



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

**KANSAS CORPORATION COMMISSION 1155049**  
**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 054722

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31  
RUSSELL, KANSAS 67665

SERVICE POINT:  
Russell KS

DATE <u>8-9-13</u>	SEC <u>9</u>	TWP <u>7S</u>	RANGE <u>21W</u>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
LEASE <u>Ken Unit</u>		WELL # <u>1</u>	LOCATION <u>Nickodemus KS.</u>			COUNTY <u>Graham</u>	STATE <u>KANSAS</u>
OLD OR NEW (Circle one)		<u>3N 2W 2N 14W</u>					

CONTRACTOR Western Well Service  
 TYPE OF JOB Plug ABANDONED Well  
 HOLE SIZE \_\_\_\_\_ T.D. \_\_\_\_\_  
 CASING SIZE 5 1/2 DEPTH 3797  
 TUBING SIZE 2 7/8 DEPTH @ 3564  
 DRILL PIPE \_\_\_\_\_ DEPTH @ 1816  
 TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_  
 PRES. MAX 500# MINIMUM 300#  
 MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_  
 CEMENT LEFT IN CSG. \_\_\_\_\_  
 PERFS. \_\_\_\_\_  
 DISPLACEMENT \_\_\_\_\_

OWNER \_\_\_\_\_  
 CEMENT (USED 2753x)  
 AMOUNT ORDERED 300 SX 40 48 GEL  
14# F10 Seal 13 SX GEL ON SIDE  
200 # HULLS

COMMON	<u>165</u>	@ <u>17.90</u>	<u>2953.50</u>
POZMIX	<u>110</u>	@ <u>9.35</u>	<u>1028.50</u>
GEL	<u>23</u>	@ <u>23.40</u>	<u>545.64</u>
CHLORIDE		@	
ASC		@	
HULLS	<u>200#</u>	@ <u>35.00</u>	<u>140.00</u>
F10 Seal	<u>13#</u>	@ <u>29.75</u>	<u>222.75</u>
HANDLING	<u>1/3</u>	@ <u>2.48</u>	<u>863.12</u>
MILEAGE	<u>50</u>	@ <u>260</u>	<u>1846.40</u>
TOTAL			<u>7600.02</u>

**EQUIPMENT**

PUMP TRUCK CEMENTER Glenn G.  
 # 417 HELPER Woody O.  
 BULK TRUCK DRIVER Joe G.  
 # 481  
 BULK TRUCK DRIVER \_\_\_\_\_  
 # \_\_\_\_\_

**REMARKS:**  
Run 2 7/8 Tubing to 3564' spot  
13 SX GEL, 50 SX Cement w/ 200# HULLS  
Pulled to 1816 & Circulated Cement  
to Surface w/ 200 SX, Pulled Tubing  
CAP OFF w/ 25 SX Cement  
8 1/2" BACKSIDE COULD NOT PUMP  
INTO @ 300#. THANK'S

CHARGE TO: W.M. KS.  
 STREET \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**SERVICE**

DEPTH OF JOB \_\_\_\_\_  
 PUMP TRUCK CHARGE \_\_\_\_\_  
 EXTRA FOOTAGE @ 1250.00  
 MILEAGE @ \_\_\_\_\_  
 MANIFOLD @ \_\_\_\_\_  
HUME @ 70 385.00  
LV MS @ 40 200.00  
 TOTAL 1855.00

**PLUG & FLOAT EQUIPMENT**

\_\_\_\_\_  
 @ \_\_\_\_\_  
 @ \_\_\_\_\_  
 @ \_\_\_\_\_  
 @ \_\_\_\_\_  
 @ \_\_\_\_\_  
 TOTAL \_\_\_\_\_

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 \_\_\_\_\_  
 SIGNATURE Tom Beren

SALES TAX (If Any) \_\_\_\_\_  
 TOTAL CHARGES 7455.02  
 DISCOUNT 2363.75 IF PAID IN 30 DAYS  
\$7091.27