1 Misc 1 Intermediate 1 Production 1 Liner 1 Weight 275
Mix 30 sx cement Did in	(acing at 624 = 100 & hade of had water) (st Circ. 100 & hade of had water) 7:0. w/ \$\frac{1}{2} \tangle \ta	Float: Type Depth Depth Centralizers: Quantity Plugs Top Btm Stage Collars Special Equip Filed Stage Fluid Type Filed Stage Stage Collars Amt Bbls. Weight Mud Type Filed Stage	Used 471-302 356 > 250 lanufacturer	Spacer Type:

, BBLS.

PIONEER

Pioneer Wireline Services, LLC

Service Order No.

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Date: 11-8-12 40001

Phone: 785.625.3858 Fax: 785.625.8635

Every
Project
is Personal

THE UNDERSIGNED HEREBY CERTIFIES THAT HE HAS FULL AUTHORITY TO ENTER INTO THIS CONTRACT ON BEHALF OF THE CLIENT AND AGREES TO THE TERMS AND CONDITIONS SET FORTH ON THE REVERSE SIDE HEREOF. Product Code Description Crew Client Info Name Printed Well Info Sharrow. 3700 SCh Ceine Company # liew & esea Billing Address Ernst 「たは、共る SPUH Shot S CONTRACTOR Cement Level (surf.) 12 13 13 5 fortonts Bridge Unit Price : A.A. From: BarBar County/Parish Sedding Charge Signature / Date Ò PLug Truck Driver CRaig Reading from 1-8-1 ŹΫ́ 2998.0 3000 华 398 5 Butch 7 Customer T.D. 4343.0 4350 Field Name 1/2/ Sharos Permit# Crew Members Pioneer T.D. Ş Price Zone 5 2 67 Client Order# S 0 3 0 NET TOTAL SUBTOTAL DISCOUNT 12 TAX SUBTOTAL 0 Q Legal Description Casing Size Depth was Silvery on 4350 3000 4350 6024 Hood Hood HOH 엌. $8'k_i \mathcal{B}_i$ 950.00 \$ Amount Casing Weight 800.00 1087,50 1050.00 1050.00 1087.50 HL Seliw 47 26 00

Name Printed

17854

Signature / Date

Name Printed

Signature / Date

11-88-17

PIONEER OFFICE USE ONLY - Manager Approval

Pioneer Field Representative