



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

KANSAS CORPORATION COMMISSION 1154286
OIL & GAS CONSERVATION DIVISION
WELL PLUGGING RECORD
 K.A.R. 82-3-117

Form CP-4
 March 2009

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

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

ALLIED OIL & GAS SERVICES, LLC 0593346

Federal Tax I.D.# 20-5975304

REMIT TO P.O. BOX 93999
SOUTH LAKE, TEXAS 76092

SERVICE POINT:

Garret Bend, TX

DATE <u>5-6-13</u>	SEC. <u>28</u>	TWP. <u>32S</u>	RANGE <u>10W</u>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
LEASE <u>McGuire</u>	WELL # <u>Z</u>	LOCATION <u>Shanca</u>	<u>15</u>	<u>12</u>	<u>15</u>	COUNTY <u>Parmer</u>	STATE <u>TX</u>
<input checked="" type="checkbox"/> OLD OR NEW (Circle one)							

CONTRACTOR _____ OWNER _____
 TYPE OF JOB OHP/PTA
 HOLE SIZE 7 7/8 T.D. _____
 CASING SIZE _____ DEPTH _____
 TUBING SIZE 2 7/8 DEPTH 620
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. -
 PERFS _____
 DISPLACEMENT freshwater
 EQUIPMENT _____

PUMP TRUCK CEMENTER Dianna Chambers
 # 366 HELPER Mike Steinhorn
 BULK TRUCK _____ DRIVER Kevin Verpey
 # 341
 BULK TRUCK _____ DRIVER _____
 # _____

REMARKS:

plug 566's fresh water to clear tubing
plug 15 566's gel
mix 50 GFS 60/40 44 gal water
mix 40 GFS 60/40 44 gal water
mix 20 GFS 60/40 44 gal water
plug down
plug down

CHARGE TO: R+B O-14 Gas
 STREET _____
 CITY _____ STATE _____ ZIP _____

CEMENT AMOUNT ORDERED 130 SKS 604 Class B
box 002 44 gal water

COMMON	<u>78</u>	@ 17.90	<u>1,396.20</u>
POZMIX	<u>52</u>	@ 3.35	<u>174.20</u>
GEL	<u>90</u>	@ 23.40	<u>2106.00</u>
CHLORIDE			
ASC			
<u>50 gal</u>			
<u>110.5 gal</u>	<u>32</u>	@ 2.97	<u>951.24</u>

HANDLING 165.75 @ 2.98 494.91
 MILEAGE 660 x 10 x 2.60 171.25
 TOTAL 3,027.60

SERVICE

DEPTH OF JOB _____			
PUMP TRUCK CHARGE _____	@ 1250.	<u>90</u>	
EXTRA FOOTAGE _____	@ 7.70	<u>77.00</u>	
MILEAGE <u>10</u>	@ 7.40	<u>74.00</u>	
MANIFOLD <u>10</u>	@		
TOTAL			<u>1371.00</u>

PLUG & FLOAT EQUIPMENT

_____	@		
_____	@		
_____	@		
_____	@		
TOTAL			

SALES TAX (if any) 40
 TOTAL CHARGES 4,398.40
 DISCOUNT 879.25 IF PAID IN 30 DAYS
3,518.88

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.

PRINTED NAME Jerry D. Shaddock
 SIGNATURE Henry J. Shaddock
Frank Fossil