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

1149996

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

Form CP-4

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

OPERATOR: License #:	API No. 15
Name:	Spot Description:
Address 1:	
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) Oil Well Gas Well OG D&A Cathodic Water Supply Well Other: SWD Permit #: SWD Permit #: SWD Permit #: ENHR Permit #: Gas Storage Permit #: Gas Storage Permit #: SWD Permit #: SWD 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)	County: Well #: 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 (Surfa	ce, Conductor & Produc	tion)
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	g Fees:		
State of	County,	, SS.	
	(Print Name)		or or Operator on above-described well
haing first duly sugars an eath source. The	at I have knowledge of the factor	totomonto, and mottors harain contained, and the la	a of the choice described well is so filed on

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

Taylor Printing. Inc.	19 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -				-	
	Total Charge				and the second of the second s	Signature
	Discount		L	چې چې		
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	de n/us	4 010 9156		****		205× = 104
			Latch Down			
		-	Float Shoe	and winer plug	= 105× 0	5th alla @ 410'
			AFU Inserts			
			Baskets		r' = 405x	4th Deg @ 270
			Centralizer			
			Guide Shoe		6 = 100 SX	3rd plug @ 76
	MENT	FLOAT EQUIPMENT				
		ŀ	Mileage 30	×.	320 = 255	and plug @ 130
		64	Handling Z			
			Sand	A.	1515 = 505X	15 Plug @ 36
		CFL-117 or CD110 CAF 38	CFL-117 or			D/V or Port Collar
		ω	Mud CLR 48			Baskets
			Kol-Seal			Centralizers
>			Flowseal			Mouse Hole
			0 at			
			Hulls	RKS	JOB SERVICES & REMARKS	
			Calcium			Pickup No.
			Gel. 9			Bulktrk No.
		00	Poz. Mix	llau d		Bulktrk No. 20
		55	Common	< 00%		Pumptrk No. 2
					EQUIPMENT	
14 E10	2555× (0/140 1	ount Ordered	Cement Am		Displace	Meas Line
agent or contractor.	The above was done to satisfaction and supervision of owner agent or contractor.	as done to satisfaction	The above wa	int	Shoe Joint	Cement Left in Csg.
	State		City		Depth	Tool
		. (Street		Depth	Tbg. Size
		berth oner	Charge /		Depth	Csg.
o work as listed.	wner or contractor to du	nd helper to assist o	cementer ar	3690	ر T.D.	Hole Size
t and furnish	To Quality Well Service, Inc. You are hereby requested to rent cementing equipment and furnish	ebv requested to rer	— To Quality W You are here		Di Luen Č	200
			Owner		Ka ost	Contractor Why te
\$ \$	ESN Nito	KS IM N ST	ition /{cey's	(Location	Well No.	Lease Rondy
3:30-4:00		LS X	Soulds	17 8	0/ 68	Date 3-5-13
Finish	On Location	State	County	Range		
6964		Brady ³ s		ដ	Office / Fax 620-672-3663	
3409	24 Rich's Cell 620-727-3409	att, KS 67124 Ric	ison St., Pri	Home Uttice 324 Simpson St., Pratt, KS 67124 Ri	Home Utt Cell 620-727-3410	Heath's Ce
		481187368	Tax I.D. # 481	Federal Ta	:	
5831	, INC.	RVICE			QUAL	