



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

KANSAS CORPORATION COMMISSION 1148455
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

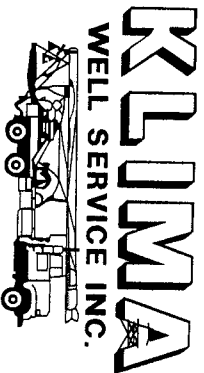
Describe in detail the manner in which the well is plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same depth placed from (bottom), to (top) for each plug set.

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



P.O. Box 48
Great Bend, KS
67530

Phone - 620-793-8888
Fax - 620-792-4416

Invoice

Date	Invoice #
2/23/2011	33300

Bill To
Loewen Operating
P.O. Box 335
Canton, Kansas 67428-0335

*SW Easton 611
Party lease
plug well #1*

Called By	
Carrman Decker	
Terms	Due Date
Net 30 Days	3/25/2011
	Rig #
	Rig 4

Lease/Supplies	Description of Work & Materials Furnished	Quantity	Rate	Amount
Jantz #1	02-07-11 Drove to location and rigged up. Ran 3-7/8" bit on tubing. Tagged obstruction at 452 feet. Rigged up Klima's pump and swivel. Drilled to 459 feet. Rigged down pump and swivel. Pulled tubing and bit. Tied onto casing and tried to circulate around to brading head. Ran tubing opened ended to 438 feet. Circulated cement to surface. Pulled tubing. Tore down and cleaned up location. (8 hours)	8	180.00	1,440.00T
Pump & Swivel	8 hours minimum	8	120.00	960.00T
Haul Pump & Swi...	2 hours	2	85.00	170.00T
Paint, Solvent & T...			20.00	20.00
Thank you for your business.		Subtotal		\$2,590.00
		Sales Tax (7.3%)		\$187.61
		Total		\$2,777.61
		Payments/Credits		\$0.00
		Balance Due		\$2,777.61

*PA. 3 16 11
OIL 1973*

Phone 587-3333

KLIMA WELL SERVICE, INC.

REPORT

P. O. Box 48

33300

Date 2-7-11

GREAT BEND, KANSAS 67530

Company Jensen Operating

Called by Carmen Becker

Address Mr. Peterson

E.O. or F.O. No. _____

Lease Jenits

Well No. 1

WELL PULLING REPORT

JTS.	FT.	PULLED	WELL RECORD	JTS.	FT.	RUN		
			MUD ANCHOR					
			PERF.					
			BARREL					
			SEATING NIPPLE					
			TUBING					
			TUBING					
			TUBING SUBS					
			STANDING VALVE					
			TRAVELING VALVE					
			PUMP					
			PUMP SUB.					
			RODS					
			RODS					
			RODS					
			ROD SUBS					
			POLISH ROD					
			POLISH ROD LINER					
Unit, Operator & Crew of		2 Men & Crew Car	Hrs.	8	Per Hour	180.00	Amount	1440.00
Fuel Surcharge								

Pump & Seivel 8 hrs 1130.00
 Haul pump + Seivel

Amount
 State Sales Tax 189.61
 Paint, Solvent & Thread Dope 20.00
TOTAL 2229.61

Remarks: Ripped up. Ran 3 3/8" bit on tubing. stopped at obstruction @ 452'. Ripped up Klima's pump and seivel. Slid pipe to 459'. Ripped down pump and seivel. Pulled tubing and bit. bit ends cutting and tried to circulate around to breaking part. Ran tubing then on day 2 438' circled cement to surface. Pulled tubing. obstruction and cleaned up location

John Davis
 Thanks you

Date Work Commenced 2-7-11 Date Work Completed 2-7-11
 By John A. Mertz
 KLIMA WELL SERVICE, INC.

COPELAND

POST OFFICE BOX 438
 HAYSVILLE, KS 67060
 (316) 524-1225
 (316) 524-1027 FAX

Invoice

Acid & Cement

BURRTON, KS ♦ GREAT BEND, KS
 (620) 463-5161 (620) 793-3366
 FAX (620) 463-2104 FAX (620) 793-3536

BILL TO:
 LOEWEN OPERATOR, INC.
 P.O. BOX 335
 CANTON, KS 67428-0335

SW Canton

INVOICE NUMBER:
 C37090-IN

LEASE: JANZ 1

plug well

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE ORDER	SPECIAL INSTRUCTIONS	
02/10/2011	C37090		02/07/2011		NET 30	
QUANTITY	U/M	ITEM NO./DESCRIPTION	D/C	PRICE	EXTENSION	
1.00	EA	CEMENT PUMP CHARGE	0.00	600.00	600.00	
245.00	SAX	60-40 POZ MIX 4%	0.00	9.69	2,374.05	
34.00	MI	CEMENT MILEAGE PUMP TRUCK	0.00	3.00	102.00	
4.50	HR	OVERAGE CHARGE	0.00	75.00	337.50	
34.00	MI	CEMENT MILEAGE PU TRUCK	0.00	1.00	34.00	
245.00	EA	BULK CHARGE	0.00	1.25	306.25	
366.52	MI	BULK TRUCK - TON MILES	0.00	1.10	403.17	
REMIT TO:		COP-B		Net Invoice:		4,156.97
P.O. BOX 438				MCPCO Sales Tax:		68.44
HAYSVILLE, KS 67060				Invoice Total:		4,225.41
RECEIVED BY _____		NET 30 DAYS				

*pd. 4/14/11
 MK. 1994*

There will be a charge of 1.5% "per month" (18% annual rate) on all accounts over 30 days past due.

POPPELWIND

Acid & Cement

TREATMENT REPORT

Acid Stage No.

Date: Feb 7 2011 District: BARRETT J. O. No.

Company: LOWEN OPERATING

Well Name & No.: SEANZ 1

Location: MS PRESS Field: AK State: AK

Casing: Size: 5 1/2 Type & Wt.: Set at: ft.

Formation: Perf.: to

Formation: Perf.: to

Liner: Size: Type & Wt.: Top at: ft. Bottom at: ft.

Commented: Yes/No. Perforated from: ft. to: ft.

Tubing: Size & Wt.: 2 3/8 Bvung at: 450' ft.

Perforated from: ft. to: ft.

Open Hole Rise: ft. P.H. to: ft.

Type Treatment: Amt. Bbl./Gal. Type Fluid Sand Size Pounds of Sand

Blowdown: Bbl./Gal.

..... Bbl./Gal.

..... Bbl./Gal.

..... Bbl./Gal.

Treated from: ft. to: ft. No. ft.

from: ft. to: ft. No. ft.

from: ft. to: ft. No. ft.

Actual Volume of Oil/Water to Load Hole: Bbl./Gal.

Pump Trucks: No. Used: 3 Bbl. 393 Bbl. Twin

Auxiliary Equipment: 135 T 313 Bbl.

Packer: Set at: ft.

Auxiliary Tools: Set at: ft.

Injecting or Sealing Material: Type: 2HTS scales (60-40-45% Poz

Company Representative: Greg Bell Treater: Greg Bell

Remarks: On location, Access Job, start rig up. 9:15 trying to

shell down from 450'

start rig to plug full tubing out. Tie on 8 1/2

3 Bbl. load. good suction up 200' stop pump

3/4 1000 1/2 RPM rate start taking up rate. well head is down.

3 RPM rate

3 RPM rate. no blow on 8 1/2. Shut down. Holding 150'

1 1/2 RPM rate. no blow on 8 1/2. Shut down. Holding 150'

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