



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

KANSAS CORPORATION COMMISSION 1131478
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



CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

Post
will file
MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8678
Fax 620/431-0012

INVOICE

Invoice # 257504

Invoice Date: 03/25/2013 Terms: 10/10/30,n/30

Page 1

ABERCROMBIE ENERGY
5510 OIL CENTER ROAD SOUTH
GREAT BEND KS 67530
(620)793-8186

CLOVIS 1-18
39439
18-22-33
03-20-2013
KS




COPY

| Part Number | Description | Qty | Unit Price | Total |
|-------------|-------------------------|--------|------------|---------|
| 1131 | 60/40 POZ MIX | 290.00 | 15.1000 | 4379.00 |
| 1118B | PREMIUM GEL / BENTONITE | 997.00 | .2500 | 249.25 |
| 1107 | FLO-SEAL (25#) | 72.00 | 2.8200 | 203.04 |
| 1118B | PREMIUM GEL / BENTONITE | 400.00 | .2500 | 100.00 |
| 1105 | COTTONSEED HULLS | 500.00 | .5500 | 275.00 |

| Sublet Performed | Description | Total |
|------------------|---------------------------|---------|
| 9996-130 | CEMENT MATERIAL DISCOUNT | -520.63 |
| 9995-130 | CEMENT EQUIPMENT DISCOUNT | -132.00 |

| Description | Hours | Unit Price | Total |
|---------------------------------|-------|------------|--------|
| 463 P & A OLD WELL | 1.00 | 835.00 | 835.00 |
| 463 EQUIPMENT MILEAGE (ONE WAY) | 15.00 | 5.00 | 75.00 |
| 466 MIN. BULK DELIVERY | 1.00 | 410.00 | 410.00 |

VENDOR NUMBER _____
VOUCHER NUMBER _____
VERIF OF RECEIPT _____
CODE NUMBER AMOUNT
1354050
CLOV

CEMENT TO PLUG WELL
APPROVAL  _____
VERIFIED ACCURACY _____

Amount Due 6932.38 if paid after 04/24/2013

| | | | | | | | |
|--------|---------|-----------|-----|---------|---------|----|---------|
| Parts: | 5206.29 | Freight: | .00 | Tax: | 365.48 | AR | 6239.14 |
| Labor: | .00 | Misc: | .00 | Total: | 6239.14 | | |
| Sublt: | -652.63 | Supplies: | .00 | Change: | .00 | | |

Signed _____ Date _____



CONSOLIDATED
Oil Well Services, LLC

257504

TICKET NUMBER 39439
LOCATION Oakley, KS
FOREMAN Kelly Gabel

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

| DATE | CUSTOMER # | WELL NAME & NUMBER | SECTION | TOWNSHIP | RANGE | COUNTY |
|---------------------------------------|------------|--------------------|-------------------------------|----------|-------|------------|
| 3-20-13 | 1113 | Clouvis 1-18' | 18 | 22 | 33 | KS Lyon |
| CUSTOMER <u>Abercrombie Energy</u> | | | TRUCK # DRIVER TRUCK # DRIVER | | | |
| MAILING ADDRESS | | | TRUCK # DRIVER TRUCK # DRIVER | | | |
| CITY STATE ZIP CODE | | | TRUCK # DRIVER TRUCK # DRIVER | | | |

JOB TYPE ONP HOLE SIZE _____ HOLE DEPTH _____ CASING SIZE & WEIGHT H 1/2"
CASING DEPTH _____ DRILL PIPE _____ TUBING _____ OTHER Perfs 4659-64
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: safety meeting, rigged up on well, pumped 100bl water with 100# hulls, 60 SKS 60/40 Poz 4% gel 1/4" flo-seal & 200# hulls, mixed 400# gel, mixed 15 SKS 60/40 Poz 4% gel 1/4" flo-seal tied onto backside mixed 15 SKS with 300#, topped casing off with 30 SKS, washed out pumps & lines, rigged down

*Thank You
Kelly & Crew*

| ACCOUNT CODE | QUANTITY or UNITS | DESCRIPTION of SERVICES or PRODUCT | UNIT PRICE | TOTAL |
|--------------|-------------------|------------------------------------|------------|---------|
| 5405A | 1 | PUMP CHARGE | 835.00 | 835.00 |
| 5406 | 15 mi | MILEAGE | 5.00 | 75.00 |
| 1131 | 290 SKS | 60/40 Poz | 15.10 | 4379.00 |
| 1118B | 997 # | Bentonite | .25 | 249.25 |
| 1107 | 72 # | Flo-seal | 2.82 | 203.04 |
| 5407 | 12.47 | Ton mileage delivery | 1.62 | 416.00 |
| 1118B | 400 # | Bentonite (529ccr) | .25 | 100.00 |
| 1105 | 500 # | Cottonseed Hulls | .55 | 275.00 |
| | | | | 6526.29 |
| | | | | 6526.29 |
| | | | | 5873.66 |
| | | | SALES TAX | 365.48 |
| | | | ESTIMATED | |
| | | | TOTAL | 6239.14 |

Completed

Just 100%

4:30 PM AUTHORIZATION [Signature]

TITLE Production Foreman DATE 3-20-13

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.


PIONEER*Post
well file***Invoice**

Page: 1

MAR 27 2013

Pioneer Wireline Services, LLC
P.O. Box 202567
Dallas, TX 75320-2567
Phone 303.655.0299INVOICE NUMBER: 1-41517
INVOICE DATE: 3/20/2013
CLIENT: ABERCR**Sold To**ABERGROMBIE ENERGY LLC
Attention: Accounts Payable
10209 West Central, Suite 2
Wichita, KS 67212 USA

| | |
|-----------|----------------|
| LEASE | Clovis |
| WELL# | 1-18 |
| COUNTY | Logan |
| CLIENT PO | |
| DUE DATE | 4/19/2013 |
| ENGINEER | Hagan, David M |

| QUANTITY | DESCRIPTION | UNIT PRICE | EXTENSION |
|----------|--------------------|------------|-----------|
| 1.000 | PERFORATED | 1,116.00 | 1,116.00 |
| 1.000 | PORTABLE MAST UNIT | 650.00 | 650.00 |
| 1.000 | Truck Rental | 2,200.00 | 2,200.00 |
| -1.000 | Discount | 2,289.00 | -2,289.00 |
| | LAST ITEM | | |

THANK YOU FOR YOUR BUSINESS

TERMS: If Company has an approved open account with Pioneer, invoices are payable NET 30 days from date of invoice. If Company does not have an approved open account with Pioneer, all sums are payable prior to performance of services or delivery of equipment, products, or materials. Company agrees to pay interest on any unpaid balance from the date payable until paid at the highest lawful contract rate applicable, but never to exceed 18% per annum. In the event Pioneer employs an attorney for collection of any account, Company agrees to pay reasonable attorney fees plus all collection and court costs.

| | | |
|--|-----------------------|----------|
| | Subtotal | 1,677.00 |
| | Freight | 0.00 |
| | Sales Tax | 0.00 |
| | Payment/Credit Amount | 0.00 |
| | Balance: | 1,677.00 |

Handwritten: f
Avel
3-20-13



Every Project Is Personal

Pioneer Wireline Services, LLC

Service Order No.

1- 41517

Phone: 785.625.3858

Fax: 785.625.8635

Date: 03-20-2013

| | | | | | | | | |
|-------------|---------------------------------------|------------------------------|------------------------------|---------------|--------------------------------|-----------------------|---|---------------|
| Client Info | Company <u>Abercrombie Energy LLC</u> | | | | Client Order # <u>Verbal</u> | | | |
| | Billing Address | | | | City | | ST | Zip |
| Well Info | Lease & Well # <u>Clovis No1-18</u> | | | Field Name | | | Legal Description (coordinates) <u>18-125-334</u> | |
| | Nearest Town | County / Parish <u>Loren</u> | ST <u>KS</u> | Rig | Permit # | Price Zone | Casing Size | Casing Weight |
| | Fluid | Level (surf.) | Reading from | Customer T.D. | Pioneer T.D. | Elevation <u>3161</u> | KB Elevation <u>3172</u> | |
| Crew | Engineer <u>D Hagan</u> | | Truck Driver <u>D Walker</u> | | Crew Members <u>C Drilling</u> | | Unit # <u>18</u> | Miles |

| Product Code | Description | Q-ty | Unit Price | Depth | \$ Amount |
|------------------------------|--------------------------|------------|------------|-------------|----------------|
| | | | | From To | |
| <u>17800</u> <u>17802</u> | <u>Perforate</u> | <u>1x2</u> | <u>2</u> | <u>2650</u> | <u>1116.00</u> |
| | <u>2647.5</u> | | | | |
| | <u>25</u> | | | | |
| | <u>2650</u> | | | | |
| <u>10011</u> | <u>Mast Trailer T1</u> | | | | <u>650.00</u> |
| <u>10000</u> | <u>Truck Rental No18</u> | | | | <u>2208</u> |

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.

Thank You!
David

| | |
|----------------------|----------------------|
| Client Approval | |
| <u>Jason Schuler</u> | <u>Jason Schuler</u> |
| Name Printed | Signature / Date |
| | <u>3-20-13</u> |

| | |
|------------------------------|------------------|
| Pioneer Field Representative | |
| <u>David Hagan</u> | <u>3-20-13</u> |
| Name Printed | Signature / Date |

| | |
|-----------|----------------|
| SUBTOTAL | <u>3966.00</u> |
| DISCOUNT | <u>2289</u> |
| SUBTOTAL | |
| TAX | |
| NET TOTAL | <u>1677.00</u> |

RC
3-22-13

| | |
|--|------------------|
| PIONEER OFFICE USE ONLY - Manager Approval | |
| <u>Om</u> | <u>3-21-13</u> |
| Name Printed | Signature / Date |