



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

KANSAS CORPORATION COMMISSION 1145136
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.

(Print Name) Employee of Operator or Operator on above-described well,

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

PO Box 93999
Southlake, TX 76092

Voice: (817) 546-7282
Fax: (817) 246-3361

INVOICE

Invoice Number: 136303

Invoice Date: May 17, 2013

Page: 1

Bill To:

K & B Norton Oil & Inv. LLC
1209 W. Park Grove Dr.
Manhattan, KS 66503-2469

Now Includes:



Customer ID	Field Ticket #	Payment Terms	
Norton	60175	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-03	Oakley	May 17, 2013	6/16/13

Quantity	Item	Description	Unit Price	Amount
		Edwards #1		
123.00	MAT	Class A Common	17.90	2,201.70
82.00	MAT	Pozmix	9.35	766.70
7.00	MAT	GEI	23.40	163.80
52.00	MAT	Flo Seal	2.97	154.44
220.22	SER	Cubic Feet	2.48	546.15
446.13	SER	Ton Mileage	2.60	1,159.94
1.00	SER	Rotary Plug	2,483.58	2,483.58
45.00	SER	Pump Truck Mileage	7.70	346.50
45.00	SER	Light Vehicle Mileage	4.40	198.00
1.00	EQP	8.5/8 Wooden Plug	107.64	107.64
1.00	CEMENTER	Alan Ryan		
1.00	EQUIP OPER	Wayne McGhghy		
1.00	OPER ASSIST	Chris Helpingstine		

ALL PRICES ARE NET, PAYABLE
30 DAYS FOLLOWING DATE OF
INVOICE. 1 1/2% CHARGED
THEREAFTER. IF ACCOUNT IS
CURRENT, TAKE DISCOUNT OF

\$ 1,625.68

ONLY IF PAID ON OR BEFORE
Jun 11, 2013

Subtotal	8,128.45
Sales Tax	634.02
Total Invoice Amount	8,762.47
Payment/Credit Applied	
TOTAL	8,762.47

ALLIED OIL & GAS SERVICES, LLC

060175

Federal Tax I.D. # 20-8651475

REMIT TO P.O. BOX 93999
SOUTHLAKE, TEXAS 76092

SERVICE POINT: Dakota, KS

DATE <u>5/17/13</u>	SEC. <u>5</u>	TWP. <u>15</u>	RANGE <u>35</u>	CALLED OUT	ON LOCATION	JOB START <u>5:00</u>	JOB FINISH <u>6:00pm</u>
LEASE <u>Edwards</u>	WELL # <u>1</u>	LOCATION <u>Russell Sping B70 270 95</u>			COUNTY <u>Wagon</u>	STATE <u>Ks</u>	
OLD OR NEW (Circle one)		<u>3W Swint</u>					

CONTRACTOR L.D. Drilling
 TYPE OF JOB OTD Rotary
 HOLE SIZE 7 7/8 T.D.
 CASING SIZE 8 5/8 DEPTH
 TUBING SIZE DEPTH
 DRILL PIPE 4 1/2 DEPTH 2460'
 TOOL DEPTH
 PRES. MAX MINIMUM
 MEAS. LINE SHOE JOINT
 CEMENT LEFT IN CSG.
 PERFS.
 DISPLACEMENT

OWNER Same
 CEMENT AMOUNT ORDERED 205 60/42 400 yd
14 FCB

COMMON	<u>103</u>	@ <u>17.20</u>	<u>2201.20</u>
POZMIX	<u>82</u>	@ <u>9.15</u>	<u>766.20</u>
GEL	<u>7</u>	@ <u>23.40</u>	<u>163.80</u>
CHLORIDE		@	
ASC		@	
<u>Flo Seal</u>	<u>52</u>	@ <u>2.33</u>	<u>154.40</u>
HANDLING	<u>220</u>	@ <u>2.48</u>	<u>546.15</u>
MILEAGE	<u>260</u>	@ <u>9.9/4 mi</u>	<u>1159.24</u>
			TOTAL <u>4992</u>

EQUIPMENT

PUMP TRUCK CEMENTER Alan Ryan
 # 922 HELPER Wayne McShigby
 BULK TRUCK # 396 DRIVER Chris Helpingline
 BULK TRUCK # DRIVER

REMARKS:

mix 254K @ 2460'
mix 1005K @ 1370'
mix 405K @ 360'
mix 105K @ 40'
mix 705K RH

SERVICE

DEPTH OF JOB	<u>2460'</u>	
PUMP TRUCK CHARGE	<u>2483.59</u>	
EXTRA FOOTAGE	@	
MILEAGE	<u>45 miles</u>	@ <u>7.20</u> <u>346.50</u>
MANIFOLD	@	
<u>45x45 miles</u>	@ <u>4.40</u>	<u>198.00</u>
		TOTAL <u>3028.09</u>

CHARGE TO: KB Norton
 STREET _____
 CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

<u>8 5/8 wooden plug</u>	@	<u>107.64</u>
	@	
	@	
	@	
		TOTAL <u>107.64</u>

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.

SALES TAX (If Any) _____
 TOTAL CHARGES 8,128.42
 DISCOUNT 1,625.68 IF PAID IN 30 DAYS
6,502.73 Net

PRINTED NAME _____
 SIGNATURE Ruhl Wilson