

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

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1148538

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: _____

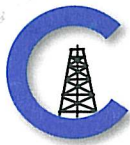
State of _____ County, _____, ss.

(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



CONSOLIDATED
Oil Well Services, LLC

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

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
Fax 620/431-0012

INVOICE

Invoice # 259054

Invoice Date: 05/22/2013 Terms: 0/0/30,n/30

Page 1

ALTAVISTA ENERGY INC
4595 K-33 HIGHWAY
P.O. BOX 128
WELLSVILLE KS 66092
(785) 883-4057

BALDWIN WEST FW-4
41888
1-15-20
05-21-2013
KS

| Part Number | Description | Qty | Unit Price | Total |
|-------------|-------------------------|-------|------------|--------|
| 1124 | 50/50 POZ CEMENT MIX | 30.00 | 11.5000 | 345.00 |
| 1118B | PREMIUM GEL / BENTONITE | 51.00 | .2200 | 11.22 |

| Description | Hours | Unit Price | Total |
|---------------------------------|-------|------------|---------|
| 495 P & A NEW WELL | 1.00 | 1085.00 | 1085.00 |
| 495 EQUIPMENT MILEAGE (ONE WAY) | .00 | 4.20 | .00 |
| T-106 WATER TRANSPORT (CEMENT) | 1.00 | 120.00 | 120.00 |
| 510 MIN. BULK DELIVERY | 1.00 | 61.33 | 61.33 |

Parts: 356.22 Freight: .00 Tax: 26.01 AR 1648.56
Labor: .00 Misc: .00 Total: 1648.56
Sublt: .00 Supplies: .00 Change: .00

Signed _____ Date _____

BARTLESVILLE, OK
918/338-0808

EL DORADO, KS
316/322-7022

EUREKA, KS
620/583-7664

PONCA CITY, OK
580/762-2303

OAKLEY, KS
785/672-8822

OTTAWA, KS
785/242-4044

THAYER, KS
620/839-5269

GILLETTE, WY
307/686-4914

CUSHING, OK
918/225-2650

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

259054

TICKET NUMBER 41888

LOCATION 0 ftawa KS

FOREMAN Fred Mader

FIELD TICKET & TREATMENT REPORT CEMENT

| | | | | | | |
|----------------------------------|------------|---------------------|----------|----------|---------|--------|
| DATE | CUSTOMER # | WELL NAME & NUMBER | SECTION | TOWNSHIP | RANGE | COUNTY |
| 5/21/13 | 3244 | Baldwin Unit # FW-4 | SW 1 | 15 | 20 | DG. |
| CUSTOMER Altavista Energy Inc | | | | | | |
| MAILING ADDRESS P.O. Box 128 | | | | | | |
| CITY | STATE | ZIP CODE | TRUCK # | DRIVER | TRUCK # | DRIVER |
| Wellsville | KS | 66092 | 712 | Eric Mad | | |
| | | | 495 | Har Bee | | |
| | | | 505/1106 | Gas Ric | | |
| | | | 510 | Sex Tuc | | |

| | | | |
|--------------------------|------------------------|---------------------|---------------------------------------|
| JOB TYPE <u>plug</u> | HOLE SIZE _____ | HOLE DEPTH _____ | CASING SIZE & WEIGHT <u>2 7/8 EUE</u> |
| CASING DEPTH <u>900'</u> | DRILL PIPE <u>1"</u> | TUBING <u>to TD</u> | OTHER _____ |
| SLURRY WEIGHT _____ | SLURRY VOL _____ | WATER gal/sk _____ | CEMENT LEFT in CASING <u>Full</u> |
| DISPLACEMENT <u>N/A</u> | DISPLACEMENT PSI _____ | MIX PSI _____ | RATE <u>1-1 1/2 BPM</u> |

REMARKS: Hold crew meeting. Rig ran 1" Tubing to TD. Fill to Surface w/
Cement. Pull 1" Tubing. Top off Well w/ Cement. Squeeze 55Ks
Cement into formation. Shut in well. Wash out 1" Tubing.

Total 30 Sks 50/50 Per Mix Cement 2% Gel

TOS Inc -

Joe Maden

[illegible]

Bayin 3737

AUTHORIZATION

TITLE

DATE _____

| |
|-----------|
| SALES TAX |
| <hr/> |
| ESTIMATED |
| TOTAL |

26.01

164856

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