

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

Form CP-4 March 2009 Type or Print on this Form Form must be Signed All blanks must be Filled

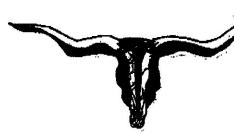
WELL PLUGGING RECORD K.A.R. 82-3-117

OPERATOR: License #:			API No. 15								
			Spot Description:								
Address 1:					Sec	Twp S. R	East West				
Address 2:			Feet from North / South Line of Section								
City:	State:	Zip:+		Feet from East / West Line of Section							
Contact Person:			Footages Calculated from Nearest Outside Section Corner:								
Phone: ()			NE NW SE SW								
Type of Well: (Check one)		= -		County: _							
Water Supply Well		SWD Permit #:		Lease Na							
ENHR Permit #:	_	orage Permit #:	-, I	Date Well Completed:							
Is ACO-1 filed? Yes	—	ell log attached? Yes	No	The plugging proposal was approved on: (Date)							
Producing Formation(s): List				by:		(KCC Dis	t rict Agent's Name)				
Depth to	•	om: T.D		Plugging	Commenced:						
•	•	om: T.D		Plugging	Completed:						
Depth to	o Top: Bott	om:T.D									
			I								
Show depth and thickness of	all water, oil and gas form	nations.									
Oil, Gas or Wate	r Records		Casing F	Record (Sur	face, Conductor & Prod	luction)					
Formation	Content	Casing	Size		Setting Depth	Pulled Out					
		ged, indicating where the muc f same depth placed from (bo		•		ods used in introducing	it into the hole. If				
Plugging Contractor License	Name: _										
Address 1:			Address	2:							
City:				State:		Zip:	+				
Phone: ()				-							
Name of Party Responsible for	or Plugging Fees:										
State of	County,										
	•				anlovee of Operator of	r Operator on abo	vo-described well				
	(Print Name)			=[1	inproyee or Operator of	Detailed on abo	re-uescribed 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

FIELD SERVICE TICKET



A DIVISION OF ADVANCED DRILLING TECHNOLOGIES, LLC.

AND INVOICE LONGHORN CEMENTING CO.

P.O. BOX 203 YLIMA, COLORADO 80759 Phone: 970-848-0799 Pax; 970-848-0798

DATE OF	<u> </u>		·							0	ATE <u>Left</u>	<u>z/13</u>	T)(CKET	VO. 220	67
JOB	DISTRICT						WE		OLO	PROD	IN.	, <u> </u>	WDW	CUSTON ORDER	WER	
CUSTOMER	RRI	•						LEASE		2. 1	-/-/	1.11.		hel	WELL N	
ADDRESS	1498	us	Here	2/_	***************************************	V/2 (V/A)		COUN	TY .	A.	o ipn n	256	STATE	\mathcal{A}_{-}		
CITY St	OTY St Francis STATE KS						Cheyenne D									
AUTHORIZED BY	Lime					1000		2000			1m+	Kirk.				
TYPE JOB: PL	, last	yn+	Maha					EQUIP	MENT	11.	5+7111			28000	01102	***
TIPE JUBI	4	DEPTH	FT,	CEMENT	-	ΚD		AND DATA		ACKS 🔲	TRUCK CAL	ED.	7.00	- III	DATE AN	A TIME
SIZE HOLE:		DEPTH	FT.	SACKS	BRAND	TYPE	76	OLE L		DMIXES	ARRIVED AT				PM AM	1
BIZE & WT. CASTING	3 VSEP C	DEPTH	PT.	30	 				4115	_	PM	L				
SIZE & WT. O PIPE O	PRIE OR TUBING DEPTH FT.					START OPERATION										
TOP PLUGS TYPE: WEIGHT OF SLURRY: 14 T LBS./GAL VOLUME OF SLURRY 1.32																
						RELEASED AM										
	MAX DE	PTH	PT.		SACKS CEMEN	VT TREATE PERSUIPE	TING	H 4/20	% OF		MILES FROM	STATION	TO WELL		<u>PM</u>	L
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products, and/or	r aupplies Inc	tuden all o d liede	and only the	ese terms t of this co	and condition entract witho	ng abbes	ring o	ent or ar	office	i back of the of Advanced Co.	aload Driving 100	hnologies	al or auda I, LLC.	titule të:	rma endi/or co	ondition
ITEM / PRICE	 		21/1 201								(WELL OWNER	OPERAT	OR, OON	TRACTO	OR AGEN	<u>1)</u>
MATERIAL, EQUIPMENT AND SERVICES						3U8	ED		UNI	T QUANTIT	ע ע	NIT PRI	CE	\$ AMO	UNT	
Pump + Depth Chance					6.0%			2	DO	0	2000	O				
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SERVICE REPRESENTATIVE (PIELD SERVICE ORDER NO.

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY:

(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)