



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

KANSAS CORPORATION COMMISSION 1159597  
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 #: \_\_\_\_\_  
 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

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

Form CP-4  
March 2009  
Type or Print on this Form  
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OPERATOR: License #: 33450  
Name: Terra Firma Exploration Inc  
Address 1: 12601 Jayson Ln  
Address 2: \_\_\_\_\_  
City: Wichita State: Ks Zip: 67235 + 1446  
Contact Person: Kerry Parham  
Phone: (316) 722-3367  
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: 3192 Bottom: 3196 T.D. \_\_\_\_\_  
\_\_\_\_\_ Depth to Top: 3217 Bottom: 3223 T.D. 3543  
\_\_\_\_\_ Depth to Top: \_\_\_\_\_ Bottom: \_\_\_\_\_ T.D. \_\_\_\_\_

API No. 15 - 007-10215-00-01  
Spot Description: \_\_\_\_\_  
SW SW NW Sec. 10 Twp. 31 S. R. 15  East  West  
2310 Feet from  North /  South Line of Section  
330 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: Bober  
Lease Name: National Gypsum Well #: 1-A  
Date Well Completed: \_\_\_\_\_  
The plugging proposal was approved on: 4/30/2013 (Date)  
by: Eric MacLaren (KCC District Agent's Name)  
Plugging Commenced: 5/4/2013  
Plugging Completed: 5/7/2013

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
		Surface	10 3/4	923	None
		Production	5.5	3543'	2500'

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.

Sanded Casing Back to 3120' spotted 5s x cement with dump Bailer on sand-  
Layed 2500' 5 1/2 casing down. Ran Tubing In to 950'-pumped 20s x gel + 75s x 60/40poz  
49gel-2nd Pumped 75s x cement- 3rd circulated 30s x from 60' to surface

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.

Signature: \_\_\_\_\_

# ALLIED OIL & GAS SERVICES, LLC 059854

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 93999  
 SOUTHLAKE, TEXAS 76092

SERVICE POINT:  
Medicine Lodge KS

DATE <u>05/07/13</u>	SEC. <u>10</u>	TWP. <u>31s</u>	RANGE <u>15w</u>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
LEASE <u>National Gas</u> WELL # <u>A-1</u> LOCATION <u>See City, South on 1st Ave 2mi, west on Whitehnde Rd Past Shop</u>						COUNTY <u>Barber</u>	STATE <u>KS</u>
<input checked="" type="radio"/> OLD OR NEW (Circle one)							

CONTRACTOR Clarke Corp  
 TYPE OF JOB OHF  
 HOLE SIZE 7 7/8 T.D.  
 CASING SIZE 10 1/4 DEPTH 923  
 TUBING SIZE 2 3/8 DEPTH 976  
 DRILL PIPE DEPTH  
 TOOL DEPTH  
 PRES. MAX 500 MINIMUM  
 MEAS. LINE SHOE JOINT  
 CEMENT LEFT IN CSG.  
 PERFS.

DISPLACEMENT Fresh H<sub>2</sub>O  
**EQUIPMENT**

PUMP TRUCK CEMENTER Jason Thinesel  
 # 471/265 HELPER Jake Heard  
 BULK TRUCK  
 # 381/252 DRIVER Ryan Reeves  
 BULK TRUCK  
 # DRIVER

REMARKS:  
Good cicc Thru out

OWNER Terra Firma Expl  
**CEMENT**  
 AMOUNT ORDERED 20 cu Gal, 180 sq 60:40:4% Gel

COMMON	<u>A 108</u>	@ <u>17.90</u>	<u>1933.20</u>
POZMIX	<u>12</u>	@ <u>9.35</u>	<u>673.20</u>
GEL	<u>26</u>	@ <u>23.40</u>	<u>608.40</u>
CHLORIDE		@	
ASC		@	
		@	
		@	
		@	
		@	
		@	
		@	
		@	
		@	

HANDLING 223 @ 2.48 553.04  
 MILEAGE 9.04/25/2.60 588.22  
**TOTAL 4356.06**

**SERVICE**

DEPTH OF JOB 1250.00  
 PUMP TRUCK CHARGE  
 EXTRA FOOTAGE @  
 MILEAGE 25 @ 7.70 192.50  
 MANIFOLD @  
LV 25 @ 4.40 110.00

CHARGE TO: Terra Firma Expl  
 STREET \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TOTAL 1552.50

**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.

SALES TAX (If Any) \_\_\_\_\_  
 TOTAL CHARGES 5908.56

PRINTED NAME Mark Morganstern  
 SIGNATURE Mark Morganstern

DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS  
(Net) 4726.84